



DOANE UNIVERSITY

SYLLABUS

COU 610 - Psychopathology

Course Content

<i>Course Number:</i>	COU 610
<i>Course Title:</i>	Psychopathology
<i>Course Dates:</i>	May 22, 2019-July 17, 2019
<i>Credit Hours:</i>	3 Credits
<i>Instructor:</i>	Coral Frazell, PhD., MA, LIMHP, LADC
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<i>Office Hours:</i>	By Appointment
<i>Classroom:</i>	TBD
<i>Meeting Times:</i>	Wednesdays, 6:00-10:30 p.m.

Course Description

Intended for career professionals in the mental health field, the course studies the wide spectrum of behavior, cognitive and emotional conditions affecting children, adolescents, and adults. Incorporating current psychological, sociological and educational research, class work involves an applied, as well as conceptual, holistic study of both healthy and abnormal maladaptive mental health conditions. As a foundation for effective counseling, upon completing the course students will be able to accurately identify and diagnostically classify specific as well as broad categories of emotionally pathological and behaviorally dysfunctional conditions. Emphasis is placed on the use of evidence based, research, theory, and analytically sound assessment methods including functional behavior

assessment and differential diagnostic procedures. Focus is also directed to the successful application of clinical methods and techniques in the assessment and documentation process, to include accurate case formulations which serve as the basis for interventions and treatment planning.

Course Objectives:

1. Students will demonstrate knowledge of the history and development of diagnostic and classification of mental disorders, clinical assessment and treatment of disorders (2.F1.a)
2. Students will demonstrate the ability to incorporate the cultural impact of beliefs and interpretations into the classification of disorders and views of behavior as well as the treatment of individuals (2.F2.a; 2, F2,d; 5.C.2.j)
3. Students will demonstrate knowledge of theories of personality development and abnormal development as well as the etiology and impact of addiction and its effect on the classification of disorders (2.F.3.c; 2.F.3.d)
4. Students will demonstrate the ability to critically examine the impact of physiological and environmental factors that shape the development of mental health disorders and resilience (2.F.3.e;2.F.3.f)
5. Students will demonstrate the ability to use assessments to determine mental health disorders including: Mental Status Exams, Functional Analysis of Behavior and assessments to assist with diagnosis and the selection of interventions (2.F.7.e; 5..C.3.A)
6. Students will formulate case conceptualizations and demonstrate the ability to document case formulations in a manner that contributes to treatment planning (5.C.1.c; 5.C.2.f)
7. Students will demonstrate the ability to conduct a differential diagnostic classification of behavior using the Diagnostic and Statistical Manual (5th ed.) (5.C.2.d)
8. Students will demonstrate knowledge of how trauma and substance abuse jointly and individually affect development, diagnoses, and treatment of disorders. (5.C.2.f;5.C.2.j)
9. Students will critically evaluate ethical considerations of diagnosis, case formulations and treatment and how to create reports to communicate with legal entities (5.C.2.1).
10. Students will demonstrate knowledge of pharmacological interventions for mental health conditions as well as biological underpinnings of many diagnoses (2.F.3.E; 5.C.2.h).

REQUIRED TEXT:

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: American Psychiatric Association
 ISBN (Paper) 978-0-89042-555-8 (Hardcover) 978-0-89042-554-1

Joel Paris, MD. (2015). *The intelligent clinician's guide to the DSM-5*® (2nd Edition).
Oxford, UK: Oxford University Press. ISBN (Paper) 978-0199395095

SUPPLEMENTAL TEXT: None

CACREP Standards Addressed in this Course

Program Objective	Standard Identifier	Standard	Assessment
1	2.F.1.a	history and philosophy of the counseling profession and its specialty areas	Discussion Group, Exams, study group discussion
2	2.F.2.a	multicultural and pluralistic characteristics within and among diverse groups nationally and internationally	Discussion Group, Exams Groups Diagnostic Exercises
2	2.F.2.d	the impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of others	Discussions Group Assignments; Exams Group Diagnostic Exercises
3	2.F.3.c	theories of normal and abnormal personality development	Exams, Case Studies
8	2.F.3.d	theories and etiology of addictions and addictive behaviors	Exams, Power Points, Case Studies, study group discussion
10	2.F.3.e	biological, neurological, and physiological factors that affect human development,	Exams, Power Point Presentations, reflection questions

		functioning, and behavior	
10	5.C.2.h	classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation	Reflective paper critique
4	2.F.3.f	systemic and environmental factors that affect human development, functioning, and behavior	Case Studies, Exams Role Plays; Study Group Discussions
7	2.F.7.e	use of assessments for diagnostic and intervention planning purposes	Case Studies, Exams, Power Point Presentations, study group discussions; Diagnostic Exercises; Role Play
3	5.C.1.c	principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning	Case Studies, Exams, Power point Presentations; Source of Information Papers
7	5.C.2.d	diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the	Power Point Presentations, Exams, Case Studies, Study Group Discussions; Diagnostic Exercise

		International Classification of Diseases (ICD)	
8	5.C.2.e	potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders	Exams, Case Studies, Power Point Presentations, Study Group Discussions
6	5.C.2.f	impact of crisis and trauma on individuals with mental health diagnoses	Case Studies, Power Point Presentations, Study Group Discussions; Diagnostic Exercises
2	5.C.2.j	cultural factors relevant to clinical mental health counseling	Exams, Case Studies, Power Point Presentations, Study Discussion Groups
9	5.C.2.i	legal and ethical considerations specific to clinical mental health counseling	Case Studies Study Group Discussion
3	5.C.3.a	intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management	Case Studies, Exams Small Group Diagnostic Exercises Role Play

Measurement of Outcomes

Assignments (Direct): Exams, Power Point Presentations, Case Studies; Study Group Discussions; Role Plays; Small Group Diagnostic Exercises

Instructor Evaluations (Indirect): Professional Participation Evaluation (PPE); Self Evaluations

Instructional Methods

<i>Instructional Methods used in the Course</i>	
Discussion	X
Presentation	X
Lecture	X
Experiential	X
Student Presentations	X
Case Presentations	X
Videos/DVDs	X
Seminars	
Other	

Suggestions for getting the most out of this Course

1. Read the contents of this syllabus. Ask necessary questions early in the semester, rather than later.
2. Respect confidentiality. Being actively involved in the class sessions in small groups entails some level of personal self-disclosure. Because of the nature of the vulnerability, trust, and openness needed to learn about counseling, it is extremely important that confidentiality be maintained.
3. Ask questions.
4. Participate in class discussions. What you have to say is important.
5. Make sure you have read the chapters required in the DSM and Paris and be prepared to discuss
6. Use note cards to write down main points under each diagnosis under each section of the DSM-5

Course Requirements

1. **Reading Reflection Questions (10 Points)**

Each week, students will respond to questions posted on Live Text using the Paris book and the DSM-5. The students' response should demonstrate critical thinking and reflect the student's understanding of the subject. Students will be graded on the depth of their answers, how they link to the specific answers to the diagnostic process and the development of the DSM-5. The response should be approximately two pages in length.

Students will have reflection questions due for the first class. Come prepared to discuss!

2. **Study Group Discussions (10 Points)**

Each study group will pick a week to lead a discussion. The discussion will be focused on the questions posted on live text developed from the previous week. Students will use their reading reflection responses (two-page) to lead a discussion on the topic with their study group. On the first day of class, students will pick a week to discuss the reflection questions and upload the outline of their discussion based on their reading reflections for that week. Students should work to elicit in depth answers and observations on the information as well as sharing their observations and what they gained about diagnostic process as well as about the diagnoses themselves. Students will be graded on their discussion skills in a rubric on live text.

3. **Reference Paper Critique with Discussion (15 Points)**

In addition, articles will be posted on live text addressing the following topics in class; Psychopharmacology, assessment, mental health and ethical issues in mental health. Students will be required to read the articles, upload two-page reflections on the articles based on questions from live text. Be prepared to discuss the papers the next week in class.

4. **Examinations (150 Points)**

Two (2) formal exams are scheduled, covering specified chapters of material presented in course texts, class lecture and discussions. These exams will consist primarily of multiple-choice items and descriptive response or essay questions calling for definition or explanation of a specific term or concept.

One of these will be a final examination is scheduled for the last class session. It

will consist of multiple-choice questions, a series of items requiring a brief definition of a term or concept, and will also include one or two "cases" which you are to analyze and then identify as to the type or types of psychopathology being described. You will be expected to correctly classify each condition; and you may be asked to explain what clues you used to arrive at your solution.

Both examinations will cover information presented in specified text chapters, lectures, video presentations and group discussions.

5. **Case diagnostic Assignments (KPI)(25 Points):**

An enjoyable and important part of the course involves the translation of theory and procedural concepts into *applied* practical skills. About mid-way through the semester you will have learned methods for diagnosis and classification of mental health disorders along with sources of information to facilitate your differentiating one condition from another.

By that time, you will have a firm grasp of many of the dynamics of various conditions and of the evaluation process sufficient to begin identifying psychopathological conditions. You will be ready to practice conceptualizing client symptom presentations, history, viewing functional and dysfunctional emotional and behavior patterns and relating these to effective counseling conditions and interventions.

To facilitate your mastery, you will be presented with three studies drawn from actual client cases identified and treated by the instructor and/or as described in literature. Using correct assessment procedures are then to "diagnose" the condition which is occurring, and prepare a written report defining your determination and explaining your analysis. There may be co-occurring disorders or crises that need to be addressed as well.

Case study reports must be typed, from one to not more than three pages in length, and correspond to current clinical formats which as a minimum must include:

- ❑ (1) A DSM based diagnostic determination of the dysfunctional mental health condition(s) being experienced by the individual to include ICD-10 alpha numeric code number and correct title with appropriate specifiers and severity.
- ❑ (2) An explanation of your analysis, i.e., basis for making the determination(s). This must specify what your diagnostic evidence was in relation to stipulated DSM criteria. This requires citing specific DSM criteria followed by an example of relevant presenting symptoms associated with your identified condition(s). If you specified comorbid conditions, explain why you chose those particular ones, also citing criteria and presenting dysfunctional behavior. Include possible cultural effects on diagnoses and treatment

- A mini status exam indicated along will possible assessment tools that could be used to assist in diagnoses including substance, medical and cultural assessments to assist in correctly identifying patterns of behavior and functioning.
- (3) Briefly, cite the *functional behavior analysis* factors eliciting and maintaining conditions you have identified as etiologically influential --- which must be addressed in your case formulation and treatment
 - (a) what factors are causing and
 - (b) maintaining the condition or behavior
- (4) A possible counseling-therapy approach to address the condition(s) you have identified.
- (5) If there are crises in the study, a detailed description of the approach taken to assist the client should be included.
- 6) Please identify any co-occurring diagnoses or factors in the environment including cultural factors that could impinge on the case formulation.

You are to write a "professional style report." It should have a heading, clinical style format, and be written in an "organized sequence" with clear topic or content sections to be uploaded to Live Text on the date assigned. It should be written in clear, factual and professional writing style that would be acceptable in court.

Although you are individually responsible for what you submit, you may elect to --- and in fact are encouraged to "solve" your assigned cases participating as a member of the outside-of-class study group. Developing the astute ability to correctly identify mental health conditions is significantly facilitated through the colleague discussion which takes place in these groups.

6. **Power Point Presentations (25 Points):**

Each study group will pick a section from the DSM V to present from a list provided on the first day of class. You will be required to upload an outline and synopsis of your presentation individually. Questions on live text and an outline will guide you on how presentations should be organized. You will start with a role play of a disorder from that section that class members will have to diagnose and discuss. The presentation will be 30 minutes at the most. Slides need to be an outline of the information rather than all the information. Students will be graded on their ability to present without reading slides, the thoroughness of the presentation on the diagnoses, the clarity and understanding of the disorder demonstrated in the role play and the thoroughness of the discussion following the presentation. Discussion questions should be prepared to help with the discussion.

7. **Role Plays (10 Points):**

During class time we will role play disorders. Students will be assigned groups that will present disorders. The assigned disorder and a mental status exam form will be up on Live Text. Complete the MSE form on how you will present the disorder. Then write up an outline of how your group will present the disorder. The role play is a chance to experience the disorders in “real time” as much as possible in a class. Present any crises, trauma or cultural or environmental considerations for the client. It is important to know what may be presented beyond what is read on paper.

8. **Diagnostic Exercise:**

There will be three diagnostic exercises to help with building your diagnostic skills as a clinician and teach the proper steps to make a clinical evaluation. A case study will be posted on Live Text. You will put in your diagnosis using the DSM V and write a paragraph or 2 about the criteria and why you chose that particular diagnosis. You need to describe the process you used to arrive at the diagnosis and follow the format discussed in class.

9. **Self-Assessment/CLA:**

Upload a 5 page reflection paper on what you have learned based on questions on livetext, what insights about diagnosis and counseling you have gleaned and how you have grown as a potential clinician through your experience in this course.

Evaluation Criteria

Final Grade

The final grade will be based on the following criteria:

Type of Assessment	Points	Total possible points
Reading Reflection Questions	10 points	70 points
Midterm exam	75 points	75 points
Final exam	75 points	75 points
Case assignment	25 points	75 points
Power point presentation	25 points	25 points
Reference Paper Critiques	15 points	60 points
Role Plays	10 points	30 points
Study Group Discussion	10 points	10 points
Diagnostic Exercises	5 points	15 points

Self-Assessment		0 points
Total		435

In addition to performance on formal evaluations, your *professional development evaluation (PPE) and academic grade* will also be based upon:

- ✓ "Professional sophistication, maturity, effort and attitude."
- ✓ members of the class.
- ✓ Attendance and preparation for class.
- ✓ Professional quality; i.e. appearance of written case assignments.
- ✓ Acceptance of responsibility for your performance.

Throughout the course you will receive feedback from the instructor, as well as grades on various assignments and examinations that reflect your acquisition of knowledge and skills. You will also have the opportunity to benefit from observing others diagnostic reasoning as they conduct presentations, analyze cases and participate in two-way Socratic discussion.

Grading Scale:

A+	100-97	B+	89.9-87	C+	79.9-77	D+	69.9-67	F	Below 60
A	96.9-93	B	86.9-83	C	76.9-73	D	66.9-63		
A-	92.9-90	B-	82.9-80	C-	72.9-70	D-	62.9-60		

Expectations

1. Study Group:

The paired or partner "group" is intended to enhance and facilitate your learning through several important functions, some of which include providing a setting in which you:

- a. collectively analyze presented cases
- b. review textbook, lecture, DSM and other course material to clarify issues,
- c. review diagnostic strategies and concepts to prepare for examinations
- d. help analyze and prepare Case Studies
- e. assist in research and preparation of Source of Information papers
- f. facilitate discussions on assigned chapters in Paris, Study Questions and assigned papers

2. Study groups may meet weekly or at times and places selected by its members. In general, it is expected groups will engage actively 2 to 3 hours weekly. Lessons will emphasize information contained in assigned course text which comprehensively covers the field of psychopathology. To broaden the scope of instruction, and develop the professional skills, you will have opportunity to effectively apply theoretical concepts or techniques through such activities as observing and practicing case assessment. These activities will be structured to give you a chance to benefit from the observations and positive *feedback* of your colleagues and the course instructor.

During the course you will need to study Paris and the APA DSM in a fairly organized, disciplined fashion. To keep abreast of weekly in-class instruction and discussion, outside reading is essential. In some instances specific text material that should be reviewed is cited in the remarks column appearing in the Course Content and Lesson Sessions Outline section of this Syllabus. However, in general it is necessary for you to review each book completely, from cover to cover independently.

Regarding the DSM, for example, you will want to pay attention to the glossary, appendices, sections on "Z" and additional codes, as well as criteria sets for further study.

It is advised that content from this study be reviewed during weekly Group Study sessions. Remember, there are more conditions described in the DSM that time permits coverage in class. You will, nevertheless, need to know the information, and where content can be found for future reference.

Even if "something" is not *specifically* mentioned in class, *you* are still individually responsible for learning the information presented in course textbook, whether or not actually discussed by the instructor.

3. Individual assistance and participation: The instructor recognizes that you are taking this elective course to learn! The structure of instructor led in-class discussions and opportunities afforded by cooperative collaborative learning groups are some of the venues in which questions can be addressed, theories analyzed, and general learning facilitated.
 - a. You are *encouraged* to raise questions during class so that inquiry will disclose where clarification is needed, and afford opportunity to add depth to lesson activities and resolve questions likely held by more than one person.
 - b. Your comments, personal-life experience, observations, and ideas *are* welcome and *beneficial* to everyone's learning. This is particularly true in this type course.

It is important *you* be given personal attention. In addition to consultation by the instructor *during* class sessions, to resolve questions not clarified in class, or to address something that concerns you, the instructor will be available after class. But because each session lasts until 10:30 pm, you may wish to make an appointment to visit with the instructor at another time. Appointments are encouraged.

If you wish to contact the instructor, refer to the telephone numbers listed on Page 1 of this Syllabus.

4. Attendance: This graduate course involves not only text study and outside of class research and group learning activity, but most importantly significantly revolves around class instruction. This class instruction includes discussions, concepts presented via lectures, dysfunctional mental health conditions taught using media presentations and planned learning experiences, and examples of conditions and analysis presented by students as well as professor. A class lesson cannot be duplicated. Just one evening class is equivalent to four, one hour, weekly on-campus lecture sessions.

Diagnostic methods and techniques are best learned from practice, observation and insight gained during class presentation and discussion. Because how well you will be able to learn the characteristics of pathological conditions and be able to *recognize* them in your professional work hinges substantially on class discussion and lesson presentations intended to develop and refine your knowledge and professional skills. You must attend class for adequate learning, *no make-up* work is available for missed classes.

You are required to attend all sessions and/or make-up sessions held because of bad weather cancellations. *Grades will be automatically reduced for absence.* The exception to this rule would be if you were seriously incapacitated, i.e., ill, or injured, or a significant circumstance existed i.e., major illness in your immediate family which unavoidably required your presence. No extra credit for missed classes will be taken. If you miss more than one class, you will be required to re-take the class.

6. Recommended readings, resources and outside class activity: Between class sessions, you are expected to study the course texts, complete designated assignments, *prepare* for group discussion and role-play case demonstration activities. As the “new DSM” emerges on the mental health scene, individual research and study outside of class is valuable and encouraged.

7. "Old-hand" with experience vs. "New kid on the block": It is recognized not all students enter Counseling 610 with the same experience background in counseling, diagnostics, sociology or psychology. This class focuses on *developing* your ability, your knowledge and professional skills. You will be graded on how well you learn and apply appropriate mental health clinical knowledge and skills *taught in this* course. You are not graded competitively or comparatively with more experienced classmates on a curve.

8. Professional competencies: One of the hallmarks of this course is the excellent opportunity it affords for you to actually practice and receive "feedback" regarding the effectiveness identifying "problems" affecting clients who will depend upon your expertise. It is a "really great" course to develop your skill determining a particular theoretical strategy you might elect to use in a given case. When you subscribe to the class, you can look forward to one of the few opportunities mental health professionals experience in their careers to advise colleagues and in-turn, receive positive suggestions from them.

This is an extremely challenging graduate course, with significant and complex content and "depth." Classes cover information you need to know to be successful in your professional work and to effectively assist clients. It is, realistically speaking, a "meat and potatoes class."

As a professional career course engaged in training mental health counselors --- the second grade for the class, and successful completion of course requirements entails your receiving a written professional performance critique and constructively acting upon suggestions.

Keep in mind that this is a professional course designed to facilitate your effectiveness as a counselor in the complex process of *identifying* and then successfully addressing the needs of *clients*.

9. Unless specifically trained and licensed to do so, in terms of professional scope and practice, mental health counselors *do not* give clients *medical* advice or information. Psychiatrists, physicians and physician assistants will inform and treat their patients and families regarding medication, dosage, physical and medical issues. Our course text book is written for medical practitioners as well as counselors and, therefore, covers psychopharmacology extensively.

From a background perspective, understanding pharmacology, i.e., medication and related treatment is essential to the degree that it enables you to effectively work in conjunction with medical personnel to address a wide range of conditions. Indeed, CACREP cites knowledge of psychopharmacology as being important. In this respect, you are, therefore, advised to briefly review text book and outside reference material on this subject, along with the primary topics of course study. Remember, however, to practice only within the scope of your license, qualifications, education and training. Medical determinations and treatment reside with physicians.

Tentative Schedule

Date	Topic	Reading	Assignment Due
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		Assignment	
<p>Week 1</p> <p>CACRE P Standards</p> <p>2.F.1.a 2.F.2.a 2.F.2.d 2.F.3.f 5 C.2.j</p>	<p>Introduction and overview.</p> <p>Class Syllabus; introductions:</p> <p>Review basic concepts of normalcy, abnormality and psychopathology, theoretical perspectives and etiology: behavioral* cognitive * social learning * biological *psychoanalytical</p> <p>Review of Case Formulation and Differential Diagnosis, DSM5, organization, content, use. Mental Status Exam; Initial Interview and Assessments</p> <p>Overview of disorder categories and diagnostic criteria:</p> <p>1. Including Effective and accurate Clinical Intuitive 2. Informal and formal procedures conceptualizing <i>client presentations</i>;</p>	<p>Paris - Chp 1,2, 3</p> <p>DSM5 Intro & pp. xiii to 30 pp. 749-759 (cultural formulation)</p> <p>Article on socio-cultural effects on the development of mental health pathways in live text</p>	<p>Form Study Groups; Sign up for Power Point Presentations and Study Group Discussion Topics Signup</p> <p>Reading Reflection Question 1 Topic 1 (2.F.1.a; 2.F.2.a; 2.F.2.d; 2.F.3.f; 5.C.2.j)</p>

	<p>3. Recognizing underlying processes as the route to correct and effecting counseling</p> <p>4. Applying differential and intuitive analysis to cases situations</p> <p>5. Understanding the client in their social and cultural to accurate diagnosis and treatment</p> <p>6. Understanding legal issues in clinic practice: “Are we diagnosing or assessing?”</p> <p>7. Understanding ICD-10; ICD-11</p> <p>Introducing Assessment procedures: Review Z codes for full “picture” of client for treatment development Other diagnostic considerations, environment, trauma and cultural effects</p>		
<p>Week 2</p> <p>2.F.7.e</p> <p>2.F.3.e</p> <p>5.C.2.d</p> <p>5.C.2.e</p> <p>5.C.2.f</p> <p>2.F.3.c</p>	<p>Neurodevelopmental Disorders</p> <p>Schizophrenia Spectrum and Psychotic Disorders</p>	<p>Paris</p> <p>Chp 4, 5, 8, 13</p>	<p>Power Point Presentations (5.C.2.d;5.C.2.e;5.C.2.f)</p> <p>Reading Reflection Questions 2 (5.C.2.e; 5.C.2.f; 5.C.2.d;2.F.3.e;2F.3.e;2.F.3.c)</p> <p>Study Group Discussion on</p>

			<p>Reading Reflections Questions 2 (5.C.2.e; 5.C.2.f; 5.C.2.d;2.F.3.e;2F.3.e;2.F.3.c)</p> <p>Diagnostic Exercise 1 (2.F.7.e; 2.F.3.e; 5.C.2.d)</p>
<p>Week 3</p> <p>2.F.7.e 5.C.2.d 5.C.2.f 5.C.2.e 5.C.3.a 2.F.3.e</p>	<p>Depressive Disorders</p> <p>Suicide warning signs and course of action</p> <p>Bipolar and Related Disorders</p> <p>Discuss the Mental Status Exam and assessment for Diagnosis</p>	<p>Paris Chp. 6, 7, 9,10</p> <p>Article on Mental Status Exam and form</p>	<p>Power Point Presentations (5.C.2.d;5.C.2.e;5.C.2.f)</p> <p>Reference Paper Critique on Article on MSE and Discussion (2.F.7.e;5.C.2.d;5.C.2.f)</p> <p>Reading Reflection Questions 3 (5.C.2.e; 5.C.2.f; 5.C.2.d;2.F.3.e;2F.3.e;2.F.3.c)</p> <p>Study Group Discussion on Reading Reflection Questions 3 (5.C.3.a; 5.C.2.2;5.C.2.f; 2.F.7.e;2.F.3.e)</p> <p>Diagnostic Exercise 2 (5.C.3.a; 5.C.2.2;5.C.2.f; 2.F.7.e)</p> <p>Role Play 1 (5.C.3.a; 5.C.2.2;5.C.2.f; 2.F.7.e)</p>
<p>Week 4</p> <p>5.C.2.d 5.C.2.f 5.C.2.i 5.C.2.e 2.F.7.e 2.F.3.d</p>	<p>Anxiety Disorders</p> <p>Trauma and Stressor Related Disorders</p> <p>Obsessive Compulsive Disorders</p>	<p>Paris Chp. 11</p> <p>Article on Psychopharmacology</p>	<p>Power Point Presentations (5.C.2.d;5.C.2.e;5.C.2.f)</p> <p>Reference Paper Critique on Article on Psychopharmacology</p> <p>Reading Reflection Questions 4 (5.C.2.e; 5.C.2.f; 5.C.2.d;2.F.3.e;2F.3.e;2.F.3.c)</p> <p>Study Group Discussion on Reading Reflection Questions 4 (5.C.2.e;5.C.2.i;5.C.2.f)</p> <p>Diagnostic Exercise 3 (5.C.3.a; 5.C.2.2;5.C.2.f; 2.F.7.e;2.F.3.d)</p>

			Role Play 2 (5.C.3.a; 5.C.2.2;5.C.2.f; 2.F.7.e)
Week 5 F.3.c 5 2.F.3.e 2.F.7.e 5.C.2.d 5.C.2.f	Dissociative Disorders Somatic Symptom and Related Disorders Feeding and Eating Disorders Elimination Disorders Instructions for Case study 1	Paris Chp. 12	Midterm Examination F.3.c 5 2.F.3.f 2.F.3.e 2.F.7.e 2.F.7.e 5.C.2.d 5.C.2.f 2.F.1.a 2.F.2.a 2.F.2.d 2.F.3.c
Week 6 5.C.3.a 5.C.2.d 5.C.1.c 5.C.2.i 5.C.3.a	Neurocognitive Disorders Sleep-Wake Disorders Gender Dysphoria Sexual Dysfunctions Review critique of Midterm Examination Analysis; diagnostic critique of Case Study 1 Case Study 2	Article on Ethics	Case Study 1 due (5.c3.a;5.C.2.d;5.C.1.c;5.C.2.i 5.C.3.a) Power Point Presentations (5.C.2.d;5.C.2.e;5.C.2.f) Reference Paper Critique on Ethics Article (2.F.7.e;5.C.2.d;5.C.2.f) Reading Reflection Questions 5 (5.C.2.e; 5.C.2.f; 5.C.2.d;2.F.3.e;2F.3.e;2.F.3.c) Study Group Discussion on Reading Reflection Questions 5 (5.C.2.e;5.C.2.i;5.C.2.f)
Week 7 5.C.2.d 5.C.2.f 5.C.3.a 5.C.1.c 2.F.3.d 2.F.7.e	Personality Disorders Substance Related and Addictive Disorders Analysis: diagnostic critique of Case Study 2	Paris Chp. 14 Article on assessment	Power Point Presentations (5.C.2.d;5.C.2.e;5.C.2.f) Reference Paper Critiques on Article on Assessment (2.F.7.e;5.C.2.d;5.C.2.f) Reading Reflections Questions 6 (5.C.2.e; 5.C.2.f; 5.C.2.d;2.F.3.e;2F.3.e;2.F.3.c) Study Group Discussion on

			<p>Reading Reflections Questions 6 (5.C.2.e;5.C.2.i;5.C.2.f;2.F.3.d)</p> <p>Case Study 2 due (5.c3.a;5.C.2.d;5.C.1.c;5.C.2.i 5.C.3.a)</p> <p>Role Play 3 (5.C.3.a; 5.C.2.2;5.C.2.f; 2.F.7.e)</p>
<p>Week 8</p> <p>2.F.7.e 5.C.1.c 5.C.2.d 5.C.3.a 5.C.2.e 2.F.3.d 2.F.3.e 2.F.3.f</p>	<p>Disruptive Impulse Control and Conduct Disorders</p> <p>Paraphilia Disorders</p> <p>Other Mental Disorders</p> <p>Medication- Induced Movement Disorders and Other Adverse Effects of Medication Other Conditions Focus of Clinical Attention General discussion Review: clinical mental health conditions diagnosis methods Review texts and all lessons prior to class. and procedures. Reviewing the GAF; Z codes Analysis of Case Study 3</p>		<p>Case Study 3 (5.c3.a;5.C.2.d;5.C.1.c;5.C.2.i 5.C.3.a;2.F.3.d;2.F.3.e;2.F.3.f)</p> <p>Power Point Presentation (5.C.2.d;5.C.2.e;5.C.2.f)</p> <p>Reading Reflection Questions 7 (5.C.2.e;5.C.2.i;5.C.2.f;2.F.3.d)</p> <p>Study Group Discussion on Reflection Question 7 (2.F.3.d;2.F.3.e;2.F.3.f)</p>
<p>Week 9</p> <p>2.F.3.d 5.C.1.c 5.C.2.d 5.C.3.a</p>	<p>Clarification of issues and concepts</p> <p>Class Summary; Course conclusion</p> <p>Class hours 4</p>	Final Study Guide	<p>Final Examination 2.F.3.d,5.C.1.c,5.C.2.d 5.C.3.a;5.c.2.f;5.C.2.i;5.C.3.a;2.F. 2.a</p>

2.F.2.a	Final Examination		
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Course Declarations

LiveText: LiveText will be utilized to collect various artifacts that can represent the student’s body of work. For example, signature artifacts are major assessments of knowledge, skill, and practice that are grounded in CACREP and best practice standards and are associated with various assessment rubrics and are integrated in LiveText. The online portfolio is maintained in the student’s personal file on the LiveText website. There may be a number of artifacts that are appropriate for inclusion—see the instructor for details.

Questions, Concerns, Grievances: Feel free to schedule an appointment to talk with the instructor, if you have follow-up issues to discuss; if you feel there is a problem or misunderstanding; or if you have a question or complaint. In addition, you may contact the Dean regarding any concerns. Formal grievance procedures are outlined in the Doane MAC Student Handbook.

Non-Discrimination Policy

Applicants for admission and employment or professional agreements with the University are hereby notified that this institution does not discriminate on the basis of race, color, religion, sex, genetic information, national origin, disability, age, marital status, sexual orientation or any other protected class recognized by state or federal law in admission or access to, or treatment, or employment in its programs and activities. Sexual Harassment and sexual violence are prohibited forms of sex discrimination.

Title IX Policy Statement

It is the policy of Doane University not to discriminate on the basis of gender in its educational programs, activities or employment policies as required by Title IX of the 1972 Education Amendments.

Inquiries regarding compliance with Title IX may be directed to the Director of Human Resources, Doane University, 1014 Boswell Avenue, Crete, NE 68333 or to the *Director of the Office for Civil Rights*, Department of Health, Education, and Welfare, Washington, D.C., 20202.

Academic Integrity

The faculty expect students to pursue their work with academic integrity. A copy of the policies concerning academic honesty may be obtained from the office of the Vice President for Academic Affairs in Crete or from the Dean of each program. Any breach of academic integrity may result in immediate suspension from the program.

Access/Services for Students with Disabilities

The Rehabilitation Act of 1973 (section 504) and the Americans with Disabilities Act (ADA) provide that "no otherwise qualified disabled individual in the United States shall, solely on the basis of disability, be denied access to, or the benefits of, or be subjected to discrimination under any program or activity provided by any institution receiving federal financial assistance." This regulation requires that Doane programs be accessible to the disabled, but it does not require that every building or part of a building be accessible. Thus, it may be necessary to reschedule classes to accessible classrooms or to take other steps to open one of the programs to students with mobility impairments.

1. Students interested in services related to a disability should notify the university of any special circumstances that would affect their ability to compete equally in the college environment. To assist the university in providing services, documentation of such disabilities must be provided by qualified professionals upon request.
2. While students are encouraged to self-identify at the earliest possible time, they can access services at any time by initiating the process described in number one above.
3. To initiate this process, students are encouraged to contact the Office of Graduate Studies before beginning classes so their needs can be anticipated, reviewed, and accommodated.

Changes in Syllabus: Circumstances may occur which require adjustments to the syllabus. Changes will be made public at the earliest possible time.