Course Syllabus

COU 5355 Advanced Psychopathology
Spring 2018
Hybrid

Instructor Information
Kaylene Brown, PhD., LPC-S, NCC
Office Location: Behavioral Sciences Building, Room 111-A
Office Hours: By appointment
Phone: 806-239-2638
Email: Kaylene.Brown@lcu.edu

Course Description
Detailed study of the current Diagnostic and Statistical Manual of Mental Disorders as it relates to psychopathology, case conceptualization and treatment planning. Case conceptualization and treatment planning will be based on specific evidence based counseling theories. Basic use of psychoactive drugs and their efficacy will be discussed. Skills will be developed through case studies.

Learning Outcomes

Upon completion of this course, students will demonstrate appropriate competency related to the following areas of the counseling profession based on an understanding of the following 2016 CACREP standards:

<table>
<thead>
<tr>
<th>Standard</th>
<th>Core Category</th>
<th>Standard</th>
<th>Methods of Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.F.5.a.</td>
<td>COUNSELING AND HELPING RELATIONSHIPS</td>
<td>Theories and models of counseling</td>
<td>Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies</td>
</tr>
<tr>
<td>2.F.5.g.</td>
<td>COUNSELING AND HELPING RELATIONSHIPS</td>
<td>Essential interviewing, counseling, and case conceptualization skills</td>
<td>Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies</td>
</tr>
<tr>
<td>2.F.5.h.</td>
<td>COUNSELING AND HELPING RELATIONSHIPS</td>
<td>Developmentally relevant counseling treatment or intervention plans</td>
<td>Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies</td>
</tr>
</tbody>
</table>

University Mission Statement
Lubbock Christian University is a Christ-centered, academic community of learners, transforming the hearts, minds, and hands of students for lives of purpose and service.
<table>
<thead>
<tr>
<th>2.F.5.i.</th>
<th>COUNSELING AND HELPING RELATIONSHIPS</th>
<th>Development of measurable outcomes for clients</th>
<th>Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.F.5.j.</td>
<td>COUNSELING AND HELPING RELATIONSHIPS</td>
<td>Evidence-based counseling strategies and techniques for prevention and intervention</td>
<td>Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies</td>
</tr>
<tr>
<td>5.C.1.c.</td>
<td>FOUNDATIONS</td>
<td>Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning</td>
<td>Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies</td>
</tr>
<tr>
<td>5.C.2.d.</td>
<td>CONTEXTUAL DIMENSIONS</td>
<td>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 International Classification of Diseases (ICD)</td>
<td>Understand and utilize the current DSM and the International Classification of Diseases (ICD) in diagnosing psychopathology through differential diagnosis</td>
</tr>
<tr>
<td>5.C.2.f.</td>
<td>CONTEXTUAL DIMENSIONS</td>
<td>Impact of crisis and trauma on individuals with mental health diagnoses</td>
<td>Video vignettes; Developing professional case conceptualizations</td>
</tr>
<tr>
<td>5.C.2.h.</td>
<td>CONTEXTUAL DIMENSIONS</td>
<td>Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation</td>
<td>Identify commonly prescribed psychotropic medications used in treatment of specific common disorders. Identify how commonly prescribed psychotropic drugs are utilized in the health care and counseling fields, their effects and side effects*</td>
</tr>
<tr>
<td>5.C.3.a.</td>
<td>PRACTICE</td>
<td>Intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management</td>
<td>Utilize the current DSM in developing professional case conceptualizations and treatment plans</td>
</tr>
</tbody>
</table>
5.C.3.b. | PRACTICE | Techniques and interventions for prevention and treatment of a broad range of mental health issues | Utilize the current DSM in developing professional case conceptualizations and treatment plans

Course Objectives
1. Understand principles of the diagnostic process of the current Diagnostic and Statistical Manual of Mental Disorders (DSM) and its function in the counseling field.
2. Understand and utilize the current DSM and the International Classification of Diseases (ICD) in diagnosing psychopathology through differential diagnosis.
3. Identify the relationship between the current DSM system of diagnosis and its role in case conceptualization and treatment planning.
4. Utilize the current DSM in developing professional case conceptualizations and treatment plans.
5. Develop case conceptualizations and treatment plans based on theories of pathology and evidence based therapies using case studies.
6. Identify commonly prescribed psychotropic medications used in treatment of specific common disorders.
7. Identify how commonly prescribed psychotropic drugs are utilized in the health care and counseling fields, their effects and side effects.*
8. Demonstrate how to read and understand a fully prepared DSM diagnosis, case conceptualization and treatment plan.
9. Identify and utilize Evidence Based Therapies.

*Note: The information in this course is not designed to recommend prescribing regimens to treat psychiatric disorders. However, this knowledge about psychotropic drugs is meant to provide a base of understanding for professional counselors in their practice.

Teaching Methodology
This course utilizes, but is not limited to, the following instructional methods: Lecture, online readings, exams, media, case conceptualizations and student presentations, discussion, research related to evidence-based treatment, interviews and papers.

Counselor Education Technology Competencies
1. Be able to use productivity software to develop web pages, word processing documents (letter, reports), basic databases, spreadsheets, and other forms of documentation or material applicable to practice.
2. Be able to use such audiovisual equipment as video recorders, audio recorders, projection equipment, video conferencing equipment, playback units and other applications available through education and training experiences.
3. Be able to acquire, use and develop multimedia software, (i.e., PowerPoint/Keynote presentations, animated graphics, digital audio, digital video) applicable to education, training and practice.
4. Be able to use email.
5. Be able to help clients search for and evaluate various types of counseling related information via the Internet, including information about careers, employment opportunities, educational and training opportunities, financial assistance/scholarships, treatment procedures, and social and personal information.
6. Be able to access and use counseling-related research databases.

Required Text and/or Materials


COU 5355 Syllabus, Spring 2018, revised 7-30-2012, BRB

All course textbooks can be purchased online through our Virtual Bookstore located at http://chaplink.LCU.edu. Book buy back will occur for two days on campus at the end of each semester. An extended buy back time is available online also. For further questions, please call the LCU Chap Store at 720-7526.

**Other Resources and/or Suggested Readings**


Course Policies
Class Attendance and Participation
Regular class attendance/online engagement is expected of each graduate student and is a professional responsibility. The classroom experience is considered an integral part of the institution's educational program and experience. You are encouraged to access online courses 3 to 5 times per week. By doing so you will be able to actively participate in the Discussion Forums, complete your assignments and access announcements in a timely manner. On-campus students may be dropped from classes, at the discretion of the professor, due to excessive absences (i.e., three absences in courses meeting once per week and absences for athletic or school-related participation exceeding 25% of the class meetings and/or laboratory sessions). All absences are included. For elaboration of the absence policy, see the current catalog.

Residency Attendance Mandatory
Your presence is mandatory at all residency portions of this class. Any absence or non-participation from the residency class is grounds for failure of the entire class.

Class Materials
All materials provided in class or recordings of lectures are copyright protected by Lubbock Christian University and the professor. Your use of these materials beyond preparation for this course (i.e. publishing to a website, distribution to others, etc.) may constitute copyright infringement.

Late Assignments
All assignments are due on the dates indicated online within the course, except in the case of significant illness (doctor's note required) or major family emergency. For late assignments, 5 points each day will be deducted with a limit of 3 days allowed. You need to notify the instructor as soon as possible about the emergency, so that I can arrange a mutually agreed upon time for completion of the assignment.

Incompletes
PR– In Progress, is given at the discretion of the instructor, if requested by the student. It is the responsibility of the student to see that a PR is removed. A PR cannot be permanently left on the transcript. Students have one semester to remove the PR grade, but with instructor and academic dean permission, the period may extend one additional semester. When a PR is not removed, or extended at the end of one semester, the registrar must change the grade to F.

Tracking Grades
Students are responsible for tracking their academic progress in this class throughout the semester. Therefore, students with questions about grades are encouraged to contact the instructor. Final grades will be posted on LCU Self-Serve at the conclusion of the semester.

Department of Psychology and Counseling Writing Expectations
Student in graduate courses should demonstrate graduate-level writing skills. Students are expected to write complete sentences, use appropriate grammar, and spell words correctly. If you have difficulty in this area the Lubbock Christian University Writing Center is available to you at http://lib.lcu.edu/UWC. The department also has an online writing coach. Graduate students in the Department of Psychology and Counseling may access the Online Writing Center (OWC) via their Moodle home page (http://moodle.lcu.edu). These are great resources for you to use as needed.

Students who do not demonstrate graduate level writing skills may:
1. Have their ungraded paper returned to rewrite and/or
2. Receive feedback which must be followed for improvement or
3. Receive an inadequate grade which may result in failure of the course.

Plagiarism is unacceptable and will result in failure in the course and possible dismissal from the program.

Academic Integrity
LCU Department of Psychology and Counseling follows the University policy for academic integrity including plagiarism. The Code of Academic Integrity can be found here at https://lcu.edu/resources/student-handbook/code-of-academic-integrity/.

Standards of Student Conduct
With the goal to create a community that is Christ-centered, the university has established expectations for student behavior. As a member of the LCU community, each student has the responsibility to become familiar with the expectations that reflect the high standards of the university’s mission. These values include, but are not limited to:

1. Respect for one’s self and others within the campus and in the community.
2. Respect for the legacy, mission, and community Lubbock Christian University strives to maintain.
3. Respect for all the laws set forth by the government at local, state, and federal levels.
4. Respect of policy, procedure, discipline, and authority implemented by the institution to effectively manage all university activity.
5. Respect for the diversity (personality, race, religion, etc.) of students, faculty and staff who inhabit the LCU community.
6. Willingness to embrace the need to hold others in the LCU community accountable to the Christian standards that reflect the university’s mission.
7. Ability to communicate effectively and appropriately with instructors, staff, clients, supervisors, and fellow classmates—both in person and by email. We believe it is imperative that a student graduating into the mental health profession know to communicate thoughtfully, appropriately, and with care.

All policies regarding student conduct are available in the University Student Handbook (https://lcu.edu/resources/student-handbook). These policies apply to all graduate students on or off campus, regardless of whether school is in session.

Library Resources
Library services for distance students are borrowing privileges, research and reference assistance, library instruction and interlibrary loan mediation.

Information about services for distance students, access into academic databases and other library resources is available through the Lubbock Christian Library Website at http://lib.lcu.edu/home

You can access research how to’s and support at the LCU library at http://lib.lcu.edu/c.php?g=659240&p=4628344

For further information on any aspect of library resources and access please call or write the Lubbock Christian Library at 806.720.7326 or library@lcu.edu.

Services for Students with Disabilities
Any student who feels s/he may need an accommodation based on the impact of a disability should contact me privately to discuss your specific needs. Also, please contact the Disabilities Coordinator in the Office for Disability Services at 806.720.7156 in room 117 CAA to coordinate reasonable accommodations. Be advised accommodations will not be made prior to documentation with the Office of Disability Services.

All students are expected to fulfill essential course requirements. The University will not waive any essential skill or requirement of a course or degree program. You may find more information on Disability Services here at https://lcu.edu/resources/disability-services/.

Concerning Violence, Harassment or Stalking
Unlawful discrimination and harassment (and any related retaliation) is prohibited and will result in disciplinary action, up to and including dismissal or separation from the University. LCU affirms its commitment to protecting the right of each person to raise concerns about alleged discrimination free of fear of retaliation. The university will take prompt, decisive action to investigate allegations of violence, harassment, and stalking; initiate the disciplinary process if appropriate; issue appropriate
sanctions against any student found responsible for acts of violence whether the behavior occurred on campus or off campus; take steps designed to prevent recurrence; and protect against retaliation.

Students are encouraged to report any incidents related to this policy and pursue the matter through the state's civil and/or criminal systems as well as through the university. A student who in good faith reports being the victim of, or a witness to an incident of sexual harassment, sexual assault, dating violence, or stalking may not be subject to disciplinary action for violation(s) of the Code of Community Standards occurring at or near the time of the incident.

Pursuant to Title IX
Reports of sexual misconduct may be made to the Title IX Coordinator, Yvonne Harwood at 806.720.7497, yvonne.harwood@lcu.edu. For more information on what and who to report this information to see our webpage at https://lcu.edu/resources/title-ix/.

To schedule an appointment with the LCU Counseling Center, call 806.720.7158. If you prefer, you may also request an appointment via e-mail, sent directly to counseling@lcu.edu. The Center is located on the 2nd floor of the SUB, Room 202.

Assessment and Grading
The hybrid course is divided into 8 weeks online and one residency week on campus. Please follow the schedule as demonstrated on your current syllabus and Moodle course schedule.

I. Discussion (10% of grade). This course is designed to be a collaborative learning experience using Discussion Forums. To receive a minimum passing grade, you must make an original posting by Wednesday at 11:59pm CST and respond to at least two other postings by Sunday at 11:59pm CST which must be on two separate days. However, I hope each of you make more than three postings and really get into the heart of the discussions. NOTE: Only discussion threads posted by 11:59 pm CST on Sunday of the week they are due will count for grading purposes.

II. Exams (25% of grade). There will be four open-book exams. Exams are scheduled for the 2nd, 4th, 6th, and 8th weeks of class. Each exam will have approximately 25 or more multiple choice or true/false questions over the material covered in the previous and current weeks in the course. The exam questions will come from the assigned videos and readings from a test bank.

III. Case Conceptualization (25% of grade). For this written assignment you will view the video role play of an intake session and do a complete diagnosis, case conceptualization, evidence-based treatment plan and provide medication classification suggestion for the diagnosis. The case conceptualization and evidence-based treatment plan will be based on your diagnosis following the format found in your Schwitzer and Rubin text. The list of possible medication classifications for the diagnosis will be based on the Preston and Johnson book. The evidence-based treatments section should include at least two references from relevant research articles.

The assignment will have the following section headings: Diagnosis, Case Conceptualization, Evidence-Based Treatment Plan, and Medication Classifications Suggestions.

This assignment is due in Week 7. You will submit your paper through TurnItIn for a grade. Please bring your completed paper to Residencies.

The case conceptualization is a way of organizing information about a client in order to better understand the symptomology and plan appropriate treatment plans. Please use the following format and headings in preparing the Case Conceptualization:

1. Diagnosis. The diagnosis should be no longer than two pages or shorter than one page. The diagnosis should include the utilization of the decision trees from the
Handbook of Differential Diagnosis text and should be references as such. The diagnosis should also contain the DSM diagnosis classification and number. Describe the logic used in coming to your diagnosis.

2. **Case Conceptualization.** Following the four steps set out in chapter 3 of the Diagnosis and Treatment Planning Skills book by Schwitzer and Lawrence write up a case conceptualization. Describe each step and the conclusion you came to in each step. This section should be about 3 pages.

3. **Treatment Plan Summary.** Using Chapter 4 of the Schwitzer and Lawrence book, develop a treatment plan using and identifying the four elements of a standard treatment plan described on page 112. This portion of the paper should be presented in table format similar to that shown in Table 5.5 on page 207.

4. **Medication Classification Suggestion.** Develop a classification of medications which may be prescribed for this diagnosis. This should be encapsulated in a single paragraph using the Clinical Psychopharmacology Made Ridiculously Simple book by Preston and Johnson.

5. **APA Style.** Please provide an APA-style title page, pagination, citations & reference page. Refer to the samples provided in the Schwitzer and Rubin text if needed. See also the Grading Rubric provided.

### IV. Residency Assignments (40% of grade)

During the residency, time is spent bolstering student learning and clarifying concepts from the online portion of class. Students will make accurate client diagnoses, treatment plans, and goals based on role play video clips, movie clips, written intakes, and personal interviews.

#### Grading Criteria

<table>
<thead>
<tr>
<th>Discussions</th>
<th>100 points</th>
<th>10%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exams</td>
<td>300 points</td>
<td>25%</td>
</tr>
<tr>
<td>Residency Assignments</td>
<td>300 points</td>
<td>40%</td>
</tr>
<tr>
<td>Case Conceptualization</td>
<td>300 points</td>
<td>25%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1000 points</td>
<td>100%</td>
</tr>
</tbody>
</table>

**A** 90% - 100%

**B** 80% - 89%

**C** 70% - 79%

**F** 69% and lower

#### Discussion Participation Rubric

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Unacceptable 0 Points</th>
<th>Poor 1-2 Point</th>
<th>Acceptable 3 Points</th>
<th>Good 4 Points</th>
<th>Excellent 5 Points</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Assignment Posting</td>
<td>Posts no assignment.</td>
<td>Posts assignment with superficial thought and preparation; doesn’t address all aspects of the task.</td>
<td>Posts adequate assignment with superficial thought and preparation; addresses most aspects of the task.</td>
<td>Posts well developed assignment that addresses all aspects of the task; lacks full development of concepts.</td>
<td>Posts well-developed assignment that fully addresses and develops all aspects of the task (300 words or more).</td>
<td></td>
</tr>
</tbody>
</table>
### Responses to Classmate Postings

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Posts no followup responses to others.</td>
</tr>
<tr>
<td>2</td>
<td>Posts a response that is a shallow contribution to discussion (e.g., agrees or disagrees); or does not enrich discussion with either response (minimum of 2)</td>
</tr>
<tr>
<td>3</td>
<td>Posts shallow contribution to discussion (e.g., agrees or disagrees); does not enrich discussion. Asks shallow questions that doesn’t further the discussion. Posts a response (minimum is 2) considered good or excellent.</td>
</tr>
<tr>
<td>4</td>
<td>Elaborates on an existing posting with further comment. Asks thoughtful questions to further the discussion.</td>
</tr>
<tr>
<td>5</td>
<td>Demonstrates analysis of others’ posts; Extends meaningful discussion by building on previous posts (150 words or more). Asks thoughtful questions requiring critical thinking to further the discussion.</td>
</tr>
</tbody>
</table>

### Content Contribution

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Posts information that is off-topic, incorrect, or irrelevant to discussion.</td>
</tr>
<tr>
<td>2</td>
<td>Repeats but does not add substantive information to the discussion.</td>
</tr>
<tr>
<td>3</td>
<td>Repeats and adds minimal substantive information to the discussion.</td>
</tr>
<tr>
<td>4</td>
<td>Posts information that is factually correct; lacks full development of concept or thought.</td>
</tr>
<tr>
<td>5</td>
<td>Posts factually correct, reflective, and substantive contribution; advances discussion and/or asks questions that require critical thinking.</td>
</tr>
</tbody>
</table>

### References & Support

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Includes no supporting references or experiences. APA style is not used. Writer recognizes research but does not cite in text or reference source (Unintentional Plagiarism).</td>
</tr>
<tr>
<td>2</td>
<td>Uses personal experience to support comments, but does not include references to readings or research. Research, literature, readings and/or media is incorrectly cited within the text and reference section (3-4 mistakes across citations).</td>
</tr>
<tr>
<td>3</td>
<td>Incorporates some references from required sources, popular websites and/or personal experience to support comments. All references are cited using APA style including in-text citations and references at the end of the text with minimal mistakes (1-2 mistakes across citations).</td>
</tr>
<tr>
<td>4</td>
<td>Incorporates references from required sources including textbook, required media or peer-reviewed research used as well as some references to personal experience to support comments. All references cited correctly using APA style, including in-text citations or references at the end of the post.</td>
</tr>
</tbody>
</table>

### Clarity & Mechanics

<table>
<thead>
<tr>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Posts long, unorganized or rude content that may contain multiple errors or may be inappropriate.</td>
</tr>
<tr>
<td>2</td>
<td>Communicates in friendly, courteous and helpful manner with some errors in clarity or mechanics.</td>
</tr>
<tr>
<td>3</td>
<td>Communicates in friendly, courteous and helpful manner with some errors in clarity or mechanics.</td>
</tr>
<tr>
<td>4</td>
<td>Contributes valuable information to discussion with minor clarity or mechanics errors.</td>
</tr>
<tr>
<td>5</td>
<td>Contributes to discussion with clear, concise comments formatted in an easy to read style that is free of grammatical or spelling errors.</td>
</tr>
</tbody>
</table>

### Case Conceptualization Rubric

<table>
<thead>
<tr>
<th>Grading Rubric-Case Conceptualization Paper</th>
<th>Does Not Meet Expectations 0</th>
<th>Barely Acceptable 10</th>
<th>Meets Expectations 15</th>
<th>Exceeds Expectations 20</th>
<th>Weight/ Possible Points</th>
<th>Points Earned</th>
</tr>
</thead>
</table>

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**CASE CONCEPTUALIZATION** - The case conceptualization should include the following content: (a) premise with a topic sentence; (b) client strengths and weakness from the chosen theoretical perspective; (c) client prognosis; (d) supporting material (i.e., evidence to back up premise, in depth analysis of strengths and weaknesses, client past history, current circumstances and in session behavioral observations); (e) client diagnosis based on DSM-5 criteria; and (f) conclusions about overall level of functioning.

This assignment is due in the class meeting of the week you sign up to present. The class meeting that will focus on your case so if you do not attend virtual class that week or do not have your presentation ready to present you will be given a fail on this assignment. This can lead to failure of the practicum class.

<table>
<thead>
<tr>
<th>Description</th>
<th>No Content</th>
<th>Missing some of the assigned content</th>
<th>Presents an adequate/average handling of the assigned content</th>
<th>Presents a thorough analysis and synthesis of the required diagnosis in a manner that goes beyond the minimum of what is expected</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TREATMENT PLAN</strong> - The treatment plan should include the following content: (a) broad overview of how the plan will be implemented; (b) long-term goals; and (c) short-term goals to address each long-term goal. Refer to your treatment planner text for assistance in developing this portion. Match goals with chosen theory.</td>
<td>No Treatment Plan</td>
<td>Missing some of the assigned content</td>
<td>Presents an adequate/average handling of the assigned content</td>
<td>Presents a thorough analysis and synthesis of the client and the treatment plan in a manner that goes beyond the minimum of what is expected.</td>
<td>25 pts</td>
</tr>
<tr>
<td><strong>POWER POINT CLASS PRESENTATION</strong> - For the class presentation you will provide a power-point overview of your case conceptualization and treatment plan to be viewed by the class as you give a verbal overview of this case. Have this file on your computer (online students, campus students should use a thumb drive) so you can show it to the class. DO NOT READ YOUR POWER POINT to the class during presentation. Questions and comments will follow your presentation. Assignment file must have a .doc or .docx extension; presentations should use PowerPoint.</td>
<td>No Power Point</td>
<td>Presents a poor Treatment Plan Summary</td>
<td>Presents an adequate/average Treatment Plan Summary</td>
<td>Presents an excellent video which demonstrates higher level skills.</td>
<td>20 pts</td>
</tr>
</tbody>
</table>
CLARITY AND MECHANICS
The length of this assignment should be 3-5 pages. Identify the writing style chosen from chapter 1 in the Berman text at the beginning of the paper. Complete sentences, proper spelling.

Submit signed informed consent.
Your assignment will be submitted in the week that you have chosen to present.

APA STYLE WRITING & FORMATTING AND REFERENCES
One inch margins, no additional space between paragraphs, font size and style are correct (Times New Roman, 12-point font, 1 inch margins), proper use of quotations, commas, italics, and other punctuation.

Activity | Estimated time spent
---|---
Case Conceptualization, Presentation Prep, Research, Theory into Practice, Project, Resources | 27.75 hrs
Lectures/Residencies/Discussion Boards | 35.8 hrs
Class Assignments, Exam and Exam Preparation, Multimedia Assignments, Projects, Simulations, Presentations, Reading | 39.2 hrs
Outside Work, Study Time, Readings | 50 hrs
Total time spent | 152.75 hrs

Tentative Schedule and/or Due Dates

On-campus schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Topics</th>
<th>Assignments</th>
<th>CACREP Standard</th>
</tr>
</thead>
</table>
| Week 1 | Introduction to the DSM, differential diagnosis and treatment planning | **Readings:**
  Syllabus
  Getting Started Folder
  Professor’s Tips for Success Folder

**Textbook Readings:**
In the *DSM-5*:
  Introduction p. 5-18
  Use of the Manual p. 19-25

In *DSM-5 Differential Diagnosis*:
  Preface p. xiii-xv
  Ch. 1 p. 1-16 | | 2.F.5.g. 2.F.5.i. 2.F.5.j. 5.C.2.d. |
<table>
<thead>
<tr>
<th>Week</th>
<th>Topic</th>
<th>Textbook Readings</th>
</tr>
</thead>
</table>
| 2     | Bi-polar and related disorders, diagnostic criteria, case study, introduction to Psychopharmacology | **Textbook Readings:**  
In *DSM-5*:  
Bi-Polar and Related Disorders p. 123-154  
In *DSM-5 Differential Diagnosis*:  
Ch. 3, Bipolar and Related Disorders, Differential Diagnosis by the Tables p. 157-161  
Tables 3.3.1 through 3.3.3 p. 182-188  
In *Diagnosis & Treatment Planning Skills*:  
Chapter 2- Diagnosis p. 31-37  
Case 5.6 *Misery’s Annie Wilkes* (Bipolar 1) p. 209-223  
In *Clinical Psychopharmacology Made Ridiculously Simple*:  
Ch. 1-General Principles p. 1  
Ch. 3-Bipolar Illness p. 20-28  
Case B and C: A Case of Bipolar Illness p. 70-72  
**Watch Videos:**  
**Assessments:**  
Exam 1- over ALL materials from Weeks 1 and 2 | 2.F.5.h.  
5.C.1.c.  
5.C.2.d.  
5.C.2.h.  
5.C.3.b.  
5.C.3.a.  
2.F.5.a.  
2.F.5.g.  
2.F.5.i.  
2.F.5.j.  
5.C.1.c.  
5.C.2.h.  
5.C.3.a.  
2.F.5.a.  
2.F.5.g.  
2.F.5.i.  
2.F.5.j.  
5.C.1.c.  
5.C.2.h.  
5.C.3.a.  
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2.F.5.g.  
2.F.5.i.  
2.F.5.j.  
5.C.1.c.  
5.C.2.h.  
5.C.3.a.  
2.F.5.a.  
2.F.5.g.  
2.F.5.i.  
2.F.5.j.  
5.C.1.c.  
5.C.2.h.  
5.C.3.a.  |
| 3     | Depressive Disorders and differential diagnosis, diagnostic criteria, case studies, related psychopharmacology | **Textbook Readings:**  
In the *DSM-5*:  
Depressive Disorders p. 155-188  
In *DSM-5 Differential Diagnosis*:  
Decision Tree 2.10-Depressed Mood p. 61-66  
Ch. 3, Depressive Disorders, Tables 3.4.1 through 3.4.4, p. 183-197 | 2.F.5.a.  
2.F.5.g.  
2.F.5.i.  
2.F.5.j.  
5.C.1.c.  
5.C.2.h.  
5.C.3.a.  |
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<tr>
<th>Week</th>
<th>Trauma- and Stressor-Related Disorders, diagnostic criteria, case study, related psychopharmacology</th>
<th>Textbook Readings:</th>
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<tr>
<td></td>
<td>In <em>Diagnosis &amp; Treatment Planning Skills</em>: Ch. 3 Case Conceptualization p. 75-105</td>
<td>In the <em>DSM-5</em>:</td>
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<td>Case 5.5 <em>The Color Purple’s</em> Miss Celie (Persistent Depression) p. 192-208</td>
<td>Trauma- and Stressor-Related Disorders p. 265-290</td>
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<td>Case 5.9 <em>The Revolver Album’s</em> Eleanor Rigby (Depression Disorder) p. 262-273</td>
<td>In <em>DSM-5 Differential Diagnosis</em>: P. 87-90 and</td>
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<td></td>
<td>Decision Trees 3.7.1 and 3.7.2 for Trauma- and Stressor-Related Disorders p. 225-228</td>
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<td>In <em>Diagnosis &amp; Treatment Planning Skills</em>: Chapter 4-Treatment Planning p. 107-132</td>
<td>In <em>Diagnosis &amp; Treatment Planning Skills</em>:</td>
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<td>Case 5.3 <em>West Side Story’s</em> Maria (Acute Stress Disorder) 167-179</td>
<td>Chapter 4-Treatment Planning p. 107-132</td>
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<td></td>
<td>Case 5.5 <em>The Color Purple’s</em> Miss Celie (PTSD &amp; Persistent Depressive Disorder) p. 192-208</td>
<td>Case 5.3 <em>West Side Story’s</em> Maria (Acute Stress Disorder) 167-179</td>
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**Watch Videos:**

**Assessments:**
- Discussion Board 3

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<tr>
<th>Week</th>
<th>Anxiety Disorders and Obsessive-Compulsive Disorders, diagnostic criteria, case study, related psychopharmacology</th>
<th>Textbook Readings:</th>
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<tr>
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<td>In <em>DSM-5</em>:</td>
<td>Anxiety Disorders p. 189-233</td>
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<td>In <em>DSM-5</em>:</td>
<td>Obsessive-Compulsive and Related Disorders p. 235-264</td>
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<tr>
<th>Week</th>
<th>Trauma- and Stressor-Related Disorders, diagnostic criteria, case study, related psychopharmacology</th>
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### Week 6

**Personality Disorders (paranoid, schizoid, schizotypal, antisocial, borderline), related psychopharmacology**

<table>
<thead>
<tr>
<th>Textbook Readings:</th>
<th>2.F.5.a.</th>
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<tr>
<td>In the <em>DSM-5</em>:</td>
<td>2.F.5.g.</td>
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<tr>
<td>Personality Disorders p. 645-666 (paranoid, schizoid, schizotypal, antisocial, borderline personality disorders)</td>
<td>2.F.5.j.</td>
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<td>In <em>DSM-5 Differential Diagnosis</em>:</td>
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<tr>
<td>Personality Disorders, Paranoid, Schizoid, Schizotypal, Antisocial, Borderline Personality Disorder, Tables 3.17.1 – 3.17.5 pages 276 -281</td>
<td>5.C.2.d.</td>
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<td>In <em>Diagnosis &amp; Treatment Planning Skills</em>:</td>
<td>5.C.2.h.</td>
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<td>No reading.</td>
<td>5.C.3.a.</td>
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<td>In <em>Clinical Psychopharmacology Made Ridiculously Simple</em></td>
<td>5.C.3.b.</td>
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<tr>
<td>Chapter 6: Misc. Disorders-Borderline Personality Disorder p. 51</td>
<td></td>
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</table>

**Watch Videos:**


**Assessments:**

Exam 3 over all materials from weeks 5 and 6
| Week 7 | Personality Disorders Cont. (histrionic, narcissistic, avoidant, dependent, obsessive-compulsive), related psychopharmacology | **Textbook Readings:**  
In the *DSM-5*:  
Personality Disorders–Histrionic, Narcissistic, Avoidant, Dependent, Obsessive-Compulsive* p. 667-705  
*Be sure to note the difference between OCD Personality Disorder and Obsessive Compulsive Disorder.*  

In *DSM-5 Differential Diagnosis*:  
Personality Disorders –Histrionic, Narcissistic, Avoidant, Dependent, Obsessive-Compulsive, Tables 3.17.6-3.17-11, p. 282-287  

In *Diagnosis & Treatment Planning Skills*:  
Case 5.8 *Will and Grace’s* Jack McFarland (traits of Histrionic P.D.) p. 243-261  

In *Clinical Psychopharmacology Made Ridiculously Simple*  
Chapter 6: Misc. Disorders (OCD) p. 50-54  

**Watch Videos:**  

**Assessments:**  
Discussion Board 7  

**CASE CONCEPTUALIZATION Paper Due!** Submit through Turn It In and bring with you to Residencies.  

| Week 8 | Schizophrenia and Psychotic Disorders, case studies, related psychopharmacology | **Textbook Readings:**  
In the *DSM-5*:  
Schizophrenia Spectrum and other Psychotic Disorders p. 87-122  

In *DSM-5 Differential Diagnosis*:  
Schizophrenia Spectrum and other Psychotic Disorders, Tables 3.2.1 through 3.2.5, p. 175-181  

In *Clinical Psychopharmacology Made Ridiculously Simple*  
Chapter 5, Psychotic Disorders, p. 40-49  
Chapter 7 Over the Counter Medications and Dietary Supplements p. 57-60  
Chapter 8 Enhancing Medication Adherence p. 61-63  

**Assessments:**  
Exam 4 over ALL materials from Weeks 7 and 8  

| Residency Week | The residency week is the intensive week when students are on-campus in class for 20 hours. Time is spent bolstering student learning and clarifying concepts from the online portion of class. Students will make accurate client diagnoses, treatment plans, and goals based on role play video clips, movie clips, written intakes, and personal interviews. |  

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*Professor reserves the right to change due dates, assignments, and other materials as may be needed from time to time.*