

# **Counseling 540**

Diagnosis and Treatment Planning

# Fall 2024-Course Syllabus

Wednesday, 4:30pm-7:10pm CHEC (McKinney) Campus, Rm TBD In-Person

AI use policy as of May 25, 2023

Texas A&M University-Commerce acknowledges that there are legitimate uses of Artificial Intelligence, ChatBots, or other software that has the capacity to generate text, or suggest replacements for text beyond individual words, as determined by the instructor of the course.

Any use of such software must be documented. Any undocumented use of such software constitutes an instance of academic dishonesty (plagiarism).

Individual instructors may disallow entirely the use of such software for individual assignments or for the entire course. Students should be aware of such requirements and follow their instructors 'guidelines. If no instructions are provided the student should assume that the use of such software is disallowed.

In any case, students are fully responsible for the content of any assignment they submit, regardless of whether they used an AI, in any way. This specifically includes cases in which the AI plagiarized another text or misrepresented sources.

13.99.99.R0.03 Undergraduate Academic Dishonesty 13.99.99.R0.10 Graduate Student Academic Dishonesty

### INSTRUCTOR INFORMATION

**Instructor**: Christian A. Henry, PhD, LPC, NCC

Office Location: Binnion, B216

Office Hours: Tuesdays, 11am-2pm; Fridays, 10am-3pm University Email Address: <a href="mailto:christian.henry@tamuc.edu">christian.henry@tamuc.edu</a>

Preferred Form of Communication: Email

**Communication Response Time**: 24-48 hours, Monday – Friday

### **COURSE INFORMATION**

# **Textbook(s) Required:**

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorder* (5<sup>th</sup> ed.). Author.

Reichenberg, L. W., & Seligman, L. (2016). Selecting effective treatments: A comprehensive, systematic guide to treating mental disorders. (5<sup>th</sup> ed.). John Wiley & Sons, Inc.

# **Required Supplemental Reading:**

- Alarcón, R. D. (2014). Cultural inroads in DSM-5. *World Psychiatry*, *13*, 310-313. Doi:10.1002/wps.20132
- Braun, S. A., & Cox, J. A. (2005). Managed mental health care: Intentional misdiagnosis of mental disorders. *Journal of Counseling & Development*, 83, 425-433.
- Ghaemi, S. N. (2014). DSM-5 and the miracle that never happens. *Acta Psychiatrica Scandinavica*, 129, 410-412. Doi: 10.1111/acps.12263
- Kress, V. E., Barrio Minton, C. A., Adamson, N. A., Paylo, M. J., & Pope, V. (2014). The removal of the multiaxial system in the DSM-5: Implications and practice suggestions for counselors. *The Professional Counselor*, *4*, 191-201. Doi:10.15241/vek.4.3.191
- Kress, V. E., Hoffman, R. M., Adamson, N., & Eriksen, K. (2013). Informed consent, confidentiality, and diagnosing: Ethical guidelines for counselor practice. *Journal of Mental Health Counseling*, 35, 15-28.
- Polanski, P. J., & Hinkle, J. S. (2000). The mental status examination: Its use by professional counselors. *Journal of Counseling & Development*, 78, 357-364. Doi:10.1002/j.1556-6676.2000.tb01918.x
- Schmit, E. L., & Balkin, R. S. (2014). Evaluating emerging measures in the DSM-5 for counseling practice. *The Professional Counselor*, *4*, 216-231. Doi:10.15241/els.

### **Optional Texts and/or Materials:**

American Psychological Association. (2020). *Publication manual of the American Psychological Association*. (7<sup>th</sup> ed.). https://doi.org/10.1037/0000165-000

# **Course Description**

540. Diagnosis and Treatment Planning. Three semester hours.

Principles and models of biopsychosocial assessment, case conceptualization, and treatment planning for counseling applications within a managed care framework. DSM diagnosis and differential diagnosis formulations, disorder prevention and intervention, and promotion of optimal mental health within counseling settings are studied.

General Course Information Diagnosis and treatment planning in counseling is intended to provide counseling students with practical training in diagnostic procedures, use of assessment for diagnostic and treatment planning purposes, and exploration of theories and etiology of various DSM disorders. Emphasis of this course is placed on practical applications of DSM diagnosis to treatment planning and counseling interventions.

# **Student Learning Outcomes**

#### 2016 CACREP Standards Addressed in COUN 540

Masters Standard	Learning Activity	Assignment	Assessment Rubric	Benchmark
<b>5.C.1.b.</b> theories and models related to clinical mental health counseling	R & S (2016)			≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation
5.C.1.c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning	Kress et al. (2013) R & S (2016)			≥80% of average rubric scores will either meet (2) or exceed (3) expectation
<b>5.C.1.d.</b> neurobiological and medical foundation	APA (2013)			≥80% of average rubric scores will

and etiology of addiction and co-occurring disorders  5.C.1.e. psychological tests and assessments specific to clinical	R & S (2016) Ch. 17  Polanski & Hinkle (2000)			either meet (2) or exceed (3) expectation ≥ 80% of average rubric scores will either meet (2) or
mental health counseling	Schmit &Balkin (2014)			exceed (3) expectation
<b>5.C.2.a.</b> roles and settings of clinical mental health counselors	Kress, Hoffman, Adamson, & Eriksen (2013)	Examinations	Midterm Exam	≥80% of average rubric scores will either meet (2) or exceed (3) expectation
<b>5.C.2.b.</b> etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	APA (2013) Schmit & Balkin (2014)			≥80% of average rubric scores will either meet (2) or exceed (3) expectation
5.C.2.c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services network	Kress, Bario Minton, Adamson, Paylo, & Pope (2014)			≥80% of average rubric scores will either meet (2) or exceed (3) expectation
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 International Classification of Diseases (ICD)	Alarcón (2014) APA (2013)			≥80% of average rubric scores will either meet (2) or exceed (3) expectation

<b>5.C.2.e.</b> potential for substance use disorders to mimic and/or cooccur with a variety of neurological, medical, and psychological disorders	R & S (2016) Ch. 17	Examinations	Final Exam	≥ 80% of average rubric scores will either meet (2) or exceed (3) expectation
<b>5.C.2.f.</b> impact of crisis and trauma on individuals with mental health diagnoses	R & S (2016) Ch. 8			≥80% of average rubric scores will either meet (2) or exceed (3) expectation
<b>5.C.2.g.</b> impact of biological and neurological mechanisms on mental health	APA (2013)			≥80% of average rubric scores will either meet (2) or exceed (3) expectation

### Content Areas include, but are not limited to, the following:

### • Assessment

- Biopsychosocial assessment
  - Biological, neurological, and physiological factors that affect human development, functioning, and behavior
- o Intake interview
- Cultural formulation interview
- o Interpreting assessment results
- Psychological tests
- Mental status examination

### • Diagnosis

- Diagnostic process
- o Differential diagnosis
- o Etiology
- o Diagnostic and Statistical Manual of Mental Disorders (DSM)
- o International Classification of Diseases (ICD)

# • Case Conceptualization

- Counseling theories
- Cultural factors

# • Treatment Planning

- o Use of assessment and diagnosis to formulate treatment goals
- o Use of counseling theory to formulate treatment goals
- o Constructing evidence-based treatment plans

# **COURSE REQUIREMENTS**

#### **Minimal Technical Skills Needed**

In this class, you will utilize the Learning Management System (LMS) entitled To complete assignments, you will need to utilize other technologies such as Microsoft Word, PowerPoint, etc. If you have issues with this system, it is your responsibility to contact the help desk immediately.

# INSTRUCTIONAL METHODS

### Student Responsibilities and Tips for Success in the Course

As a student in this course, you are responsible for being active in your learning process. Expectations of this course include the following:

- 1. You are expected to always display professionalism. Be respectful of your professor and peers. Be open to feedback, as you will receive this throughout the program.
- 2. Complete all assignments by the deadline.
- 3. Adhere to the university's Student Code of Conduct.
- 4. All writing assignments must be done according to APA 7<sup>th</sup> edition.
- 5. Regularly check your University email.
- 6. Begin your readings ASAP. Sometimes it may take more than one attempt to digest the material.
- 7. Deadlines are the last possible moment something is due—not the first moment to start. Work ahead. I realize this may not always be possible; however, when you can, do so.
- 8. Be open to the process. This degree takes time, work, effort, and growth.

### COURSE ASSIGNMENTS/ASSESSMENTS

1. Class Participation and Attendance – Diagnostic Dyad (20%). Consultation and collaboration with other mental health providers is an integral part of accurate diagnosis, particularly in clinical mental health settings such as community agencies, hospitals, crisis centers, and private practices. As part of your attendance and participation requirement for this course, you will become part of a diagnostic dyad this semester. Each week, you and your dyad create a case conceptualization on a made up client (assignment #2) individually, review one another's work in class, and come to a common agreement on how to treat the client with that disorder and present in class. Working collaboratively, you and your teammate will identify and justify the diagnoses for that client by creating a client conceptualization. After you have done so, you will elect a dyad representative to present the case example, provide a diagnosis, and justify your decision to the class.

Beyond participation in diagnostic dyads, students are expected to demonstrate consistent attendance. Attendance is defined as being present at the start of class, being in class during class time, and staying until the end of class. Students cannot miss more than 10% of the courses. The policy allows for two (2) absences. Any absence missed after two (2) absences will result in loss of credit for the course.

You will create 3 client conceptualizations exploring the impact of a particular DSM-5 diagnosis on a fictional client's functioning related to one of the diagnoses for the week. Your build-a-client conceptualization should be written with sufficient detail such that it clearly illustrates the diagnostic criteria associated with the disorder you have chosen with your dyad. You must provide a clinical justification using the DSM-5 criteria associated with the diagnose(s) you have assigned.

After you have chosen a particular diagnosis and built a client vignette which clearly illustrates the associated symptoms, you will build an evidence-based treatment plan that delineates strategies for working with that particular disorder. You should use your Reichenberg and Seligman (2016) text and a minimum of three (1) other peer- reviewed source (e.g., textbooks, journal articles, ACA practice briefs, etc.) to build an evidence-based treatment plan for your fictional client.

Your Build-a-Client Case Conceptualization should include, at a minimum, a:

- Detailed description of the client's demographics (i.e., age, gender, ethnicity, socioeconomic background, occupation and/or educational level, marital status and/or familial context)
- Description of the client's problem(s) and emotional, behavioral, and cognitive symptoms
- Diagnostic impression, including justification using DSM-5 criteria
- Identification of the client's strengths and resources (e.g., interpersonal or tangible resources such as a supportive family or comprehensive mental health coverage via insurance)
- Evidence-based goals, objectives, and interventions for treatment supported by peerreviewed academic resources

The syllabus/schedule are subject to change.

• One real community resource or referral within the DFW area that could support the client (or their family) throughout the treatment process.

Students must participate in discussions such that their preparation for class is evident. Active participation and professional courtesy are expected. A general guide for in-class participation follows:

Class Participation and Attendance (Diagnostic Dyads) Rubric

	1 – Does Not Meet Expectation	2 – Meets Expectation	3 – Exceeds Expectations
Attendance and Participation (20%)	Passive participation: present, awake, alert, attentive, but not actively involved or invested; Or Uninvolved: absent, present but not attentive, sleeping, texting/surfing, irrelevant contributions. Absence or lateness on one or more of the 10-hour small group experience. More than two absences/pattern of lateness evident.	rely on the leadership and study of others, or reflect opinion/personal self-disclosure rather than study, contemplation, synthesis, and evaluation. Full attendance in the 10- hour small group experience. Two or less absences/no	Proactive participation: leading, originating, informing, challenging contributions that reflect in-depth study, thought, and analysis of the topic under consideration. This does not mean dominating discussion or self-disclosure inappropriate to the circumstances. Full attendance in the 10-hour small group experience. No more than one absence/no evident pattern of lateness.

2. Diagnosis PowerPoint: A sign up sheet will be given at the beginning of the class to select a diagnosis to present on each week per student. Presentation must be 20 minutes. You will be in charge of providing information about a diagnosis including the criteria to meet the diagnosis as stated in the DSM-5, symptoms, treatment, medication, multicultural/ethical considerations, and levels of care. Following the presentation, the instructor will inform students of additional important information for the diagnosis. Each presenter is to provide 5 exam questions at the end of the PowerPoint that covers their diagnosis. The five questions will be modified and used for midterms and final exams. The presentation has to be informative and cover every important detail of the diagnosis.

### Diagnosis PowerPoint Rubric

1 – Does Not Meet	7 - Meets Expectation	3 – Exceeds
Expectation	2 Wicets Expectation	Expectations

PowerPoint Expertise (20%)		Presentation had some information but not all. Presentation did not meet 20 minutes.	Presentation covered all assigned information such as criteria, multicultural/ethical considerations, treatment, medication management, and mental levels of care. Presentation met the time requirement of 20 minutes, and included examples, and exam questions.
----------------------------------	--	--	--

3. Pretend Client Biopsychosocial History and Treatment Plan (25%). Students will demonstrate an understanding of biopsychosocial constructs and develop their assessment and clinical writing skills by constructing a biopsychosocial history and treatment plan regarding a wellness issue for a classmate. Specific guidance for this assignment will be given in class and supporting documents will be uploaded to D2L as well.

# Peer Biopsychosocial History and Treatment Plan Rubric

	1 – Does Not Meet Expectation	2 – Meets Expectation	3 — Exceeds Expectations
Biopsychosocial History	Biopsychosocial was vague and incomplete; no empirical evidence provided; not representative of graduate level work	Biopsychosocial was vague and incomplete; no empirical evidence provided; not representative of graduate level work	Biopsychosocial was vague and incomplete; no empirical evidence provided; not representative of graduate level work
Treatment Plan (10 points)	evidence of using previous literature to understand theoretical orientation; not representative of graduate	evidence of using previous literature to	Treatment Plan was complete with no missing information; evidence of using previous literature to understand theoretical orientation; representative

APA 7 <sup>th</sup> Edition Style	to APA style; Poor grammar and sentence structure. Paper is disorganized; omission of intext citations and references. Poor quality	errors). Mostly adhere to APA style; sufficient grammar and sentence structure; paper is fairly organized; Use of intext citations and references. Representative of	Little to no errors (1-2 errors). Completely adhere to APA style; sufficient grammar and sentence structure; paper is well-organized; Use of in-text citations and references. Representative of graduate level work.
--------------------------------------	---	--	---

**4. Examinations.** Your midterm and final examinations will consist of information reviewed in the Reichenberg and Seligman (2016) text as well as the DSM-5. In addition to multiple choice and/or true-false questions, you will be given case vignettes describing people with one or more diagnoses. You will be required to arrive at a correct diagnosis for each vignette and provide a justification that supports the diagnose(s) you have chosen. These exams will be available via D2L.

# **GRADING SCALE**

Final grades in this course will be based on the following scale:

A = 90% - 100%

B = 80% - 89%

C = 70% - 79%

D = 60% - 69%

F = 59% or Below

Assignment	Percentage
Diagnostic Dyads and Case	20 %
Conceptualization (Participation)	
Diagnosis PowerPoint Presentation	25%
Pretend Biopsychosocial History/Tx	25%
Plan	
Midterm Exam	15%
Final Exam	15%

### LATE ASSIGNMENTS

While you cannot make up your participation grade in your Diagnostic Teams, I will accept late assignments for written work up to 3 days past their submission date for a reduction of 10% each day past due (i.e., 10% off for 1 day, 20% off for 2 days, and 30% off for 3 days). Also: I do understand that life happens! If you will communicate with me as soon as possible, I will consider extensions for assignments when extenuating circumstances arise.

#### COMMUNICATION AND SUPPORT

Communication with your professor is key to your professional growth. I am here to support and guide you along your academic journey. Please reach out if you have any concerns or questions. I strive to answer all emails within 48 hours, Monday-Friday. When emailing, please use your/my university email. Also, I will be more than happy to meet with you if needed. Please reach out to me so we can set up a convenient time to meet via Zoom.

# **TECHNOLOGY REQUIREMENTS**

#### LMS

All course sections offered by Texas A&M University-Commerce have a corresponding course shell in the myLeo Online Learning Management System (LMS). Below are technical requirements

### LMS Requirements:

https://community.brightspace.com/s/article/Brightspace-Platform-Requirements

#### LMS Browser Support:

https://documentation.brightspace.com/EN/brightspace/requirements/all/browser\_support.htm

### YouSeeU Virtual Classroom Requirements:

https://support.youseeu.com/hc/en-us/articles/115007031107-Basic-System-Requirements

# ACCESS AND NAVIGATION

You will need your campus-wide ID (CWID) and password to log into the course. If you do not know your CWID or have forgotten your password, contact the Center for IT Excellence (CITE) at 903.468.6000 or <a href="https://hep-password.com/hep-password">help-password.com/hep-passw

**Note:** Personal computer and internet connection problems do not excuse the requirement to complete all course work in a timely and satisfactory manner. Each student needs to have a backup method to deal with these inevitable problems. These methods might include the availability of a backup PC at home or work, the temporary use of a computer at a friend's home, the local library, office service companies, Starbucks, a TAMUC campus open computer lab, etc.

# **Technical Support**

If you are having technical difficulty with any part of Brightspace, please contact Brightspace Technical Support at 1-877-325-7778. Other support options can be found here: <a href="https://community.brightspace.com/support/s/contactsupport">https://community.brightspace.com/support/s/contactsupport</a>

# **System Maintenance**

Please note that on the 4th Sunday of each month there will be System Maintenance which means the system will not be available 12 pm-6 am CST.

#### COURSE AND UNIVERSITY PROCEDURES/POLICIES

University-Specific Procedures

# **Academic Integrity**

Students at Texas A&M University-Commerce are expected to maintain high standards of integrity and honesty in all of their scholastic work. For more details and the definition of academic dishonesty, <u>click here</u>.

Graduate Student Academic Dishonesty Form

#### **Student Conduct**

All students enrolled at the University shall follow the tenets of common decency and acceptable behavior conducive to a positive learning environment. The Code of Student Conduct is described in detail in the <a href="Student Guidebook">Student Guidebook</a>.

Students should also consult the Rules of Netiquette for more information regarding how to interact with students in an online forum: <a href="https://www.britannica.com/topic/netiquette">https://www.britannica.com/topic/netiquette</a>

### **TAMUC Attendance**

Students are expected to have completed assigned readings prior to the class period in which they will be discussed. You are also strongly encouraged to ask questions at any point during the class, as discussion generally allows students to learn better (and tends to make the class a lot more fun, too).

### **Students with Disabilities - ADA Statement**

The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disabilities. If you have a disability requiring an accommodation, please contact:

# Office of Student Disability Resources and Services

Texas A&M University-Commerce Velma K. Waters Library Rm 162 Phone (903) 886-5150 or (903) 886-5835 Fax (903) 468-8148

The syllabus/schedule are subject to change.

Email: studentdisabilityservices@tamuc.edu

Website: Office of Student Disability Resources and Services

http://www.tamuc.edu/campusLife/campusServices/studentDisabilityResourcesAndServices/

# **Student Counseling Services**

The Counseling Center at A&M-Commerce, located in the Halladay Building, Room 203, offers counseling services, educational programming, and connection to community resources for students. Students have 24/7 access to the Counseling Center's crisis assessment services by calling 903-886-5145. For more information regarding Counseling Center events and confidential services, please visit www.tamuc.edu/counsel

#### **Nondiscrimination Notice**

Texas A&M University-Commerce will comply in the classroom, and in online courses, with all federal and state laws prohibiting discrimination and related retaliation on the basis of race, color, religion, sex, national origin, disability, age, genetic information or veteran status. Further, an environment free from discrimination on the basis of sexual orientation, gender identity, or gender expression will be maintained.

### **Campus Concealed Carry Statement**

Texas Senate Bill - 11 (Government Code 411.2031, et al.) authorizes the carrying of a concealed handgun in Texas A&M University-Commerce buildings only by persons who have been issued and are in possession of a Texas License to Carry a Handgun. Qualified law enforcement officers or those who are otherwise authorized to carry a concealed handgun in the State of Texas are also permitted to do so. Pursuant to Penal Code (PC) 46.035 and A&M-Commerce Rule 34.06.02.R1, license holders may not carry a concealed handgun in restricted locations.

For a list of locations, please refer to the <u>Carrying Concealed Handguns On Campus</u> document and/or consult your event organizer.

### Web url:

 $\frac{http://www.tamuc.edu/aboutUs/policiesProceduresStandardsStatements/rulesProcedures/34Safet}{yOfEmployeesAndStudents/34.06.02.R1.pdf}$ 

Pursuant to PC 46.035, the open carrying of handguns is prohibited on all A&M-Commerce campuses. Report violations to the University Police Department at 903-886-5868 or 9-1-1

# FLEXIBLE COURSE OUTLINE / CALENDAR

Fall, 2024 Semester: August 25th – December 7th

Week/Date	Topic	Reading	Assignment
Week 1:	-Syllabus Review	R & S Ch.	-Class Introductions
Sunday, August 25th-	-Introduction to the DSM	1 DSM p.	-Review of Syllabus
Saturday, August 31st	-Role, Risks, and Benefits of	5-30	-Diagnostic Dyads
	Diagnosis		-Diagnosis Presentation
	-Introduction to Effective		sign up sheets
	Treatment Planning		
Week 2:	Assessments in	Schmit &	
Sunday, September 1st-	Counseling	Balkin (2014)	
Saturday, September	(Biopsychosocial, MSE)		
7th			
	Differential Diagnosis	Kress et al. (2013)	
		111 (2013)	
	Ethical and	DSM p. 715-727	
	Cultural	DSM p. 733-744	
	Considerations		
Week 3:	Neurodevelopmental	R & S Ch.	-1 <sup>st</sup> Diagnostic Dyad
Sunday, September 8 <sup>th</sup> -	Disorders	2 DSM p.	Case Conceptualization
Saturday, September		31-86	
14th		7 0 7 71 11 16	-Diagnosis Presentations
Week 4:	Disruptive, Impulse	R & S Ch. 11, 16	-Biopsychosocial
Sunday, September	Control, and Conduct	DSM p. 461-480	History/Tx Plan Due
15th-Saturday,	D/Os	DSM p. 329-354	2nd Diagnostic Dyad
September 21st	Feeding and Eating Disorders		-2nd Diagnostic Dyad Case Conceptualization
	recuing and Lating Disorders		Case Conceptualization
			-Diagnosis Presentations
Week 5:	Depressive Disorders	R & S Ch. 4, 5	-3 <sup>rd</sup> Diagnostic Dyad
Sunday, September	1	DSM p. 155-188	Case Conceptualization
22 <sup>nd</sup> -Saturday,	Bipolar Disorders	DSM p. 123-154	1
September 28th		_	-Diagnosis Presentations
Week 6:	Anxiety Disorders	R & S Ch. 6, 7	-4 <sup>th</sup> Diagnostic Dyad
Sunday, September		DSM p. 189-234	Case Conceptualization
29 <sup>th</sup> -Saturday, October	Obsessive-Compulsive D/Os		-Diagnosis Presentations
5th			

Week 7: Sunday, October 6 <sup>th</sup> - Saturday, October 12th	SPF	RING BREAK	
Week 8:	Trauma and Stressor-Related	R&S Ch. 8	-5 <sup>th</sup> Diagnostic Dyad
Sunday, October 13th-	Somatic Disorders	DSM p.	Case Conceptualization
Saturday, October 19th	265-290		-Diagnosis Presentations
		DSM p. 291-308	
		R&S Ch. 10	
	Midterm Examination		
			Midterm Exam
Week 9:	Schizophrenia Spectrum and	R & S Ch. 3, 9	-6 <sup>th</sup> Diagnostic Dyad
Sunday, October 20th-	Other Psychotic Disorders	DSM p. 87-122	Case Conceptualization
Saturday, October 26th		DSM	-Diagnosis Presentations
	Dissociative Disorders	p. 309-328	_

Week 10: Sunday, October 27 <sup>th</sup> -Saturday, November 2 <sup>nd</sup>			NO CLASS: Texas Counseling Association Conference
*** 1 44		D 0 C C 1 1 5	
Week 11:	Substance-Related and	R & S Ch. 17	-7 <sup>th</sup> Diagnostic Dyad
Sunday,	Addictive Disorders	DSM p. 481-590	Case Conceptualization
November 3 <sup>rd</sup> -			-Diagnosis Presentations
Saturday,			
November 9 <sup>th</sup>	D 1'4 D' 1	D 0 C C1 10	oth D: 4: D 1
Week 12:	Personality Disorders	R & S Ch. 19	-8 <sup>th</sup> Diagnostic Dyad
Sunday,	F1: : : F: 1 G1	DSM p. 645-684	Case Conceptualization
November 10 <sup>th</sup> -	1	DSM p. 761-782	-Diagnosis Presentations
Saturday,	Wake Disorders	R & S Ch. 12, 13	
November 16 <sup>th</sup>		DSM p. 355-360	
Week 13:	Sexual Dysfunctions	DSM p. 361-422 R & S Ch. 14, 15, 20	-9 <sup>th</sup> Diagnostic Dvad
,, , , , , , , , , , , , , , , , , , , ,	•	DSM p. 423-450	
Sunday, November 17 <sup>th</sup>	Gender Dysphoria Paraphilic Disorders	DSM p. 423-430 DSM p. 451-460	Case Conceptualization
	Farapillic Disorders	-	-Diagnosis Presentations
-Saturday,		DSM p. 685-706	
November 23 <sup>rd</sup>			NO CLASS
Week 14:			NO CLASS:
Sunday,			Thanksgiving Break
November 24 <sup>th</sup>			
-Saturday,			
November 30 <sup>th</sup>			

Week 15:	Neurocognitive Disorders	R & S Ch. 18	-10 <sup>th</sup> Diagnostic Dyad
Sunday,	Other Mental Disorders	DSM p. 591-644	Case Conceptualization
December 1st-		DSM p. 707-760	-Diagnosis Presentations
Saturday,		DSM p. 783-806	
December 7th			-Final Exam