



TROY UNIVERSITY
Southeast Region
Counseling & Psychology Program
PSY6670 Diagnosis and Treatment Planning in Counseling
Term 2, 2012 (Oct 15 – Dec 16, 2012)
In person class Tuesday Oct 16, 23, 30, Nov 6, 13, 27 & Dec 4, 11, 2012
Class Location: Tampa, Florida

For course syllabus posted prior to the beginning of the term, the instructor reserves the right to make minor changes prior to or during the term. The instructor will notify students, via e-mail or Blackboard announcement, when changes are made in the requirements and/or grading of the course.

INSTRUCTOR INFORMATION

Name: James J Messina, Ph.D., CCMHC, NCC, Assistant Professor

Office Hours: Tuesdays Thursdays: 9:00 am - 5:00 pm

Contact Information: Office number: 813.631.5176 (home/office-tied to Cell Phone);

Email: jjmessina@troy.edu

INSTRUCTOR EDUCATION

1974 Post-Doctoral Fellow, University of Florida, Gainesville, FL
NIMH Fellowship in Mental Health Administration, Advisor: Dr. Ben Barger

1974 Ph.D. State University of New York at Buffalo, Buffalo, NY
Major: Counselor Education, Dissertation: A Comparative Study of Conjoint Family Therapy and Parent Consultation, Advisor: Dr James Hansen

1970 M.ED. State University of New York at Buffalo, Buffalo, NY
Major: Secondary School Counseling

1968 B.A. Catholic University of America, Washington, D.C., Major: Philosophy

TEXTBOOK(S) AND/OR OTHER MATERIALS NEEDED

American Psychiatric Association (2000). *Diagnostic and statistical manual of mental disorders* (4th ed) (text revision) (DSM-IV-TR). Washington, DC: American Psychiatric Association.
ISBN: 0-89042-025-4

American Psychological Association. (2010). *Publication Manual of the American Psychological Association* (6th edition)(Second Printing). Washington, DC: American Psychological Association.

Jongsma, Jr., A.E. and Peterson, L.M. (2009) *The complete adult psychotherapy treatment planner*. New York, NY: John Wiley & Sons, Inc.

Recommended But Not Required Texts

Durand, V. M. & Barlow, D. H. (2012) *Essentials of Abnormal Psychology (Sixth Edition)*. Belmont, CA: Thomson Wadsworth. ISBN-13: 978-1-111-34362-0 with the CD-Rom which goes with it: *Abnormal Psychology Inside Out DVD Vols 1-4*

Brown, T. & Barlow, D.H. (2011) *Casebook in Abnormal Psychology (4th Edition)*. Belmont, CA: Thomson Wadsworth. ISBN-10: 0495604380

Preston., J.D., O’Neal, J.H., and Talaga, M.C. (2010) *Handbook of clinical psychopharmacology for therapists*. Oakland, CA: New Harbinger Publications, Inc.

The textbook provider for the eCampus of Troy University is MBS Direct. The Web site for textbook purchases is <http://bookstore.mbsdirect.net/troy.htm>. Students should have their textbook from the first week of class. Not having your textbook will not be an acceptable excuse for late work. Students who add this course late should refer to the “Late Registration” section for further guidance.

Students enrolled in this course are required to purchase **Live Text** and must have access to a computer and internet. Students enrolled purchase Live Text the same as purchasing a text book. You need only purchase Live Text ONCE. Live Text will be good for all of the classes required for the CP degree. Live Text is good for 5 years and cannot be shared. If you have purchased Live Text in a previous term or semester you do not need to purchase it again. In the first week of the class, or prior to completing the first Live Text Assignment for this course, students must complete the Demographic Form PSY 6670 located in the Forms Section of Live Text.

CATALOG DESCRIPTION

A course designed to assist mental health professionals in the understanding and application of a multiaxial system (current edition of the *Diagnostic and Statistical Manual of Mental Disorders*). Also included is a comprehensive treatment planning strategy for development statements of behavioral symptoms, short-term objectives, long term goals and therapeutic interventions. Psychopharmacology treatment interventions are covered.

COURSE OBJECTIVES

1. Students will be able to demonstrate the use of the DSM (latest edition) in formulating a diagnosis of mental and emotional disorders including the use of the multiaxial system. They will be able to discuss differential diagnoses with a multidisciplinary team of collaborating professionals. CMHC(6) L.1, L.2
2. Students will gain further understanding of intake interview procedures, assessment techniques and record keeping for various diagnoses. CMHC(6) C.1, C.2
3. Students will be able to conceptualize an accurate multi-axial diagnosis of disorders and illustrate treatment plan designs for various conditions and work with various populations in varied agencies. CMHC(6) C.1, C.2. D. 1, D.2, D.5, E.1, E.2, K.1, K.2, L.1, L.2

4. Students will understand and learn to apply appropriate diagnostic and treatment procedures for different client populations, such as individuals, married couples and families. CMHC(6) K.1, K.2, L.1, L.2
5. Students know and understand the principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools such as the current edition of the DSM. CMHC(6) K.1
6. Students understand the established diagnostic criteria for mental and emotional disorders, and can describe treatment modalities and placement criteria within the continuum of care. CMHC(6) C.8, K.2
7. Students understand the effect substance use disorders co-occurring with medical and psychological disorders. CMHC(6) K.3
8. Students know and understand potential biases and relevance of commonly used diagnostic instruments and tools with the multicultural populations. CMHC(6) K.4
9. Students know and understand the appropriate use of diagnoses during crises, disasters and trauma causing events and are able to differentiate between developmentally appropriate reactions and clinical diagnoses during these times. CMHC(6) K.5, L.3.

Legend: CACREP Clinical Mental Health Standards (CMHC)

LATE REGISTRATION

Students who register during the first week of the term, during late registration, will already be one week behind. Students who fall into this category are expected to catch up with all of Week #1 and Week #2's work by the end of Week #2. No exceptions, since two weeks constitutes a significant percentage of the term's lessons. Students who do not feel they can meet this deadline should not enroll in the class. If they have registered, they should see their registrar, academic adviser, GoArmyEd/eArmyU representative, or Military Education officer to discuss their options. Also note that late registration may mean you do not receive your book in time to make up the work you missed in Week #1. Not having your book on the first day of class is not an excuse for late work after the deadlines in the Schedule.

ELECTRONIC AND IN PERSON OFFICE HOURS

In Person Hours: Tuesdays and Thursdays 9:00 am - 5:00 pm

On Line: Post Questions anytime on HELPLINE on the Blackboard Discussion Forum. I check that forum daily during the weekdays, but for more immediate and personal assistance, you should contact me via phone or e-mail. Troy instructors are required to respond to student messages within 24 to 48 hours.

ENTRANCE COMPETENCIES

A student must be able to write at the level of an entering Graduate School student, with good grammar and spelling and knowledge of the APA style for publication of papers, citations and references.

STUDENT EXPECTATION STATEMENT

I expect students to do all weekly assignments in a timely fashion by posting them on the Blackboard Discussion Forum section for each week of the course. Students are expected to

respond to at least one post by a fellow student for each assignment posted on the weekly discussion forum.

THREE USEFUL WEB SITES FOR THIS COURSE

1. The Troy online Library: <http://uclibrary.troy.edu/index.html>
2. Troy Web Express: <https://trojanweb.troy.edu/WebAdvisor/WebAdvisor>
3. Troy Graduate School Catalogue: <http://www.troy.edu/catalogs/0910grad/>

eCAMPUS COURSES AT TROY UNIVERSITY

All eCampus courses at Troy University utilize Blackboard Learning System. In every eCampus course, students should read all information presented in the Blackboard course site and should periodically check for updates—at least every 48 hours.

SITE MAP FOR YOUR BLACKBOARD COURSE SITE

To obtain a site map to enable the student to navigate through the Blackboard course site, please go to the Blackboard course site and click on the “Start Here” button found on the left side of the computer screen.

TROY E-MAIL

Effective July 1, 2005, all students were required to obtain and use the TROY e-mail address that is automatically assigned to them as TROY students. All official correspondence (including bills, statements, e-mails from instructors and grades, etc.) will be sent ONLY to the troy.edu (@troy.edu) address. **All students are responsible for ensuring that the correct e-mail address is listed in Blackboard by the beginning of Week #1.** E-mail is the only way the instructor can, at least initially, communicate with you. It is your responsibility to make sure a valid e-mail address is provided. Failure on your part to do so can result in your missing important information that could affect your grade. Your troy.edu e-mail address is the same as your Web Express user ID following by @troy.edu. Students are responsible for the information that is sent to their TROY e-mail account. You can get to your e-mail account by logging onto the course and clicking “E-mail Login”. You will be able to forward your TROY e-mail to your eArmy e-mail account. You must first access your TROY e-mail account through the TROY e-mail link found on the Web site. After you log in to your TROY e-mail account, click on “options” on the left hand side of the page. Then click on “forwarding.” This will enable you to set up the e-mail address to which you will forward your e-mail.

STUDENT/FACULTY INTERACTION

Interaction will take place via e-mail, telephone, discussion board forums, comments on written assignments and office visits (if needed and possible). The student will participate in this course by following the guidelines of this syllabus and any additional information provided by the instructor, the eCampus center at Troy University, or Troy University itself. The student is expected to remain in regular contact with the instructor and class via e-mail or other communications means, by participating in the discussion forums, submitting assignments all in a timely fashion. TROY requires instructors to respond to students’ e-mail within 24 hours Mon-Thur, and 48 hours Fri-Sun. As instructor, I will communicate on the Blackboard.com

Announcement page and/ or via e-mail. PLEASE CHECK YOUR E-MAIL AND THE ANNOUNCEMENTS SECTION OF BLACKBOARD DAILY!

ATTENDANCE POLICY

In addition to interaction via Blackboard and e-mail contact, students are required to contact the instructor via e-mail or telephone by the first day of the term for an initial briefing. Although physical class meetings are not part of this course, participation in all interactive, learning activities is required. Attendance is expected; as such *no points are awarded for attendance*. Each unexcused absence will, however, result in a 10 point reduction of the student's final grade. To avoid an unexcused absence, if you are unable to attend class, you should notify the instructor prior to the class. Sometimes such a notification is not possible. In these cases you should notify the instructor of the reason for your absence within 24 hours of the absence, otherwise the absence will be considered unexcused. In accordance with university guidelines, excessive absence is reported. Three (3) unexcused absences will result in the instructor initiating the student's administrative withdrawal from the course. Arrangements for excused absences must be made prior to the absence.

CLASS PARTICIPATION

Students are expected not only to fully participate online and get their assignments in on time but also to fully participate in discussions which are conducted in class. Students will be graded on in person class participation at the end of the term. Students who fully participate in class will get full credit and those who sit back, do not participate or show no interest in the work of the class will get not credit for class participation. Class participation is worth 20 points towards the final grade.

CLASS CANCELLATION

In severe cases of inclement weather or other emergency conditions, the Office of Executive Vice Chancellor and Provost will announce cancellation of classes through the local and regional media as well as through the University's web site. The Tampa Bay Site will post a notice on the Tampabay.troy.edu website on the front page under "News & Events."

LATE ASSIGNMENTS

Assignments are late if not submitted by the time designated on the due date. No credit will be given for late work. If you are late with an assignment, the assignment will be graded "0".

MAKE-UP WORK POLICY

Missing any part of this schedule may prevent completion of the course. If you foresee difficulty of any type (i.e., an illness, employment change, etc.) which may prevent completion of this course, notify the instructor as soon as possible. Failure to do so will result in failure for an assignment and/or failure of the course. See "Attendance," above. If I have not heard from you **by the deadline dates for assignments, exams, or forums**, no make-up work will be allowed (unless extraordinary circumstances existed, such as hospitalization). Requests for extensions must be made in advance and accompanied by appropriate written documentation if the excuse is acceptable to the instructor. "Computer problems" are not an acceptable excuse.

INCOMPLETE GRADE POLICY

Missing any part of the Course Schedule may prevent completion of the course. If circumstances will prevent the student from completing the course by the end of the term, the student should complete a request for an incomplete grade. Note: A grade of incomplete or “INC” is not automatically assigned to students, but rather must be requested by the student by submitting a *Petition for and Work to Remove an Incomplete Grade* Form. Requests for an incomplete grade must be made on or before the date of the final assignment or test of the term. The form will not be available after the last day of the term. A grade of “INC” does not replace an “F” and will not be awarded for excessive absences. An “INC” will only be awarded to student presenting a valid case for the inability to complete coursework by the conclusion of the term. ***It is ultimately the instructor’s decision to grant or deny a request for an incomplete grade, subject to the policy rules below.***

Policy/Rules for granting an Incomplete (INC)

An incomplete cannot be issued without a request from the student. To qualify for an incomplete, the student **must**:

- a. Have completed over 50% of the course material and have a documented reason for requesting the incomplete. (50% means all assignments/exams up to and including the mid-term point, test, and/or assignments.)
- b. Be passing the course at the time of their request.

If both of the above criteria are not met an incomplete cannot be granted.

An INC is not a substitute for an F. If a student has earned an “F” by not submitting all the work or by receiving an overall F average, then the F stands.

METHOD OF INSTRUCTION

This is an in person class supplemented with eCampus classroom supports. It is *not* a “correspondence course” in which a student may work at his/her own pace. Each week there will be assignments, on-line discussions with due dates. Refer to the schedule at the end of this syllabus for more information.

ACADEMIC MISCONDUCT

Students should refer to the Standards of Conduct section of the Oracle, the student handbook, for policies regarding misconduct. Grades will be assigned according to Troy University standard grade system. When students demonstrate personal limitations that might impede future performance, or consciously violate ethical standards and/or are ineffective and/or harmful to clients, they will not receive instructor endorsement to continue in clinical courses. In any such occurrence, the instructor will recommend dismissal from the program.

AMERICANS WITH DISABILITIES ACT

Troy University supports Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, which insure that postsecondary students with disabilities have equal access to all academic programs, physical access to all buildings, facilities and events, and are not discriminated against on the basis of disability. Eligible students, with appropriate documentation, will be provided equal opportunity to demonstrate their academic skills and potential through the provision of academic adaptations and reasonable accommodations. Further information, including appropriate contact information, can be found at the link for Troy

University's Office of Human Resources at
<http://www.troy.edu/humanresources/ADAPolicy2003.htm>

STANDARDS OF CONDUCT

The commission of or the attempt to commit any cheating and/or plagiarism are in violation of the Standard of Conduct stated in the Troy University – Florida Student Handbook, and may be disciplined up to and including suspension and expulsion.

POLICY ON PLAGIARISM

Plagiarism is the passing off of the thoughts or works of another as one's own. Plagiarism involves giving the impression that a person has thought, written, or produced something that has, in fact, been borrowed from another. Plagiarism may result from poor technique of citation or more serious cases as: copying the work of another person; submitting the work of another person; or closely paraphrasing a piece of work without due acknowledgement. If you have further questions about plagiarism go to <http://uclibrary.troy.edu/help/helpsplagiarism.htm>

The College of Educations defines plagiarism as:

1. Three consecutive words that are not common professional language used from another source without quotation
2. Rephrasing another author's words without appropriate citation
3. Using another author's ideas or data without appropriate citation
4. Submitting another author's or student's writing as one's own
5. Directly quoting a source without using appropriate APA or MLA style (whichever is required by the instructor) citation to show that it is a direct quote.
6. Intentionally taking information from a source and not giving appropriate credit

Students who commit plagiarism will be subject to disciplinary actions as outlined in The Oracle for Academic Misconduct and violation of the Honor Code. The Standards of Conduct and Disciplinary Procedures define university procedures in these matters. Students have the right to request consideration by the Student Services Conduct Board.

Consequences for plagiarism in this course for any assignment or paper are the student will get no credits for the plagiarized assignment or paper. This penalty will only be applied to the plagiarized assignment. Only in situations where the assignment is critical to successful completion of this course can such plagiarism lead to the student's failing of this course.

ALLEGATIONS OF PLAGIARISM

Depending on the circumstances, the penalty imposed for plagiarism may include warning, resubmission, loss of marks, failure on a particular assignment or course, or a charge of misconduct to be dealt with by Troy University.

COMPUTER RESOURCES USAGE POLICY

The Tampa site of Troy University has computers available in the computer laboratory/lounge for student use during the day and evening hours when classes are in session or when office personnel are present (during the day). Students will be required to relinquish the use of a school

computer after a reasonable time period of continuous use if other students present have the need to use a computer to fulfill course requirements.

SUPPORT MATERIALS

On site computers for word processing/printing, internet related activities, access to professional online journals, SPSS for data analysis and some print format psychology/ counseling journals are available. See staff or faculty for further developments and information.

LIBRARY SUPPORT

In addition to the use of Troy's various library sites and interlibrary loan program, the considerable resources of the UCF library are available. As our resources are continually expanding, see staff or faculty for further developments and information.

Troy University Southeast Region offers library services through a virtual library. Two professional librarians are located in Suite 14 of the Florida Office, where they offer the following services to students via telephone, email, and in person: reference assistance, technical assistance with using the online resources, and any other help that students might need. During the hours that the Librarians are there, students in the local area may also come for hands-on assistance in using the computers to access information. The hours (Central Time) for services are Monday through Friday, 8 a.m. to 5 p.m. Although the office is closed on Saturday, Sunday, and holidays, during these times, students may access Live Chat, an instant messaging service, for online assistance from the Troy libraries. There is a link to that service on the University College Library Services Web page, <http://uclibrary.troy.edu>.

Contact information: Phone numbers: 800-638-7237; 850-301-2154; 850- 301-2129.

E-mail: library1@troy.edu.

CELL PHONES & OTHER ELECTRONIC DEVICES USED IN THE INSTRUCTIONAL ENVIRONMENT

Use of any electronic device by students in the instructional environment is prohibited unless explicitly approved on a case-by-case basis by the instructor of record or by the Office of Disability Services in collaboration with the instructor. Cellular phones, pagers, and other communication devices may be used for emergencies, however, but sending or receiving nonemergency messages is forbidden by the University. Particularly, use of a communication device to violate the Troy University "Standards of Conduct" will result in appropriate disciplinary action (See pp. 42-52 of the *Oracle*).

In order to receive emergency messages from the University or family members, the call receipt indicator of devices must be in the vibration mode or other unobtrusive mode of indication. Students receiving calls that they believe to be emergency calls must answer quietly without disturbing the teaching environment. If the call is an emergency, they must move unobtrusively and quietly from the instructional area and notify the instructor as soon as reasonably possible. Students who are expecting an emergency call should inform the instructor before the start of the instructional period.

COMMENTS & QUESTIONS

At Troy University, students are our most valuable commodity. If you have any comments or questions about this course, please do not hesitate to contact me.

ASSIGNMENT OF GRADES

All grades will be posted in the student grade book in Blackboard and will be assigned according to the following or similar scale:

A 90 – 100%

B 80 – 89%

C 70 – 79%

D 60 – 69%

F 59% and below

Postings: I post grades in Blackboard, in the Grade book.

FA: “FA” indicates the student failed due to attendance. This grade will be given to any student who disappears from the course for three or more weeks. See the **Attendance** section of this syllabus for additional information.

SUBMITTING ASSIGNMENTS

All assignments are to be submitted on their appropriate threads each week on the Blackboard Discussion forum by the date and time each week they are due.

Assignments are late if not submitted by the time designated on the due date. No credit will be given for late work. If you are late with an assignment, the assignment will be graded “0”.

When posting assignments be sure your full name is put on the top of the assignment before posting it

Always prepare your assignment responses on a word document to insure your grammar and spelling are correct prior to posting on the appropriate Blackboard Discussion Forum thread.

TECHNOLOGY REQUIREMENTS

Students must have:

- A reliable working computer that runs Windows XP or Windows Vista.
- A TROY e-mail account that you can access on a regular basis (see "TROY e-mail" above)
- E-mail software capable of sending and receiving attached files.
- Access to the Internet with a 56.9 kb modem or better. (High speed connection such as cable or DSL preferred)
- A personal computer capable of running Netscape Navigator 7.0 or above, Internet Explorer 6.0 or above or current versions of Firefox or Mozilla. Students who use older browser versions will have compatibility problems with Blackboard.
- Microsoft WORD software. (I cannot grade anything I cannot open! This means NO MS-Works, NO WordPad, NO WordPerfect)
- Virus protection software, installed and active, to prevent the spread of viruses via the Internet and e-mail. It should be continually updated! Virus protection is provided to all Troy students free

COURSE REQUIREMENTS

ASSIGNMENTS

1. Reading Reactions with Seven Weeks of Online Contact: (7 points) at 1 points a week for seven weeks

This is a 100 word reaction to the chapters from the **DSM IV TR** for the week assigned. The Reading Reaction is due by noon on Wednesday of the weeks assigned. Once you post a reading reaction then you are expected to respond to one of your classmate's reading reaction to get full credit for this assignment. The weekly reading reaction posts on the Discussion Platform must be a minimum of 100 words and each reaction must include the following three points:

1. Brief overview of chapters read
2. Information which was new for me or surprised me
3. Information which I must retain as a Professional Counselor to assist me in my diagnosis and treatment of individuals with psychopathology

Readings of Diagnostic Categories in DSM IV TR	Reading Reaction Due Thursday Noon:
Readings 1 Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence and read: pp. xxxi-xxxvii; read pp. 1-37; review pp. 745-757; review pp. 817-818; read pp. 897-903	Oct 18
Readings 2 Schizophrenia and Other Psychotic Disorders and Substance-Related Disorders	Oct 25
Readings 3 Mood Disorders and Anxiety Disorders	Nov 1
Readings 4 Somatoform Disorders; Factitious Disorders; Dissociative Disorders; Sexual and Gender Identity Disorders	Nov 8
Readings 5 Eating Disorders; Sleep Disorders; Impulse-Control Disorders Not Elsewhere Classified.	Nov 15
Readings 6 Personality Disorders	Nov 21 (Wednesday)
Readings 7 Adjustment Disorders and V Codes-Other Conditions That May Be a Focus of Clinical Attention. Delirium, Dementia, and Amnesic and Other Cognitive Disorders; Mental Disorders Due to a General Medical Condition Not Elsewhere Classified.	Nov 29

2. Diagnosis of Cases Online Postings (30 points) – 6 sets of cases worth 5 points per set for a total of 30 points. Due: by noon Fridays

You are to post on the Discussion Board response for each of the 5 cases presented each week an Axis 1 initial tentative diagnosis (with the page # of DSM-IV-TR where it is located) for each of the five case studies provided you for that specific week. You must first identify relevant symptoms, which lead you to your initial tentative diagnosis. You must also list what diagnoses you will need to rule out as you continue to work with this client. You must also provide a tentative treatment plan utilizing empirically based treatments, which would include if referring to a psychiatrist for medication. I will post an idealized response Template a few hours after all students have met the deadline for posting their responses. You then are to post a reaction for each of the five cases on separate reaction threads. Once you post a reaction thread then you are expected to respond to one of your classmate's reaction for all five client reactions to get full credit for this assignment. Then it is my hope we will stimulate discussion about these five cases

amongst the class to help clarify the diagnostic thinking and process involved in such cases. The Outline you will follow in your posting online in your Discussion Board Posting is below:

Case # – Name of Case:

Relevant Symptoms:

DSM-IV-TR Axis I Diagnosis with Page #:

Diagnostic Rule Outs:

Tentative Treatment Plan:

Set 1 Oct 19	Set 2 Oct 26	Set 3 Nov 2	Set 4 Nov 9	Set 5 Nov 16	Set 6 Nov 23
1. Tommy	6. Suzette	11. Arthur	16. Luis	21. Connie	26. Josh
2. George	7. Richele	12. Joel	17. David	22. Mrs. Brown	27. Ronald
3. Antonio	8. Rosie	13. Fantasia	18. Jaime	23. Gladys	28. Samantha
4. Angelica	9. Gloria	14. Harriet	19. Arnold	24. Kristina	29. Robert
5. Robin	10. Juan	15. Joseph	20. Emanuel	25. Gerald	30. Mary Beth

3. Psychopharmacology Awareness Personal Manual (20 points)

You are to create Your Personal Manual on Psychopharmacological Agents currently being utilized to treat the variety of psychopathological conditions contained in the DSM-IV-TR. The Manual Outline for this project is located online at: <http://coping.us/psychopharmacology.html>
On this chart you will cover the following information for each medication listed:

1. Commercial and Generic name of each medication which is utilized for each of the specific diagnostic conditions which are amenable to Psychopharmacological support within each of the specified DSM-IV-TR categories
2. Typical prescription dosage for each drug identified
3. Time it takes for dosage to reach clinical level when one can expect to see impact of the medication on the client
4. Potential benefits of the medication to the client
5. Potential side effects of the medication for the client

By accomplishing this project you will have created a living document, which you can periodically update as you pursue your professional counseling career. You are to not only utilize the text: Preston., J.D., O’Neal, J.H., and Talaga, M.C. (2010) *Handbook of clinical psychopharmacology for therapists*. Oakland, CA: New Harbinger Publications, Inc. but also the online resources provided you on <http://coping.us/psychopharmacology/onlineresources.html>

My Psychopharmacology Manual ADHD

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Methylphenitdate	Ritalin Ritalin SR Ritalin LA Metadate Concerta			
Dextroamphetamine	Dexedrine			

Dextroamphetamine /amphetamine	Adderall Adderall XR			
Dexmethylphenidate	Focalin Focalin XR			
Bupropion	Wellbutrin Wellbutrin SR			
Atomoxetine NRI	Strattera (non stimulant)			
Guanfacine	Intuniv			

Alcohol Disorders

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Disulfiram	Antabuse			
Acamprosate	Campral			
Naltrexone	ReVia Vivitrol			
Benzodiazepines	See under anxiety			

Schizophrenia & Other Psychotic Disorders

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Typical Antipsychotic	Haldol Prolixin Navane Stelazine Mellaril Thorazine			
Atypical Antipsychotic	Risperdal Zyprexa Seroquel Geodon Abilify Invega Clozaril			

Depressive Disorders

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Tricyclic Antidepressants	Elavil Sinequan Anafranil Pamelor Imipramine			
Monoamine Oxidase Inhibitors: MAOI's	Nardil Parnate Marplan			
Selective Serotonin Reuptake Inhibitors: SSRI's	Prozac Zoloft Paxil			

	Celexa Lexapro			
Serotonin & Norepinephrine Reuptake Inhibitors: SNRI's	Effexor Cybalta			
Serotonin Antagonist Reuptake Inhibitor: SARI's	Serzone			
Dopamine Reuptake Inhibitor	Wellbutrin			
Atypical	Remeron Desyrel- Transadone			

Bipolar Disorder

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Lithium	Lithium			
Anticonvulsants	Tegretol Depakote Neurontin Lamictal Trileptal Gabitril Topamax Lyrica			
Atypical Antipsychotics * see under schizophrenia	Seroquel Abilify Zyprexa			

Anxiety Disorders

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
New Benzodiazepines	Ativan Xanax			
Old Benzodiazepines	Valium Librium Klonopine Restoril Halcion			
Buspirone	Buspar			
Non-Benzodiazepines	Ambien Sonata Lunesta			
SNRI *see under depression	Effexor XR (Venlafaxine)			
SSRI's * see under depression	Lexapro Paxil			

Eating Disorder if different from Anxiety and/or Depressive Disorders

Classification	Drug name (Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Antiemetics	Zofran (Ondansetron)			
Potassium chloride	Potassium chloride			
Calcium gluconate	Calcium gluconate			

Dementia and Other Cognitive Disorders

Classification	Drug name(Generic Name) & dosage	Time to reach clinical level	Benefit of drug	Side effect of drug
Cholinesterase inhibitors	Aricept Razadyne Exelon			
Memantine	Namenda			
Ticlopidine	Ticlid			
Propranolol	Betachron E-R Inderal InnoPran XL			
Clopidogrel bisulfate	Plavix			

Grading Grid for Psychopharmacology Project

Task	Due Noon:	Points
Initial Draft Psychopharmacology Manual	Sunday Nov 4	10
Final Draft Psychopharmacology Manual	Sunday Nov 11	10

4. Movie Based Case Study Paper and Presentation (23 points)

You are to post on the Discussion Board three of the following movies listed below or other movies which have a specific character who has a definable and diagnosable mental illness by noon Sunday Oct 28. We will assign your movie based on your choice in class that Tuesday. We will let you borrow the DVD if you select one of the movies we already have on board. You are to watch the movie in total and then you are to complete out the following Movie Based Case Paper, which is a case study on one of the major characters in the movie. You are to do the following:

LIVETEXT #1: DIAGNOSIS AND TREATMENT PLAN and LIVETEXT #2: CLIENT MAP and LIVETEXT #3: CRISIS INTERVENTION PLAN

1. Give a short synopsis of the movie
2. Give a Five Axis initial diagnosis for this character in the movie
3. Then you must list what diagnoses one would need to rule out as one continues to work with this character as a client.
4. Recommend appropriate social, community, familial and interagency support networks
5. Explain what multicultural issues (including racism, discrimination, sexism, power, privilege, etc.) might be of concern.

6. Then you must provide a tentative treatment plan utilizing Evidence Based Practices (EBP) if possible. You must be very precise and detailed in what the treatment would entail. You must talk about:
 - a. Type of treatment
 - b. Length of treatment
 - c. Specific methodology and interventions used in the treatment
 - d. Goals and Objectives of the treatment planned
 - e. Nature of treatment (individual, couple, family, group)
 - f. Timing (frequency, pacing, duration)
 - g. Assessments needed (e.g. neurological, personality)
 - h. What clinician characteristics would be viewed as therapeutic for this client
 - i. Location of treatment (e.g. hospital, outpatient)
 - j. Emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)
 - k. Expected benefits of the EBP for the client
 - l. Provide a minimum of three APA reference for articles or books which provide research and information on the EBP you chose to use with this specific movie character. You are to utilize the resources on EPB's provided you at: <http://coping.us/evidencedbasedpractices.html>
7. You are to then utilize the book: Jongsma, Jr., A.E. and Peterson, L.M. (2009) *The complete adult psychotherapy treatment planner*. New York, NY: John Wiley & Sons, Inc. in designing the Long Term and Short Term Objectives for treating your identified client from the movie
8. You then must talk about if one would refer this client to a psychiatrist for psychopharmacological treatment. If referring to a psychiatrist for possible medication you would have to detail out what possible type of medication the psychiatrist might choose, the rationale for its utilization, possible dosage of the medication to be used, and what would be the benefits and possible negative side effects of it for the client.
9. What is your prognosis for this client
10. Lastly, if the movie character had been successful in getting the treatment outlined by you, how would the change in this character have affected the outcome of the story line in this movie?

Crisis Intervention Plan

Once you have completed your treatment Plan you then are to provide a crisis intervention plan for the assigned character in your movie as if the client had come in for immediate intervention for the crisis or trauma which the client has experienced in the movie and this plan is separate from the above treatment plan, and is more theoretical and fantasy. So tell us what you would do to intervene in the crisis which this character has experienced in the context of the movie presented.

OUTLINE FOR LIVETEXT #1, #2 & #3: MOVIE PROJECT PAPER

Name of Movie
Character in the Movie being Diagnosed
Synopsis of Movie
Multiaxial initial diagnosis of Character

Diagnoses to be ruled out:

1. Type of treatment
2. Length of treatment
3. Specific methodology and interventions used in the treatment
4. Goals and Objectives of the treatment planned
5. Nature of treatment (individual, couple, family, group)
6. Timing (frequency, pacing, duration)
7. Assessments needed (e.g. neurological, personality)
8. What clinician characteristics would be viewed as therapeutic for this client
9. Location of treatment (e.g. hospital, outpatient)
10. Emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)
11. Expected benefits of the EBP for the client
12. Provide a minimum of three APA reference for articles or books which provide research and information on the EBP you chose to use with this specific movie character

Long Term Treatment Goals and Short Term Treatment Objectives

If a Psychiatric Psychopharmacological Referral is made

1. Reasons why refer for possible medication
2. Type of medication which psychiatrist could chose
3. Rationale for use of specific medication identified
4. Typical dosage of medication to be used
5. Possible negative side effects of the medication
6. Possible benefits of the medication

After Treatment: Change in this character and story line of the movie Crisis Intervention Plan

Movie Project In Class Case Presentation:

Once your Movie Project Paper has been completed, you will present your case in class like it is part of a Case management conference on Weekend Classes May 11, 12 &13, 2012.

Some Suggested Movies (* behind Title Means I have a copy of the DVD)

- *American Beauty**
- *Anger Management+*
- *Annie Hall*
- *As Good as It Gets**
- *The Aviator**
- *Awakenings*
- *A Beautiful Mind**
- *Benny & Joon*
- *Black Snake Moan**
- *Boys Don't Cry**
- *The Boys Next Door*
- *Carrie*
- *Conspiracy Theory*
- *Corrina, Corrina**
- *Courage Under Fire**
- *The Dream Team*
- *Fatal Attraction*
- *The Fight Club**
- *Forrest Gump**
- *Girl, Interrupted**
- *The Hours*
- *Lolita*
- *Lorenzo's Oil**
- *Marnie*

- *My Girl*
- *Misery*
- *Mask**
- *Nest*
- *Nothing in Common*
- *On Golden Pond**
- *One Flew Over the Cuckoo's**
- *Primal Fear*
- *Rain Man**
- *Rebel without a Cause*
- *She's So Lovely*
- *The Silence of the Lambs**
- *The Sixth Sense**
- *Splendor in the Grass*
- *Suddenly Last Summer*
- *The Three Faces of Eve**
- *28 Days**
- *Unstrung Heroes*
- *Vertigo**
- *What About Bob**
- *What's Eating Gilbert Grape**
- *When a Man Loves a Woman**
- *White Oleander **
- *Who's Afraid of Virginia Wolfe?*

Excellent Resource for Movies directly related to DSM diagnoses: [Filmography](http://faculty.dwc.edu/nicosia/moviesandmentalillnessfilmography.htm): Movies and Mental Illness-Psychology, Psychiatry and the Movies by: Susan Nicosia, Associate Professor Social Sciences and Humanities Division Daniel Webster College the link for this site is: <http://faculty.dwc.edu/nicosia/moviesandmentalillnessfilmography.htm>

Movie Project Tasks:

Task 1: Post list of your top three choices for a movie for this project due noon Sunday Aug 21

Task 2: Prepare the Movie Case Study Paper and hand in first draft and post it

Task 3: Based on editing comments from me, you are to prepare a final draft and post it

Task 4: Based on your Case Study Paper you are to present the case in class.

Movie Case Study Grading Grid

Task	Due Noon	Points
Selection of 3 movies	Sunday Oct 28	-
Initial Draft of Case Study Paper	Sunday Nov 25	10
Final Draft Case Study Paper	Sunday Dec 2	10
Presentation of Case Study in Class	Tuesdays Dec 4 & 11	3

Grading Rubric for LiveText #I

Topic Standard Assignment/ Assessment	1 0—59% No Understand	2 60—69% Below Avg. Under.	3 70—79% Average Under.	4 80—80% Mastery	5 90—100% Exceptional Under.
Activity I-A: Symptoms CMHC(6) C.2, C.8, D.1, D.5, H.1, K.1, K.2, K.4, L.1, L.2	Demonstrates no understanding of identifying symptoms, etc.	Demonstrates below average understanding of identifying symptoms, etc.	Demonstrates average understanding of identifying symptoms, etc.	Demonstrates mastery of ability to identify symptoms, etc.	Demonstrates exceptional ability to identify symptoms, etc.
Activity I-B: Multi-Axial Diagnosis	Demonstrates no understanding of a Multi-Axial	Demonstrates below average understanding of a	Demonstrates average understanding of	Demonstrates mastery understanding of	Demonstrates exceptional understanding of

CMHC(6) D. 1, D.2, K.1, K.2, K.3, K.4, L.1, L.2	diagnosis	Multi-Axial diagnosis (Axis I and II correctly utilized)	Multi-Axial diagnosis (correctly utilizes Axis I, II, IV)	Multi-Axial diagnosis (correctly utilizes Axis I, II, III, IV)	Multi-Axial diagnosis (correctly utilizes Axis I, II, III, IV, and V)
Activity I-C: Referral/ Consultation CMHC(6) C.1, C.2, C.8, D.5,	Demonstrates no understanding of referral/ consultation with appropriate social, community, famial and interagency support networks	Demonstrates below average understanding of referral/ consultation with appropriate social, community, famial and interagency support networks	Demonstrates average understanding of referral/ consultation with appropriate social, community, famial and interagency support networks	Demonstrates mastery understanding of referral/ consultation with appropriate social, community, famial and interagency support networks	Demonstrates exceptional understanding of referral/ consultation with appropriate social, community, famial and interagency support networks
Activity I-D: Multicultural Understanding CMHC(6) E.1, E.2, E.3	Demonstrates no understanding of what multicultural issues (including racism, discrimination, sexism, power, privilege, etc.) might be of concern	Demonstrates below average understanding of what multicultural issues (including racism, discrimination, sexism, power, privilege, etc.) might be of concern	Demonstrates average understanding of what multicultural issues (including racism, discrimination, sexism, power, privilege, etc.) might be of concern	Demonstrates mastery understanding of what multicultural issues (including racism, discrimination, sexism, power, privilege, etc.) might be of concern	Demonstrates exceptional understanding of what multicultural issues (including racism, discrimination, sexism, power, privilege, etc.) might be of concern
Activity I: Diagnosis and Treatment Plan	No understanding of diagnosis, treatment planning, referral, consultation, and multicultural issues pertaining to diagnosis and treatment.	Below average understanding of diagnosis, treatment planning, referral, consultation, and multicultural issues pertaining to diagnosis and treatment.	Average understanding of diagnosis, treatment planning, referral, consultation, and multicultural issues pertaining to diagnosis and treatment.	Mastery understanding of diagnosis, treatment planning, referral, consultation, and multicultural issues pertaining to diagnosis and treatment.	Exceptional understanding of diagnosis, treatment planning, referral, consultation, and multicultural issues pertaining to diagnosis and treatment.

Grading Rubric for LiveText #2

<u>Topic Standard Assignment/ Assessment</u>	1 0—59% No understanding	2 60—69% Below Average	3 70—79% Average	4 80—89% Mastery	5 90—100% Exceptional
<u>Activity I-A: Diagnosis</u> CMHC(6) C.2, C.4, D. 1, D.2, K.1, K.2, K.3, K.4	Demonstrates no understanding of the diagnostic process.	Demonstrates below average understanding of the diagnostic process.	Demonstrates an average understanding of the diagnostic process.	Demonstrates mastery of the diagnostic process.	Demonstrates exceptional understanding of the diagnostic process.
<u>Activity I-B: Objectives of</u>	Demonstrates no understanding of	Demonstrates below average	Demonstrates average	Demonstrates mastery of	Demonstrates exceptional

<u>Treatment</u> CMHC(6) C.2, D. 1, D.2, K.1, K.2, K.3, K.4	determining objectives of treatment	understanding of determining objectives of treatment.	understanding of determining objectives of treatment.	determining objectives of treatment.	understanding of determining objectives of treatment.
<u>Activity I-C: Assessments</u> CMHC(6) C. 1, C.2, D. 1, D.2, K.1, K.2, K.3, K.4	Demonstrates no understanding of assessments needed (e.g. neurological, personality)	Demonstrates below average understanding of assessments needed (e.g. neurological, personality)	Demonstrates average understanding of assessments needed (e.g. neurological, personality)	Demonstrates mastery of assessments needed (e.g. neurological, personality)	Demonstrates exceptional understanding of assessments needed (e.g. neurological, personality)
<u>Activity I-D: Clinician Characteristics</u> CMHC(6) E.1, E.2	Demonstrates no understanding of clinician characteristics viewed as therapeutic	Demonstrates below average understanding of clinician characteristics viewed as therapeutic	Demonstrates average understanding of clinician characteristics viewed as therapeutic	Demonstrates mastery of clinician characteristics viewed as therapeutic	Demonstrates exceptional clinician characteristics viewed as therapeutic
<u>Activity I-E: Location of Treatment</u> CMHC(6) C.2, C.5, K.2, L.1, L.2	Demonstrates no understanding of appropriate location of treatment (e.g. hospital, outpatient)	Demonstrates below average understanding of appropriate location of treatment (e.g. hospital, outpatient)	Demonstrates average understanding of appropriate location of treatment (e.g. hospital, outpatient)	Demonstrates mastery of understanding of appropriate location of treatment (e.g. hospital, outpatient)	Demonstrates exceptional understanding of appropriate location of treatment (e.g. hospital, outpatient)
<u>Activity I-F: Interventions</u> CMHC(6) C.2, C.8, D. 1, D.2, K.2, K.3	Demonstrates no understanding of interventions to be used	Demonstrates below average understanding of interventions to be used	Demonstrates average understanding of interventions to be used	Demonstrates mastery understanding of interventions to be used	Demonstrates exceptional understanding of interventions to be used
<u>Activity I-G: Emphasis of Treatment</u> CMHC(6) C.2, D. 1, D.2, K.2, K.3	Demonstrates no understanding of the emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)	Demonstrates below average understanding of the emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)	Demonstrates average understanding of the emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)	Demonstrates mastery understanding of the emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)	Demonstrates exceptional understanding of the Emphasis of treatment (level of directiveness; level of supportiveness; cognitive, behavioral, affective emphasis)
<u>Activity I-H: Treatment Modality</u> CMHC(6) C.2, C.8, D. 1, D.5, K.2	No understanding of treatment modalities (individual, couple, family, group)	Demonstrates below average understanding of treatment modalities (individual, couple, family,	Demonstrates average understanding of treatment modalities (individual, couple, family,	Demonstrates mastery understanding of treatment modalities (individual, couple, family,	Demonstrates exceptional understanding of treatment modalities (individual, couple, family,

		group)	group)	group)	group)
Activity I-I: Timing CMHC(6) D. 1, D.4, E.3	No understanding of therapeutic timing (frequency, pacing, duration)	Demonstrates below average understanding of therapeutic timing (frequency, pacing, duration)	Demonstrates average understanding of therapeutic timing (frequency, pacing, duration)	Demonstrates mastery understanding of therapeutic timing (frequency, pacing, duration)	Demonstrates exceptional understanding of therapeutic timing (frequency, pacing, duration)
Activity I-J: Medications CMHC(6) G.3, K.2	No understanding of medications needed	Demonstrates below average understanding of medications needed	Demonstrates average understanding of medications needed	Demonstrates mastery understanding of medications needed	Demonstrates exceptional understanding of medications needed
Activity I-K: Support CMHC(6) C. 1, C.2, D. 1, D.2, D.5	No understanding of adjunct services (e.g. support groups, legal advice, education)	Demonstrates below average understanding of adjunct services (e.g. support groups, legal advice, education)	Demonstrates average understanding of adjunct services (e.g. support groups, legal advice, education)	Demonstrates mastery understanding of adjunct services (e.g. support groups, legal advice, education)	Demonstrates exceptional understanding of adjunct services (e.g. support groups, legal advice, education)
Activity I-L: Prognosis CMHC(6) L.1, L.2, L.3	No understanding of the prognostic process	Demonstrates below average understanding of the prognostic process	Demonstrates average understanding of the prognostic process	Demonstrates mastery understanding of the prognostic process	Demonstrates exceptional understanding of the prognostic process
Activity II: DOACLIENTMAP CMHC(6) C.1, C.2, C.4, C.5, C.8, D.1, D.2, D.4, D.5, E.1, E.2, G.3, K.1, K.2, K.3, K.4, K.5, L.1, L.2, L.3	Demonstrates no understanding of treatment planning style/strategy	Demonstrates below average understanding of treatment planning style/strategy	Demonstrates average understanding of treatment planning style/strategy	Demonstrates mastery of ability to create treatment plan	Demonstrates exceptional ability to create treatment plan.

Grading Rubric for LiveText #3

Topic Standard Assignment/ Assessment	1 0—59% No Understand	2 60—69% Below Avg. Under.	3 70—79% Average Under.	4 80—80% Mastery	5 90—100% Exceptional Under.
Crisis Intervention Plan CMHC(6) K. 1,3,5, L.3	Demonstrates no understanding of crisis intervention planning	Demonstrates below average understanding of crisis intervention planning	Demonstrates average understanding of crisis intervention planning	Demonstrates mastery of ability for crisis intervention planning	Demonstrates exceptional ability for crisis intervention planning

METHOD OF EVALUATION

Grading Grid:

Activity	Points
7 weeks of Online Reaction to Readings with a minimum of 1 response to a Classmate's posting @ 1 points each week	7
30 Case Studies with a minimum of 1 response to a classmate's posting for each case @ 1 points per case	30
Psychopharmacology Manual Project	20
Movie Case Study Paper with Case Presentation	23
Class Participation	20
Total	100

Grading Criteria

90-100	A
80-89	B
70-79	C
60-69	D
Below 60	F

COURSE CALENDAR: PSY6670 Diagnosis and Treatment Planning in Counseling

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
	WK 1 Class begins Oct 15	WK 1 CLASS Oct 16	WK 1 Oct 17	WK 1 Reading Reaction#1 Oct 18	WK 1 Set 1: Case Studies Oct 19	WK 1 Oct 20
WK 1 Oct 21	WK 2 Oct 22	WK 2 CLASS Oct 23	WK 2 Oct 24	WK 2 Reading Reaction#2 Oct 25	WK 2 Set 2: Case Studies Oct 26	WK 2 Oct 27
WK 2 Select 3 movies Oct 28	WK 3 Oct 29	WK 3 CLASS Oct 30	WK 3 Oct 31	WK 3 Reading Reaction#3 Nov 1	WK 3 Set 3: Case Studies Nov 2	WK 3 Nov 3
WK 3 1 st Draft Psychopharm Nov 4	WK 4 Nov 5	WK 4 CLASS Nov 6	WK 4 Nov 7	WK 4 Reading Reaction#4 Nov 8	WK 4 Set 4 Case Studies Nov 9	WK 4 Nov 10
WK 4 Final Psychopharm Nov 11	WK 5 Nov 12	WK 5 CLASS Nov 13	WK 5 Nov 14	WK 5 Reading Reaction#5 Nov 15	WK 5 Set 5: Case Studies Nov 16	WK 5: Nov 17
WK 5 Nov 18	WK 6 Nov 19	WK 6 HOLIDAY Nov 20	WK 6 Reading Reaction#6 Nov 21	WK 6 Thanksgiving Nov 22	WK 6 Set 6: Case Studies Nov 23	WK 6 Nov 24
WK 6 1 st Draft Movie Case Nov 25	WK 7 Nov 26	WK 7 CLASS Nov 27	WK 7 Nov 28	WK 7 Reading Reaction#7 Nov 29	WK 7 Nov 30	WK 7 Dec 1
WK 7 Final Draft Movie Case Dec 2	WK 8 Dec 3	WK 8 CLASS Dec 4	WK 8 Dec 5	WK 8 Dec 6	WK 8 Dec 7	WK 8 Dec 8
WK 8 Dec 9	WK 9 Dec 10	WK 9 CLASS Dec 11	WK 9 Dec 12	WK 9 Dec 13	WK 9 Dec 14	Week 9 Dec 15
WK 9 Last day of class Dec 16						