

**RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY
SCHOOL OF SOCIAL WORK
COURSE OUTLINE**

Clinical Assessment and Diagnosis

Course: 19:910:507

Time:

Location:

Instructor:

Email:

Office:

Office Hours:

I. Catalog Course Description

This course explores major forms of emotional distress in adults, children, and youth, including classification trends, issues, and models. The course provides an introduction to clinical syndromes in terms of diagnostic methodology, research and social concerns and their implications for at risk groups.

II. Course Overview

This is an introductory course will familiarize social work students with the major mental disorders. Since mental health issues are ubiquitous in social work settings and practice, it is appropriate that social workers, regardless of specialization, be acquainted with the language, taxonomy, conceptualizations, and developments in the study of psychopathology. For those desiring to expand knowledge in this area, the advanced curriculum offers this opportunity. This course serves as the prerequisite for further study of psychopathology.

The Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5) is used as the organizing framework for this course. Though controversial, the DSM-5 has become the standard diagnostic tool used by local, state and federal governments, major health insurance carriers and by several of the academic disciplines. In this course, however, we will critically examine the DSM and its relevance for social work practice.

DSM-5 conceptualizes a mental disorder as a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual and that is associated with present distress (e.g., a painful symptom) or disability (i.e., impairment in one or more important areas of functioning), or with a significantly increased risk of suffering death, pain, disability, or an important loss of freedom. The adequacy and appropriateness of this conceptual framework to illuminate and enhance understanding of the human phenomena seen in social work practice is addressed throughout the course. Factors such as cultural differences, race and ethnicity, social class, gender and age are discussed in terms of their possible influence on clinical judgment and the

diagnostic process. Thus, the selection of content areas has been based on several considerations:

1. Clinical syndromes social workers are most apt to encounter, either directly in micro practice, or indirectly in macro practice.
2. Clinical phenomena that are extensively dealt with in other curriculum offerings receive less focus, e.g., developmental disabilities, alcohol and other drugs, and mental disorders associated with the aging process.
3. Those conditions requiring medical sophistication for evaluation and treatment will also receive less attention e.g. mental disorders due to a general medical condition, organic brain disorders.

III. Place of Course in Program

This is a required course for all students in the Generalist year.

IV. Program Level Learning Goals and the Council of Social Work Education's Social Work Competencies

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). Students are welcome to review CSWE's accreditation standards at www.cswe.org

This course will assist students in developing the following competency:

Competency 1: Demonstrate Ethical and Professional Behavior: Social workers understand the value base of the profession and its ethical standards, as well as relevant laws and regulations that may impact practice at the micro, mezzo, and macro levels. Social workers understand frameworks of ethical decision-making and how to apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Social workers recognize personal values and the distinction between personal and professional values. They also understand how their personal experiences and affective reactions influence their professional judgment and behavior. Social workers understand the profession's history, its mission, and the roles and responsibilities of the profession. Social Workers also understand the role of other professions when engaged in inter-professional teams. Social workers recognize the importance of life-long learning and are committed to continually updating their skills to ensure they are relevant and effective. Social workers also understand emerging forms of technology and the ethical use of technology in social work practice. (Taken from the following site: www.cswe.org)

Assessment of Competencies/Program Level Learning Goals: Because this course focuses on providing you with the knowledge, skills, and values for you to advance human rights and social, economic, and environmental Justice and engage in policy practice, it has been selected be to part of the School of Social Work overall assessment program of the social work competencies/program level learning goals. This means that one of the course assignments, the final paper, has been designed to assess your attainment of these competencies.

V. Course Level Learning Goals

Upon completion of this course, students will be able to:

1. Describe the DSM-5 as the current representations of a changing classification model and its application for the diagnosis of children, youth, and adults.
2. Analyze the potential abuse of diagnostic classification as a means of social control and its significance for vulnerable populations.
3. Discuss the social worker's particular contribution to the diagnostic process that promote and constrain the diagnostic-intervention process.
4. Explain the possible conflict between social work norms, ethics, values, and diagnostic classification system.
5. Describe the role of psychopharmacology in the treatment of clinical disorders and the social worker's role with regards to medication management in treatment.
6. Explain the role of the stigma that exists in society towards individuals and their families dealing with clinical disorders.

VI. School of Social Work Mission Statement and School Wide Learning Goals

The mission of the School of Social Work is to develop and disseminate knowledge through social work research, education, and training that promotes social and economic justice and strengths individual, family, and community well-being, in this diverse and increasingly global environment of New Jersey and beyond.

School Wide Learning Goals: Upon graduation all students will be able to:

1. Demonstrate Ethical and Professional Behavior.
2. Engage Diversity and Difference in Practice; and
3. Engage, Assess, and Intervene with Individuals, Families, Groups, Organizations, and Communities

VII. Required Texts and Readings

American Psychiatric Association. (2022). *Diagnostic and Statistical Manual of Mental Disorders, DSM-5-TR*. Washington, DC: American Psychiatric Association [This book can be accessed via the Rutgers University Library.]

American Psychiatric Association. (2022). DSM-5-TR fact sheets.

<https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/dsm-5-tr-fact-sheets>

Please keep in mind that since the DSM-5-TR was conceived as a dynamic text use of the online version of the text allows access to the updated data on clinical disorders.

Pomeroy, E. (2015). *The clinical assessment workbook: Balancing strengths and differential diagnosis* (2nd ed.). Pacific Grove, CA: Brooks/Cole-Thompson Learning.

Recommended Readings:

Gray, S.W. (2016) *Psychopathology A Competency-based Assessment Model for Social Workers* (4th ed.). Boston, MA: Cengage.

Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). *Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (11th ed.). Lippincott Williams and Wilkins.

- National Alliance for the Mentally Ill (NAMI)
- National Institute of Mental Health
- National Institute on Alcohol Abuse and Alcoholism
- National Institute on Drug Abuse (NIDA)
- National Mental Health Association
- Substance Abuse and Mental Health Services Administration

VIII. Course Attendance and Participation Policies:

Students are expected to be **active** learners and collaborators. Students are expected to contribute knowledge and observations to discussions. Regular class participation is expected. When students participate actively in class discussions learning is enhanced. It is important that reading assignments be completed prior to each session. Please take responsibility for seeking clarification of difficult material encountered in the text, readings, and lectures.

Class attendance and participation is **not** optional. No make-up examinations will be given without prior arrangements made with the instructor.

All written work **must** be submitted through Canvas unless otherwise directed by the instructor. Late assignments will **not** be accepted, unless the student has made arrangements prior to the assignment due date. All written assignment must adhere to APA format. The professor reserves the right to reduce the letter grade for late assignments and assignments not in compliance with APA format. (see this website for a useful guide to APA; APAsytle.org and/or https://owl.purdue.edu/owl/purdue_owl.html).

IX. Zoom camera policy (for synchronous classes only)

In order to promote interactive learning, engagement, and community building, we expect students enrolled in synchronous remote classes (i.e., 'Zoom') courses to turn their cameras on for the duration of class. RU SSW also expects: 1) students should be in as private and distraction free environment as possible in order to support focused learning; and 2) students should not be

engaged in other activities during class (driving, at work, etc.). If you are unable to turn your camera on for a particular week, please communicate let me know before class.

X. Diversity and Inclusion Statement

RU SSW seeks to create an inclusive learning environment where diversity, individual differences and identities (including but not limited to race, gender-identity and expression, class, sexuality, religion, ability, etc.) are respected and recognized as a source of strength. Students and faculty are expected to respect differences and contribute to learning environment that allows for a diversity of thought and worldviews. Please feel free to speak with me if you experience any concerns in this area.

XI. Reaching Out and Student Success and Well-Being

Graduate School is challenging no matter what and this has been a particularly challenging time period for all of us. My goal is to support your success in the classroom despite these challenges. If you are struggling academically or if you have other concerns, please reach out to me and communicate your concerns. I am here to help you with course content and I can refer you to other academic support and/or resources to support your well-being as necessary. Please remember that the [Office of Student Affairs](#) and your advisor are also here to help facilitate your success in our program as well. A variety of resources can be found on including supports around behavioral health/counseling, sexual violence and misconduct diversity and inclusion and bias reporting by campus at <https://socialwork.rutgers.edu/current-students/office-student-affairs>.

XII. Assignments and Grading

SSW Grading Scale: Below is the grading scale for the MSW program

A	92-100
B+	87-91
B	82-86
C+	77-81
C	70-76
F	0-69

*Scores to be rounded up at .5

Assignment Value:

Grades for the course will be weighted as follows:

Class Attendance/ Participation	10%
Case Scenario Exercises	15%
Midterm exam	25%
Final Exam	25%
Final Project - Paper	25%

(Note: Assignments are due by start of class and are to be submitted to canvas under the respective module and assignment drop box.)

Final Project: For instructions, see page 27 of this syllabus.

XIII. Academic Resources

Library Research Assistance

Julia Maxwell is the social work the social work librarian on the New Brunswick Campus
jam1148@libraries.rutgers.edu p. 848-932-6124

Natalie Borisovets is at Newark, Dana Library natalieb@rutgers.edu 973-353-5909

Katie Anderson is at Camden, Robeson Library: Katie.anderson@rutgers.edu 856-225-2830.
 They are all available to meet with students.

Writing Assistance

Success in graduate school and within the larger profession of social work depends on strong writing skills. Writing skills can be improved with practice and effort and Rutgers has multiple resources available to help students strengthen their professional and academic writing skills.

All MSW Students

All MSW SSW students: New Brunswick, Camden, Newark, Intensive Weekend, online and blended are eligible to access writing assistance at the New Brunswick Learning Center.
<https://rlc.rutgers.edu/student-services/writing-tutoring> Online tutoring is available.

Newark Students Only

The Newark writing center is available for MSW students on the Newark campus by appointment. Online tutoring may be available.
<http://www.ncas.rutgers.edu/writingcenter>

Additional Online Resources

APA Style

All students are expected to adhere to the citation style of the *Publication Manual of the American Psychological Association*, 7th edition (2020). It can be purchased at [APA Manual 7th Edition](#). The Purdue OWL website also provide assistance with APA style
<https://owl.english.purdue.edu/owl/resource/560/01/>

Email Etiquette for Students

<https://owl.english.purdue.edu/owl/resource/694/01/>

XIV. Academic Integrity

As per Rutgers University Academic Integrity Policy, “Students are responsible for understanding the principles of academic integrity and abiding by them in all aspects of their work at the University. Students are also encouraged to help educate fellow students about academic integrity and to bring all alleged violations of academic integrity they encounter to the attention of the appropriate authorities.” All SSW students are expected to review and familiarize themselves with the [RU Academic Integrity Policy](#) in its’ entirety.

As per Rutgers University Academic Integrity Policy, “The principles of academic integrity require that a student: make sure that all work submitted in a course, academic research, or other activity is the student’s own and created without the aid of impermissible technologies, materials, or collaborations; properly acknowledge and cite all use of the ideas, results, images, or words of others; properly acknowledge all contributors to a given piece of work; obtain all data or results by ethical means and report them accurately without suppressing any results inconsistent with the student’s interpretation or conclusions; treat all other students ethically, respecting their integrity and right to pursue their educational goals without interference. This principle requires that a student neither facilitate academic dishonesty by others nor obstruct their academic progress; uphold the ethical standards and professional code of conduct in the field for which the student is preparing.” ^[L]_[SEP]

Students should review all types of Academic Integrity Violations per the RU Academic Integrity Policy. Below are some of the more common violations, as articulated in Rutgers University Academic Integrity Policy:

“Plagiarism: Plagiarism is the use of another person’s words, ideas, images, or results, no matter the form or media, without giving that person appropriate credit. To avoid plagiarism, a student must identify every direct quotation using quotation marks or appropriate indentation and cite both direct quotation and paraphrasing properly according to the accepted format for the particular discipline or as required by the instructor in a course. Some common examples of plagiarism are: Copying word for word (i.e. quoting directly) from an oral, printed, or electronic source without proper attribution; Paraphrasing without proper attribution, i.e., presenting in one’s own words another person’s written words or ideas as if they were one’s own, regardless of the nature of the assignment; Incorporating into one’s work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other non-textual material from other sources, regardless of format, without proper attribution.” ^[L]_[SEP]

“Cheating: Cheating is the use or possession of inappropriate or prohibited materials, information, sources, or aids in any academic exercise. Cheating also includes submitting papers, research results or reports, analyses, and other textual or visual material and media as one’s own work when others prepared them. Some common examples are: Prohibited collaboration: receiving research, programming, data collection, or analytical assistance from others or working with another student on an assignment where such help is not permitted; Copying another student’s work or answers on a quiz or examination; Using or having access to books, notes, calculators, cell phones, technology, or other prohibited devices or materials during a quiz or

examination; **Submitting the same work or major portions thereof to satisfy the requirements of more than one course without permission from the instructors involved;** Preprogramming a calculator or other device to contain answers, formulas, or other unauthorized information for use during a quiz or examination.; Acquiring a copy of an examination from an unauthorized source before the examination; Having a substitute take an examination in one's place; Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement; Submitting as one's own work a term paper or other assignment prepared, in whole or in part, by someone else."

Use of artificial intelligence (AI) such as ChatGPT is only permitted to help you brainstorm ideas and see examples, unless otherwise directed by your instructor. All material submitted in the course must be your own as per the Academic Integrity policy.

Any faculty member or academic administrator who becomes aware of a possible academic integrity violation must initiate a formal complaint with the Office of Student Conduct and the SSW's Academic Integrity Facilitator (Patricia Findley at pfindley@rutgers.edu). The AIF deciding the case (the "adjudicator") shall notify the accused student of the allegation in writing or by electronic communication within fifteen working days of the time the faculty member becomes aware of the alleged violation.

Once the student has been notified of the allegation, the student may not drop the course or withdraw from the school until the adjudication process is complete. A TZ or incomplete grade shall be assigned until the case is resolved. For more information, see [RU Academic Integrity Policy](#) and [Procedures for Adjudicating Academic Integrity Violations](#)

To promote a strong culture of academic integrity, Rutgers has adopted the following honor pledge to be written and signed on examinations and major course assignments submitted for grading: *On my honor, I have neither received nor given any unauthorized assistance on this examination/assignment.*

XV. Disability Accommodation

Rutgers University welcomes students with disabilities into all of the University's educational programs. In order to receive consideration for reasonable accommodations, a student with a disability must contact the appropriate disability services office at the campus where you are officially enrolled, participate in an intake interview, and provide documentation: <https://ods.rutgers.edu/students/documentation-guidelines>. If the documentation supports your request for reasonable accommodations, your campus' disability services office will provide you with a Letter of Accommodations. Please share this letter with your instructors and discuss the accommodations with them as early in your courses as possible. To begin this process, please complete the [Registration form](#) on the ODS website.

XVI. Course Outline

A variety of methods are used including lectures, discussions, exercise, assignments, readings, and videos. Readings marked with an asterisk "*" are available electronically through the library

reserve system and are required.

COURSE OUTLINE

Modules	Readings, Activities, and Assignments
1	<p>Introduction to the DSM -5, Overview, History, Critique</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the changes from DSM 5 to the DSM-5-TR. 2. Distinguish between Mental illness and Mental distress 3. Describe how stigma affects persons diagnosed with a mental disorder. 4. Provide examples of Conditions that may be the Focus of Clinical Attention. <p>Required Readings:</p> <p>American Psychiatric Association. (2022). DSM-5-TR fact sheets. https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/dsm-5-tr-fact-sheets</p> <p>DSM-5-TR: Topics—Introduction, Use of the Manual, Cautionary Statement, p. 5-29.</p> <p>Barrera, I., Schulz, C. H., Rodriguez, S.A., Gonzalez, C. J., & Acosta, C. (2013). Mexican- American perceptions of the causes of mental distress. <i>Social Work in Mental Health</i>, 11, 233-248.</p> <p>Hansen, H. B., Donaldson, Z., Link, B.G., Bearman, P. S., Hopper, K., Bates, L. M. et al. (2013). Independent review of social and population variation in mental health could improve diagnosis in DSM revision, <i>Health Affairs</i>, 32, 984-993.</p> <p>Hinshaw, S. P. (2005). The stigmatization of mental illness in children and parents: developmental issues, family concerns, and research needs. <i>Journal of Child Psychology and Psychiatry</i>, 46, 714-734.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 1, pages 1-12.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 6, pages 290-299.</p>
2	<p>Competency-Based Assessment Model, Suicide Risk Assessment, and Ethics.</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Describe the components of the competency-based assessment model 2. Identify the central themes in Dual Relationships

	<p>3. Summarize the difference between boundary violations and boundary crossing.</p> <p>4. Apply the NASW Technology Standards 2.07, 2.11, and 2.19 to the assessment process.</p> <p>Required Readings:</p> <p>DSM-5-TR: Topics-- Assessment Measures, Other Conditions that may be the Focus of Clinical Attention, and Culture and Psychiatric Diagnosis, 821-836, 859-880.</p> <p>National Association of Social Workers. (2017). Technology in social work practice. https://naswor.socialworkers.org/Portals/31/Docs/PRA-BRO-33617.TechStandards_FINAL_POSTING.pdf?ver=2019-02-14-122206-443</p> <p>Ethics</p> <p>National Association of Social Workers (NASW; 2021) Code of Ethics. https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English</p> <p>Pomeroy, E. (2015). <i>The Clinical Assessment and Differential Diagnosis Workbook: Balancing Strengths</i>, chapters 1 and 20.</p> <p>Reamer, F. G. (2003). Boundary issues in social work: Managing dual relationships. https://www.bu.edu/ssw/files/2017/07/Reamer-F.-Boundary-Issues-in-SocialWork-Managing-dual-relationships.pdf</p> <p>Recommended Readings:</p> <p>Emmelkamp. (2005). Technological Innovations in Clinical Assessment and Psychotherapy. <i>Psychotherapy and Psychosomatics</i>, 74(6), 336–343. https://doi.org/10.1159/000087780</p> <p>Garcia, Legerski, J.-P., & Petrovich, A. (2021). <i>Strengthening the DSM: Incorporating resilience and cultural competence</i>. Springer Publishing Company. Chapter 1, p. 3-27.</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 1, pages 12-32.</p> <p>Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). <i>Kaplan and Sadock’s synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 5, pages 192-235, Chapter 25, pages 812. 823, and Chapter 26, pages 824-830.</p>
3	<p>Neurodevelopmental Disorders & Common Psychotropic Medications</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Describe the classes of medications. 2. Identify the common psychotropic and non-psychotropic and over the counter medications associated with mental health diagnosis and the associated side effects. 3. Describe the role that neurotransmitters play in the development of Mental Health

disorders.

4. Identify the Disorders considered Neurodevelopmental disorders.
5. List the common psychosocial and psychopharmacological interventions used to treat Neurodevelopmental disorders.

Required Readings:

DSM-5-TR: Topics—Neurodevelopmental Disorders, 35-100.

Ballentine, K. L. (2019). Understanding Racial Differences in Diagnosing ODD Versus ADHD Using Critical Race Theory. *Families in Society*, 100(3), 282–292. <https://doi.org/10.1177/1044389419842765>

Norbury, C. F., & Sparks, A. (2013). Difference or disorder? Cultural issues in understanding neurodevelopmental disorders. *Developmental Psychology*, 49(1), 45–58. <https://doi.org/10.1037/a0027446>

Pomeroy, E. (2015) *The Clinical Assessment and Differential Diagnosis Workbook: Balancing Strengths*, Chapter 2.

Medication Resources

Michelle Bybel video:

<https://www.dropbox.com/s/i1i1mycq3t25kxj/Psychopathology.mp4?dl=0>

Chew R.H., Hales, R.E., & Yudofsky S.C. (2017). *What your patients need to know about psychiatric medications*. (3rd ed.). Washington, D.C.: American Psychiatric Publishing. [HTTPS://DOI.ORG/10.1176/APPI.BOOKS.9781615371280](https://doi.org/10.1176/APPI.BOOKS.9781615371280)

U.S. National Institute of Mental Health (2012). Mental Health Medications. Retrieved on January 13, 2014 from <http://www.nimh.nih.gov/health/publications/mental-health-medications/index.shtml>

Memorable psychopharmacology

https://www.youtube.com/results?search_query=memorable+psychopharmacology

Recommended Readings:

Gray, S.W. (2016) *Psychopathology A Competency-based Assessment Model for Social Workers* (4th ed.). Boston, MA: Cengage. Chapter 2, pages 33-65.

Mahone, M. E. (2012). Neuropsychiatric differences between boys and girls with ADHD. *Psychiatric Times*, 29, 34-43.

Mandell et al. (2009). Racial/ ethnic disparities in the identification of children with autism spectrum disorders. *American Journal of Public Health*, 99, 493-498.

Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). Kaplan and Sadock's synopsis of psychiatry:

	<p>Behavioral sciences/clinical psychiatry (11th ed.). Chapter 31, pages 1137-1205</p> <p>Case Exercises: Case 2.1 & 2.2. Pomeroy, E. (2015). Please carefully review these cases, answer the required questions, and come to class prepared to make a diagnostic formulation. When making your diagnosis, please be sure to use both the DSM-5-TR. These exercises are graded, and you are expected to participate in class discussion of the cases.</p>
4	<p>Disruptive, Impulse-Control and Conduct Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Disruptive, Impulse-Control and Conduct Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>Atkins-Loria, S., Macdonald, H. & Mitterling, C. (2015). Young African American Men and the Diagnosis of Conduct Disorder: The Neo-colonization of Suffering. <i>Clin Soc Work J</i> 43, 431–441. https://doi.org/10.1007/s10615-015-0531-8</p> <p>DSM-5-TR: Topics—Disruptive, Impulse-Control Disorders, 521-542.</p> <p>Fadus, M.C., Ginsburg, K.R., Sobowale, K. et al. Unconscious Bias and the Diagnosis of Disruptive Behavior Disorders and ADHD in African American and Hispanic Youth. <i>Acad Psychiatry</i> 44, 95–102 (2020). https://doi.org/10.1007/s40596-019-01127-6</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 15.</p> <p>Recommended Readings:</p> <p>Fairchild, G., van Goozen, S. H. ., Calder, A. J., & Goodyer, I. M. (2013). Research Review: Evaluating and reformulating the developmental taxonomic theory of antisocial behaviour. <i>Journal of Child Psychology and Psychiatry</i>, <i>54</i>(9), 924–940. https://doi.org/10.1111/jcpp.12102</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 13, 353-372</p> <p>Kohls, G., Baumann, S., Gundlach, M., Scharke, W., Bernhard, A., Martinelli, A., Ackermann, K., Kersten, L., Prätzlich, M., Oldenhof, H., Jansen, L., van den Boogaard, L., Smaragdi, A.,</p>

	<p>Gonzalez-Madruga, K., Cornwell, H., Rogers, J. C., Pauli, R., Clanton, R., Baker, R., ... Konrad, K. (2020). Investigating sex differences in emotion recognition, learning, and regulation among youths with conduct disorder. <i>Journal of the American Academy of Child and Adolescent Psychiatry</i>, 59(2), 263–273. https://doi.org/10.1016/j.jaac.2019.04.003</p> <p>Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). <i>Kaplan and Sadock’s synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 19, pages 608-615, and Chapter 31, pages 1244-1253.</p> <p>Case Exercise: Case 15. 2 Pomeroy, E. (2015). Please carefully review this case, answer the required questions, and come to class prepared to make a diagnostic formulation. When making your diagnosis, please be sure to use both the DSM-5-TR. These exercises are graded, and you are expected to participate in class discussion of the cases.</p>
5	<p>Substance-Related and Addictive Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Substance-Related and Addictive Disorders. 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topics—Substance-Related and Addictive Disorders, 543-666.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 16.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 14, 373-442.</p> <p>Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). <i>Kaplan and Sadock’s synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 20, pages 616-693 and Chapter 31, pages 1273-1278</p> <p>Suggested Viewing:</p> <p>Understanding the Opioid Epidemic https://www.pbs.org/video/understanding-the-opioid-epidemic-oei0dd</p>

	<p>Case Exercise(s): 16.2 <i>Maria Quantas in Pomeroy</i>. Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p>
6	<p>Depressive Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Depressive Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. Identify the skills of risk assessment as it pertains to this group of disorders and suicide. 5. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topics—Depressive Disorders, 177-214.</p> <p>Ching, T. H. (2021). Culturally attuned behavior therapy for anxiety and depression in Asian Americans: addressing racial microaggressions and deconstructing the Model Minority Myth. <i>Cognitive and Behavioral Practice</i>. https://doi.org/10.1016/j.cbpra.2021.04.006</p> <p>Falicov, C. J. (2003). Culture, society, and gender in depression. <i>Journal of family therapy</i>, 25(4), 371-387.</p> <p>Pomeroy, E. (2015). <i>The Clinical Assessment Workbook: Balancing Strengths and Differential Diagnosis</i>, Chapter 5.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 5, 129-160.</p> <p>Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 8, pages 347-386, and Chapter 31, pages 1226-1235.</p> <p>Case Exercises: Cases 5.2 Kathy Claybourne and 5.3 Lucy Johnson Pomeroy, E. (2015). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p>
7	<p>Bipolar and Related Disorders</p>

	<p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Bipolar and Related Disorders 2. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 3. Review the components involved in suicide risk assessment (and other risk assessments). 4. List other disorders that may co-occur and or need to be considered as a Differential Diagnosis. <p>Required Readings:</p> <p>Akinhanmi, Biernacka, J. M., Strakowski, S. M., McElroy, S. L., Balls Berry, J. E., Merikangas, K. R., Assari, S., McInnis, M. G., Schulze, T. G., LeBoyer, M., Tamminga, C., Patten, C., & Frye, M. A. (2018). Racial disparities in bipolar disorder treatment and research: A call to action. <i>Bipolar Disorders</i>, 20(6), 506–514. https://doi.org/10.1111/bdi.12638</p> <p>DSM-5-TR: Topics—Bipolar and Related Disorders, 139-176.</p> <p>Pomeroy, E. (2015). <i>The Clinical Assessment Workbook: Balancing Strengths and Differential Diagnosis</i>, Chapter 4.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 4, 111-128.</p> <p>Haeri, S. et al. (2011). Disparities in diagnosis of bipolar disorder in individuals of African and European descent: A review. <i>Journal of Psychiatric Practice</i>, 17, 394-403.</p> <p>Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 31, pages 1236-1244.</p> <p>Case Exercises: Cases Mr. Hill from Clinical Case from the online version of DSM 5 clinical cases (on Canvas). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p> <p>Midterm Exam opens</p>
8	<p>Anxiety Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Anxiety Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential

	<p style="text-align: center;">Diagnosis</p> <p>Required Readings:</p> <p>DSM-5-TR: Topics—Anxiety Disorders, 215-262.</p> <p>Garcia, Legerski, J.-P., & Petrovich, A. (2021). <i>Strengthening the DSM: Incorporating resilience and cultural competence</i>. Springer Publishing Company. Chapter 4, p. 115-117.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 6.</p> <p>Recommended Readings:</p> <p>Asnaani, A., Gutner, C.A., Hinton, D. E., & Hofmann, S. G. (2009). Panic disorder, panic attacks, and panic attack symptoms across race-ethnic groups: Results of the collaborative psychiatric epidemiology studies. <i>CNS Neuroscience and Therapeutics</i>, 13, 249-254.</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 6, 161-190.</p> <p>Sadock, B. J., Sadock, V. A., Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry</i> (11th ed.). Chapter 9, pages 387-417 and Chapter 31, pages 1253-1263.</p> <p>Case Exercises: 6.3 Sam Barnes and 6.5 Peggy Wilson (Pomeroy). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p> <p>Midterm Exam Due</p>
9	<p>Obsessive-Compulsive and Related Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Obsessive-Compulsive and Related Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topic—Obsessive-Compulsive and Related Disorders, 263-294.</p>

	<p>Lind, Boschen, M. J., & Morrissey, S. (2012). Technological advances in psychotherapy: Implications for the assessment and treatment of obsessive-compulsive disorder. <i>Journal of Anxiety Disorders</i>, 27(1), 47–55. https://doi.org/10.1016/j.janxdis.2012.09.004</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 7.</p> <p>Recommended Readings:</p> <p>D'Alessandro, T. M. (2009). Factors influencing the onset of childhood obsessive-compulsive disorder. <i>Pediatric Nursing</i>, 35, 43-46.</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 7, 191-213.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry</i> (11th ed.). Chapter 10, pages 418-436, and Chapter 31.</p> <p>Case Exercises: Case 7.2 and 7.3. Pomeroy, E. (2015). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p>
10	<p>Trauma-and Stress Related Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Trauma-and Stress Related Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topic—Trauma-and Stress Related Disorders, 295-328.</p> <p>Garcia, Legerski, J.-P., & Petrovich, A. (2021). <i>Strengthening the DSM: Incorporating resilience and cultural competence</i>. Springer Publishing Company. Chapter 5, p. 136-144.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 8.</p> <p>Recommended Readings:</p>

	<p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 8, 214-243.</p> <p>Kline, A. (2013). Gender differences in the risk and protective factors associated with PTSD: A prospective study of National Guard troops deployed to Iraq. <i>Psychiatry</i>, 76, 256-272.</p> <p>Rauch, S. A. M., Eftekhari, A., & Ruzek, J. I. (2012). Review of exposure therapy: A gold standard for PTSD treatment. <i>Journal Rehabilitation Research and Development</i>, 49(5), 679-688.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry</i> (11th ed.). Chapter 11, pages 437-450 and Chapter 31, pages 1216-1225.</p> <p>Case Exercises: Cases 8.6 Henju Lee and 8.7 Roger Mathis (2015). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p>
11	<p>Personality Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Personality Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topics--Personality Disorders, 667-732.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 18.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016). <i>Psychopathology A Competency-based Assessment Model for Social Workers</i>. (4th ed.). Boston, MA: Cengage. Chapter 16, 475-539.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences clinical psychiatry</i> (11th ed.). Chapter 22, pages 742-762.</p> <p>Skodol, A. E., & Bender, D. S. (2003). Why are women diagnosed borderline more than men? <i>Psychiatry Quarterly</i>, 74, 349-360.</p> <p>Case Exercises: 18.2 Jack Keller and 18.4 Filipo and Kim Garrett (2016)</p>

	Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.
12	<p>Schizophrenia Spectrum and Other Psychotic Disorders</p> <p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Schizophrenia Spectrum and Other Psychotic Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Reading:</p> <p>DSM-5-TR: Topic—Schizophrenia Spectrum and Other Psychotic Disorders, 101-138.</p> <p>Coldwell, J., Meddings, S., & Camic, P. M. (2011). How people with psychosis positively contribute to their family: A grounded theory analysis. <i>Journal of Family Therapy</i>, 33, 353-371.</p> <p>Garcia, Legerski, J.-P., & Petrovich, A. (2021). <i>Strengthening the DSM: Incorporating resilience and cultural competence</i>. Springer Publishing Company. Chapter 8, p. 249-251.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 3.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016). <i>Psychopathology A Competency-based Assessment Model for Social Workers</i>. (4th ed.). Boston, MA: Cengage. Chapter 3, 66-110.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry</i> (11th ed.). Chapter 7, pages 300-346 and Chapter 31, 1268-1273.</p> <p>Case Exercises: Case 3.4 and 3.5. Pomeroy, E. (2015). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p> <p>Final Paper Due</p>
13	Feeding, Eating Disorders, and Elimination Disorders

	<p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Feeding, Eating Disorders, and Elimination Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topics—Feeding and Eating Disorders, 371-398 & Elimination Disorders, 399-406.</p> <p>Goode, R.W., Cowell, M. M., Mazzeo, S.E., Cooper-Lewter, C., Forte, A., Olayia, O., Bulik, C.M. (2020). Binge eating and binge-eating disorder in Black women: A systematic review. <i>The International Journal of Eating Disorders</i>, 53(4), p. 491-507. https://doi.org/10.1002/eat.23217</p> <p>Smart, R. Yuying, T., Mejfa, O.L., Hayashino, D., & Braaten, M. E. T. (2011). Therapists' experiences treating Asian American women with eating disorders. <i>Professional Psychology: Research and Practice</i>. 42, 308-315.</p> <p>Strother, E., Lemberg, R., Stanford, S. C., & Tuberville, D. (2012). Eating Disorders in Men: Underdiagnosed, undertreated, and misunderstood. <i>Eating Disorders: The Journal of Treatment and Prevention</i>, 20, 346-355.</p> <p>Recommended Readings:</p> <p>Buser, J. K. (2010). American Indian adolescents and disordered eating. <i>Professional School Counseling</i>, 14, 146-155.</p> <p>Gray, S.W. (2016) Psychopathology A Competency-based Assessment Model for Social Workers (4th ed.). Boston, MA: Cengage. Chapter 11, 297-340.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapter 11.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry</i> (11th ed.). Chapter 15, pages 509-522, Chapter 31, pages 1205-1216.</p> <p>Case Exercises: Case 11.5 Miguel Hernandez Pomeroy, E. (2015). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p>
14	Dissociative Disorder, Somatic Symptom and Related Disorders.

	<p>Learning Objectives:</p> <ol style="list-style-type: none"> 1. Identify the disorders in the clinical category of Dissociative Disorder, Somatic Symptom and Related Disorders 2. Apply the Competency Based Assessment model to the assigned Case Exercises 3. Describe the common psychosocial and psychopharmacological interventions used to treat clients that meet this clinical criterion. 4. List other disorders that may co-occur and or need to be considered as Differential Diagnosis <p>Required Readings:</p> <p>DSM-5-TR: Topic—Dissociative Disorders, 329-348, Somatic Symptom and Related Disorders, 349-370.</p> <p>Davy, Z., & Toze, M. (2018). What is gender dysphoria? A critical systematic narrative review. <i>Transgender health, 3</i>(1), 159-169.</p> <p>Pomeroy, E. (2015). <i>The clinical assessment workbook: Balancing strengths and differential diagnosis</i>, Chapters 9, and 10.</p> <p>Ringrose, J. L. (2011). Meeting the needs of clients with dissociative identity disorder: Considerations for psychotherapy, <i>British Journal of Guidance and Counselling, 39</i>, 293-305.</p> <p>Recommended Readings:</p> <p>Gray, S.W. (2016) <i>Psychopathology A Competency-based Assessment Model for Social Workers</i> (4th ed.). Boston, MA: Cengage. Chapter 9, 244-269; Chapter 10, 270-296.</p> <p>Sadock, B. J., Sadock, V. A., & Ruiz, P. (2015). <i>Kaplan and Sadock's synopsis of psychiatry: Behavioral sciences/ clinical psychiatry</i> (11th ed.). Chapter 12, pages 451-464, Chapter 13, pages 465-503, and Chapter 18, 600-607.</p> <p>Case Exercises: Pomeroy Cases 9.2 Larry Schenk and 10.3 Cassandra Pierce (2016). Please carefully review this case(s), answer the required questions, and come to class prepared to discuss your diagnostic formulation. When making your diagnosis, please support your findings by applying the clinical criterion from the DSM-5-TR.</p>
15	<p>Last Class</p> <p>Final Exam Due (Modules 8-14)</p>

Clinical Assessment and Diagnosis Final Paper

Due Date

Instructions: This assignment should be typed and double-spaced, with one-inch margins. It is to be no more than 10 pages, with a 12-point font size. The 10-page length requirement does not include the title page or reference page, but it does include both parts of the assignment outlined below. This paper requires that you include a reference page consisting of a minimum of 5-7 scholarly references (within 5-7 years). The number of citations in the text must be the same number of references listed on the reference page. You can select any of the disorders covered in the DSM-5-TR. This assignment will be checked for appropriate citing and paraphrasing of material using Turnitin.

The reference and citation style must follow that of the American Psychological Association (APA 7th edition). Students are expected to comply with the Rutgers University Policy on Academic Integrity (Rutgers University Policy on Academic Integrity).

There is a rubric provided at the end of this document, which will be used in grading the assignment.

Make sure to review this.

In your paper, you must address the following:

- (1) Specify the diagnostic criteria of the clinical disorder you have selected.
- (2) Discuss 2-3 considerations around misdiagnosis and the perpetuation of stigma and bias that a social worker would need to address in their diagnostic formulation for the selected disorder (consider the Cultural Formulation Interview, stigma, and/or cultural concepts of distress, etc.).
- (3) Discuss the process of differential diagnosis by identifying two other clinical disorders that share similar symptoms. What criterion would you use to differentiate between the two disorders and the disorder you selected?
- (4) Identify the prevalence rates for the clinical disorder you have selected, including prevalence rates for at least two of the following groups: gender identity, gender expression, race, ethnicity, social economic status, differently abled or sexual orientation. Please search for up-to-date statistics (within the last 2-3 years).
- (5) Discuss the ways in which this disorder could impact an individual's social functioning (home, school, work, family, and relationships).
- (6) If you were working with a client with this clinical diagnosis, discuss two assessment measures you could employ and why.
- (7) Identify at least two interventions, one psychosocial and one psychopharmacological, used to treat this disorder. If a psychopharmacological is not indicated explain why and what other intervention would be applicable. Discuss the side effects of the psychopharmacological interventions and its importance to assessment.

FINAL ASSIGNMENT GRADING RUBRIC

Grade Item	Points Earned	Total Points
1.) Specify the diagnosis you selected and summarize the diagnostic clinical criterion for the disorder.		2.5
2.) Discuss 2-3 considerations around misdiagnosis and the perpetuation of stigma and bias that a social worker would need to address in their diagnostic formulation for the selected disorder (consider the Cultural Formulation Interview, stigma, and/or cultural concepts of distress, etc.).		5
3.) Discuss the process of differential diagnosis by identifying two other clinical disorders that share similar symptoms. What criterion would you use to differentiate between the two disorders and the disorder you selected?		5
4.) Identify the prevalence rates for the clinical disorder you have selected, including prevalence rates for at least two of the following groups: gender identity, gender expression, race, ethnicity, social economic status, differently abled or sexual orientation. Please search for up-to-date statistics (within the last 2-3 years).		2.5
5.) Discuss the ways in which this disorder could impact an individual's social functioning (home, school, work, family, and relationships).		2.5
6.) If you were working with a client with this clinical diagnosis, discuss two assessment measures you could employ and why.		2.5
7.) Identify at least two interventions, one psychosocial and one psychopharmacological, used to treat this disorder. If a psychopharmacological is not indicated explain why and what other intervention would be applicable. Discuss the side effects of the psychopharmacological interventions and its importance to assessment.		2.5
8.) APA format (title page, introduction, conclusion, headers, references, etc.), grammar, spelling, and structure applied to overall paper.		2.5
Total		25

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