Course Description:

This course focuses on the diagnosis of mental disorders as coded in the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association, and the International Classification of Diseases. Students will be provided the opportunity to integrate the Theocentric (God-Centered) Model within the scope of clinical diagnosis of psychopathology. The course will provide a framework for determining a differential diagnosis of mental disorders using DSM-5 decision trees. Students learn to arrive at accurate diagnoses in an efficient manner. Accurate diagnosing is the basis for treatment planning. Students will learn to develop treatment plans based on accurate diagnoses. The diagnoses covered in this course are commonly treated in the clinical setting (e.g., churches, psychiatric hospitals, outpatient clinics, mental health centers, prisons, private practices, military chaplaincies, etc.) by licensed mental health counselors, licensed clinical pastoral therapists, licensed psychologists, licensed psychological examiners, licensed marriage and family therapists, licensed clinical social workers, substance abuse counselors and various medical specialties.

Course Learning Outcomes (CLO), Criteria, MACMHC, CACREP:
Noted are:

1. Course Learning Outcomes (CLO);
2. Knowledge (K), Skill (S), Formation (F) and Praxis (P) Criteria emphasis;
MACMHC Program Outcomes Addressed in This Course:

Develop the ability to use their diagnostic skills when assessing clients during the intake session so that they can quickly develop a working diagnosis in order to direct treatment planning. Students will apply appropriate techniques to enhance the accuracy of mental health diagnoses.

CACREP Core Standards Addressed By this Course:

2F7 a. Historical perspective of understanding diagnosis using the nomenclature of mental illness and how to conceptualize syndrome patterns that make up various diagnoses.
2F7 b. Understanding core symptoms patterns to assess in an initial interview session to direct treatment planning.
2F7 c. Understanding which conditions have higher risk of aggression, self-harm, and other directed harm.

Section 5: Specialty Areas

5F, c. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.

5F, d. Neurobiological and medical foundation and etiology of addiction and co-occurring disorders.

5F, d. Neurobiological and medical foundation and etiology of addiction and co-occurring disorders.

CACREP Standards and Key Performance Indicators (KPI’s)/Assignments

1. Quiz percent average will count for 25% of the Course grade. CACREP Core Standards covered by this KPI (2F7, a. b. c.). Section 5 CACREP Specialty areas covered by this lesson (5F, c. d., 5CD, b. d. e. f.).

2. Role-play in class. Do three monologue presentations of fictional clients you develop from your assigned area of mental illness that reflect various disorders. This will allow students three opportunities to practice diagnostic skills. STUDENTS WILL BE GIVEN THE ASSIGNED CATEGORY OF MENTAL ILLNESS FOR THEIR THREE
ROLE PLAYS AND CAPSTONE PAPER TONIGHT. This will count 25% of the course grade. CACREP Core Standards covered by this KPI (2F7, a.b.c.). Section 5 CACREP Specialty areas covered by this lesson (5F, c. d. 5CD, b. d. e. f. g. h).

3. Capstone Project, in WORD FORMAT (term paper over assigned category of mental illness). This project will count as 25% of the course grade. Emailing papers early would be appreciated. Your paper is to cover the area of mental illness assigned to you by your professor. CACREP Core Standards covered by this KPI (2F7, a. b. c.). CACREP Specialty areas covered by this lesson (5F, c. d. and 5CD, b. d. e. f. g. h).

4. Final Exam will count for 25% of the course grade. CACREP Core Standards covered by this KPI (2F7.a. b. c). Section 5 CACREP Specialty Areas covered by this KPI (5F c. d. and 5CD b. d. e. f. g. h).

5. Class interaction will be used to determine between higher grades when the grade is on the line. Pass/fail format for this area.

Lesson Content, Resources, and Assignments:

Lesson 1 Week 1 (08/25/2020) Introduction of the course, discuss grading. The professor will briefly cover (Delirium, Dementia, and Amnestic and Other Cognitive Disorders and Mental Disorders Due to a General Medical Condition and have a brief overview of Substance Abuse Diagnoses).

You are to prepare a term paper summarizing the main information from your assigned diagnostic category of mental illness. This research paper is your CAPSTONE project for the class. This paper is to be double spaced and 14 pages long. Plan to use 7 or more sources in your bibliography. The paper is due 11/10/2020. The quiz average, final exam, class presentation of three role play situations and capstone projects are “KEY PERFORMANCE INDICATORS,” that comprise the course grade This CAPSTONE paper will be one of four percentage grades for the class. The classroom role-play is a monologue of a case made up to reflect the symptom pattern of three separate mental illnesses in your assigned area from the DSM-5. The class presentations will be one of 4 primary graded functions. Classroom participation measure 5 is a tie breaker between very close gradations between one grade and another it is Pass/Fail. The classroom role-play monologue of three diagnoses within your assigned category of mental illness will count for 25% of your grade. The Quiz average will count for 25% of your grade. The Capstone paper will count 25% of your grade and Final exam will count as 25% of your grade. Send your Capstone paper to my PT Seminary email address: tbiller@PTSeminary.edu.

Quick view of 4 basic components used to compute course grade:

1. Quiz percent average will count 25%
2. Role-play in class of three diagnoses in your assigned category of mental illness will
count 25%
3. Capstone Project emailed to professor (term paper over assigned category of mental illness) (WORD FORMAT ONLY) will count 25%
4. Final Exam 25%
5. Class participation will be used to determine the higher of two grades. Listed as pass/fail.

As mentioned above, the professor will also present information in this lesson covering Substance Abuse issues and problems related to treatment outcome due to use of substances. This also relates to problems with prescribed psychotropic medications. “A Christian Guide to Psychiatric Medication” will be helpful in dealing with this topic.

Section 5 Clinical Mental Health Counseling Specialty Area Foundations will be noted S5F, Contextual Dimensions will be noted S5CD. In lesson one S5F c-principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning, and S5F d-neurobiological and medical foundation and etiology of addiction and co-occurring disorders are addressed as well as S5CD e-potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders, and g-impact of biological and neurological mechanisms on mental health-the interplay with psychopharmacology will be discussed. It is recommended that students take CO791 Psychopharmacology, Diagnosis and Treatment in Counseling as well as the elective course that covers substance abuse issues.

CACREP core principals 2F7, a. b. c. are reviewed: history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others.

Lesson 2 Week 2 (09/01/2020) The professor will present an overview of Schizophrenia and Other Psychotic Disorders. Review of how the DSM 5 categorizes the mental disorders related to psychotic symptoms. Utilize the DSM-5 to aide in arriving at diagnoses. Brief overview of “A Christian Guide to Psychiatric Medication.” (This lesson covers 5CD h-classifications, indications, and contradictions of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation as related to information about major classes of psychotropic medications will be shared. This lesson covers CACREP Core Standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others.

Quiz 1 over material presented in class Week 2 (09/01/2020). Psychotic Disorders.

Lesson 3. Week 3 (09/08/2020) The professor will present this lesson: Dissociative Disorders. This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others.
Quiz 2 (09/08/2019) over material presented in class (Dissociative Disorders).

Lesson 4. Week (09/15/2020) STUDENTS WILL BEGIN ROLE PLAY MONOLOGUE PRESENTATIONS OF THEIR ASSIGNED MENTAL HEALTH TOPIC AND CLASSMATES WILL DIAGNOSE THE THREE FICTIONAL PATIENTS. Mood Disorders. This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others.

Quiz 3 (09/15/2020) over material presented in class. Mood Disorders.

Lesson 5. Week 5 (09/22/2020) Anxiety Disorders and Obsessive-Compulsive Disorders. This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others.

Quiz 4 (09/22/2020) over material presented in class (Anxiety Disorders and Obsessive-Compulsive Disorders).

Lesson 6. Week 6 (09/29/2020) (Somatoform Disorders) This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others.

Quiz 5 (09/29/2020) over material presented in class. (Somatoform Disorders)

Week 7. Fall break (010/06/2020) (Factitious Disorders) review over the break.

Lesson 8. Week 8 (10/13/2020) (Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence. Intellectual Disabilities, etc. and Impulse-Control Disorders Not elsewhere Classified). This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others. Section 5 Foundations e. is addressed here).

Quiz 6 (10/13/2020) over material presented in class. (Disorders Usually First diagnosed in Infancy, Childhood, or Adolescence. Intellectual Disability, etc. and Impulse-Control Disorders Not Elsewhere Classified).

Lesson 9. Week 9 (10/20/2020) Adjustment Disorders and PTSD. Classroom discussion of integrating faith based concepts in working with mental health patients suffering with PTSD and the theological implications of natural versus human-to-human trauma. Review Chapter 11 in A Christian Guide to Psychiatric Medication related to PTSD. (This is a continuation of this topic as it is integrated during the course). This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding
which conditions are higher risk for aggression toward self or others.

Quiz 7 (10/20/2020) over material presented in class. Adjustment Disorders and PTSD.

Section 5 Contextual Dimensions d. This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others. Discuss the causes of personality disorders such as Narcissistic, and Antisocial Personality Disorders.

Quiz 8 (10/27/2020) Personality Disorders.

Lesson 11. Week 11 (11/03/2020) Abuse and Neglect DSM-5 p. 22, 717-722. We will discuss the risk of relational aggression (domestic violence, and ensuing trauma and child abuse issues- 2F7, c). Trauma and abuse reporting issues will be discussed. (Dr. Biller worked with legislative task force to rewrite Child Abuse Laws for State of Tennessee 1984-1986 and we added Duty to Warn Statues with NO ONE immune from reporting Child Abuse in TN. Up to date HIPAA guidelines reviewed-2F7, d. and 2F7,a. b. c. (Section 5 Contextual Dimensions b and g are addressed in this set of exercises). The grade will be based on class participation related to the class arriving at a consensual diagnosis. Professor will bring original working copy of the law.

CAPSTONE PAPER WORD FORMAT DUE NEXT WEEK EMAIL TO tbiller@ptseminary.edu

Lesson 12. Week 12 (11/10/2020) CAPSTONE TERM PAPER OVER ASSIGNED DIAGNOSTIC CLASSIFICATION AREA DUE TODAY. (Capstone paper is Key Performance Indicator) This covers CACREP basic standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggression toward self or others. Cover: Gender Identify Disorders, Eating Disorders, Elimination Disorders, and Sleep Disorders. Continue the discussion of the integration of Christian faith and the understanding of mental disorders.

Lesson 13. Week 13 (11/17/2020) Review the historical significance of diagnostic nomenclature in counseling. Going back to Emil Kraepelin and the initial nosological schema for conceptualizing mental illness and the impact this has had on the field of counseling and mental health. Review diagnostic categories of mental illness. Use appendix 1 from A Christian Guide to Psychiatric Medication.

Lesson 14. Week 14 (11/24/2020) Continued discussion of historical significance of assessment in Counseling practice- 2F7 a.) Risk management with aggressive patients, self-harm and harm directed to others. Discuss trauma and abuse issues, such as Domestic Violence, and child abuse issues. Duty to warn issues as addressed in HIPAA guidelines This covers CACREP Core standards: 2F7, a. b. c. history, understanding core symptoms patterns and understanding which conditions are higher risk for aggregation toward self or others. Review for final exam.
Week 15 (12/01/2020) **READING WEEK**

Week 16 (12/08/2020) **FINAL EXAM** This covers CACREP Core Standards:
2F7 a. Historical perspective of understanding diagnosis using the nomenclature of mental illness and how to conceptualize syndrome patterns that make up various diagnoses.
2F7 b. Understanding core symptoms patterns to assess in an initial interview session to direct treatment planning.
2F7 c. Understanding which conditions have higher risk of aggression, self-harm, and other directed harm.

Section 5 Foundations:
5F, c. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning.
5F, d. **Neurobiological and medical foundation and etiology of addiction and co-occurring disorders.**

Section 5 Contextual Dimensions:
5CD, b. Etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders.
5CD, d. Diagnostic process including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders, (DSM-5 of the American Psychiatric Association), and the International Classification of Diseases (ICD).
5CD, e. **Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders.**
5CD, f. Impact of crisis and trauma on individuals with mental health diagnoses.
5CD, g. Impact of biological and neurological mechanisms on mental health.
5CD, h. Classifications, indications, and contraindications of commonly prescribed psychopharmacologic medications for appropriate medical referral and consultation.

**Methods of Instruction in this Course:**

This course will use lectures attended by students in the physical classroom (health conditions permitting) and students attending via synchronous video (Zoom) conference at the same time. Textbook readings are included along with additional readings and review of other resources. Discussion will be conducted relating to assigned readings and lecture content. Class presentations prepared by students to show symptom patterns for various mental health conditions will afford students opportunity to engage in diagnostic work during class sessions. The classroom review of symptoms patterns will be performed by classroom interaction. Student participation will constitute a Pass/Fail score for the classroom interaction. This scoring for participation may be used to adjust final grades that are close to one grade level or another. Resources and other items pertaining to the class and lessons will be on the course website.
**Required Textbooks:**

The Intelligent Clinician’s Guide to the DSM-5, Joel Paris MD, Oxford University Press, April 2013

*DSM-5 Diagnostic and Statistical Manual of Mental Disorders, 5th edition (American Psychiatric Press.)*


**Disability Accommodation Policy and Procedure Statement:**

Consistent with the Americans with Disabilities Act (ADA) and it is the policy of Pentecostal Theological Seminary to provide reasonable accommodations when requested by a qualified applicant or employee with a disability, unless such an accommodation would cause an undue hardship. The policy regarding requests for reasonable accommodation applies to all aspects of employment, including the application process. If reasonable accommodation is needed, please contact the Academics Office at academics@ptseminary.edu. (This is a continuation of the 1973 Federal Rehabilitation Act, with Section 504 accommodations guidelines).

**Grading Scale and Criteria Conversion to Numeric Percentage and Letter Grade**

<table>
<thead>
<tr>
<th>Numeric</th>
<th>Criteria</th>
<th>Definition</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Information Gained (Knowledge)</td>
<td>Information gained, demonstration of usable knowledge of pertinent data, accurately assembled and organized (to include terms, ideas, theories, dates, names, events, people, places, institutions, processes, documents, etc.</td>
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<td>2</td>
<td>Ability to Use Methodology (Skills)</td>
<td>Ability to use Methodology, demonstration of ability to use advantageously the tools/resources of that particular discipline in a way that is fruitful for that course. Ability to Communicate – demonstrate ability to organize and communicate material pertinent to subject area, including written and, where applicable, verbal skills. Evidence of Originality, demonstration of fresh &amp; new insights into subject matter and/or its methodology and application.</td>
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<tr>
<td>3</td>
<td>Ability to Communicate (Formation)</td>
<td>Personal, spiritual and ministry formation and dispositions as well as professional propensities and dispositions, development and leadership advocacy</td>
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</table>
Evidence of Originality (Praxis)

Not only practice but theological, ministry, professional and personal reflection and performance.

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<thead>
<tr>
<th>Letter Grade</th>
<th>Numeric</th>
<th>Minimum %</th>
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<tbody>
<tr>
<td>A</td>
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<td>96</td>
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<tr>
<td>A-</td>
<td>3.7</td>
<td>91</td>
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<tr>
<td>B+</td>
<td>3.3</td>
<td>88</td>
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<tr>
<td>B</td>
<td>3</td>
<td>84</td>
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<tr>
<td>B-</td>
<td>2.7</td>
<td>81</td>
</tr>
<tr>
<td>C+</td>
<td>2.3</td>
<td>78</td>
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<tr>
<td>C</td>
<td>2</td>
<td>74</td>
</tr>
<tr>
<td>C-</td>
<td>1.7</td>
<td>71</td>
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<tr>
<td>D+</td>
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<td>66</td>
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<td>D</td>
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<td>61</td>
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<td>F</td>
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Quizzes and Final Exam are taken online via Populi.

Student Rating Form for the Course: Prepared at end of course by professor.

These areas reflect competencies in counseling learned in this course that are correlated with the MACMHC Program Learning Outcomes, this Course’s Course Learning Outcomes, and CACREP Standards that apply to this course.

<table>
<thead>
<tr>
<th>#</th>
<th>Area</th>
<th>Rating</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Develop, critique &amp; revise information and data-generation needed to operate a counseling practice.</td>
<td></td>
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<tr>
<td>2</td>
<td>Demonstrate knowledge regarding key issues associated with diagnosis DSM-5 single listing system.</td>
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<tr>
<td>3</td>
<td>Process working understanding of major categories of disorders described with the most recent edition of the DSM.</td>
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<td>4</td>
<td>Conduct an initial bio-psychosocial assessment and Mental Status Examination.</td>
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<td>5</td>
<td>Render an appropriate differential diagnosis consistent with the most current edition of the DSM that is both developmentally and culturally appropriate.</td>
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<td></td>
<td>Develop appropriate treatment plans for use in respective counseling sessions.</td>
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<tr>
<td>7</td>
<td>Advocate for clients by communicating with third-party payers regarding client needs, treatment plans, and progress.</td>
<td></td>
</tr>
</tbody>
</table>

**Bibliography**

- DSM-5 American Psychiatric Association
- The Intelligent Clinician’s Guide to the DSM-5, Joel Paris MD, Oxford University Press, April 2013
- The Devil, Disease and Deliverance, John Christopher Thomas, 2010
- Sexual Abuse, Adele Mayer, 1985
- The Battered Child, Ray E. Helfer and Ruth S. Kempe, 1987
- Child Abuse and Neglect a Medical Reference, Norman S. Ellerstein, editor, 1981
- Interpreting Psychological Test Data, Joseph Gilbert, 1980
- Buros Mental Measurement Yearbook