



**COUN 6001 Advanced Assessment and  
Diagnosis in Counseling**  
Spring 2021  
Wednesdays 5:15-7:45

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**Course Description:**

Process of assessment and diagnosis as it applies to the counseling process. This includes but is not limited to: diagnostic criteria, bias in diagnosis, cultural issues in diagnosis, assessment in the diagnostic process, and treatment planning.

**Methods of Instruction**

The content of this course will be delivered through assigned readings, seminar discussions multimedia presentations, case presentations, and small group discussion.

**Course Objectives**

1. Historical perspectives concerning the nature and meaning of assessment and testing in counseling (CACREP II.F.7.a)
2. Methods of effectively preparing for and conducting initial assessments (CAFREP II.F.7.b)
3. Identify and apply ethical and legal guidelines pertaining to diagnosis (CACREP II.F.7.g.)
4. Use of symptom checklists, and personality and psychological testing (CACREP II.F.7. k)
5. Use of assessment results to diagnose developmental, behavioral and mental disorders (CACREP II.F.7.l)
6. Psychological tests and assessments specific to clinical mental health counseling (Clinical Mental Health V.C.1.e)
7. Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* and the International Classification of Diseases (ICD) (Clinical Mental Health V.C.2.d; V.D.2.f)
8. Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation

(Clinical Mental Health V.C.2.h)

9. Common medications that affect learning, behavior and mood in children and adolescents (Clinical Mental Health V.G.2.h)
10. Use of assessment for diagnostic and intervention planning purposes (CACREP II.F.7.e)
11. Ethical and culturally relevant strategies for selecting, administering, and interpreting assessment and test results (CACREP II.F.7.m)
12. Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders (Clinical Mental Health Counseling V.C.2.e)
13. Impact biological and neurological mechanisms on mental health (Clinical Mental Health V.C.2.g.)

**Required Text:**

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: American Psychiatric Publishing.

**Recommended Text:**

Morrison, James. (2014). *DSM-5 made easy: The clinician's guide to diagnosis*. New York, New York: Guilford Publications.

**STUDENT EXPECTATIONS**

Expectations for this class include the following:

1. **Be Prepared:** Students are expected to come to class prepared for any discussions or activities that may occur by **reading all assigned material** and by bringing any written or electronic assignments required for class.
2. **Be Present and On Time:** Students are expected to attend each class, be on time, and remain until the end of class. Notify the professor in advance, if possible, when it is necessary to be absent, to be late, or to leave early. Points may be deducted at the discretion of the professor for absences or tardiness. Grades may also naturally suffer when students are not present for class.
3. **Remember Due Dates:** Students are expected to complete all assignments on time. Points will be deducted for late assignments. Overall assignment grade will be deducted 10% each day the assignment is late and no assignments will be accepted one week after due date. Any extenuating circumstances must be discussed with the professor **before** the due date. How these circumstances are handled is solely at the discretion of the professor.
4. **Submit Electronically:** All written assignments are to be submitted electronically as email attachments or within Moodle on or before the due date.

5. **Be Respectful:** Students are expected to be respectful and sensitive to beliefs and ideas that may be different from their own. Our class is representative of the diversity that students experience when working in the field of counseling or in any field or activity outside of the classroom. **One example of that respect is to refrain from having private conversations while others are addressing the class.**
6. **Be Electronically Respectful:** Students will refrain from using **cell phones or other electronic devices** during class time, **except** in the activity of taking notes. You may be asked to completely refrain from using electronic devices in class **or to leave class** as a result of texting, answering phone calls, browsing social media, or surfing the internet. Please **silence all phones** during class time.
7. **APA Style:** All written work must be typed using the formatting style outlined in the manual published by the American Psychological Association (APA). You will need to purchase a current APA style manual and become familiar with the formatting procedures for font, margins, citations, references, et al. By the middle of the semester, you are expected to be able to create APA formatted documents. Grades on written work prepared outside of class may be reduced as a result of incorrect formatting, grammar, sentence or paragraph structure, and frequent typos or misspellings. **Please get help** if you are having a difficult time with writing skills.
8. **Have Fun:** Students are expected to have fun learning about the subject matter.

#### **ONLINE TRACK:**

The content of this course will be delivered in synchronous and asynchronous formats through assigned readings, online lectures, seminar discussions, multimedia presentations, case presentations, and small group discussion. Online students will be required to either attend the in-class sessions synchronous learning via Teams or watch the recording of class within 7 days. Students will lose points on participation and may be dropped a letter grade for more than 3 absences from class, or not watching class via Teams in a timely manner.

#### **Assignments**

- A. **Quizzes (100 points; 25% of final grade)** (*Course Objective 1, 2, 3, 6, & 7*)  
There will be 5 reading quizzes through the semester. The quizzes will focus on the assigned reading materials, as well as information contained and discussed in the PowerPoint slides. Each quiz will be worth 20 points.
- B. **Mid-term (100 points; 25% of final grade)** (*Course Objective 1, 2, 3, 6,7,8, 9, 12*)

The midterm will consist of a series of written case vignettes. You will derive and justify a DSM-5 diagnosis for each client, including your reasoning and any differential diagnoses considered.

**C. Final (100 pts; 25% of final grade) (Course Objective 1, 2, 3, 6, 7,8, 9, 12)**

The final will consist of a series of clinical case vignettes and short answer essay questions. You will be required to derive and justify a DSM V diagnosis, to include a differential diagnosis (if indicated) for each clinical case.

**D. Diagnosis and Treatment Plan Project (100 pts; 25% of final grade) (Course Objective 2, 4, 5, 6, 7, 10, 11, 12, 13)**

Students will select a character from a movie (the list will be provided) to serve as the basis for a comprehensive case study. See the addendum at the end of syllabus for a complete description.

*Note: this is a Key Performance Indicator (Standard CACREP II.F.7)*

All assignments are due on the announced date. Assignments are due at the *start* of class. Late assignments will be penalized 5% for each day it is late. Exceptions to this policy will only be given in cases of medical or personal emergencies.

### Assignment Point Breakdown

Quizzes	100 points
Mid-term Exam	100 points
Final Exam	100 points
<u>Diagnosis and Treatment Plan</u>	<u>100 points</u>
<b>Total Points</b>	<b>400 points</b>

Grading Scale	
A	360-400
B	320-359
C	280-319
D	240-279
F	<240

### The LaGrange College Honor Code

Students are expected to abide by the Honor Code, which is listed below. All assignments are to be completed by the student and in the student's own words. Students who use any source other than the text must give full credit to that source. Direct quotes, even from the text, must be shown within quotation marks and accompanied by the author and page number where the quote can be found. A reference list must be provided at the end of the student's work.

Students are encouraged to study or consult with classmates as they complete daily or weekly class preparation, but they should not share any information in the taking of an exam.

**Violations of these policies will be turned over to the Honor Council** for further action as specified in the Student Handbook:

*As a member of the student body of LaGrange College, I confirm my commitment to the ideals of civility, diversity, service, and excellence. Recognizing the significance of personal integrity in establishing these ideals within our community, I pledge that I will not lie, cheat, steal, nor tolerate these unethical behaviors in others. I pledge that I have neither given nor received unauthorized help on this examination or assignment, nor have I witnessed any violation of the Honor Code.*

**Accommodation Policy and Procedures:**

**In compliance with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act, LaGrange College will provide reasonable accommodations of all medically documented disabilities. If you have a disability, please contact Brandi Cameron, Coordinator of Learning Disability Support Services at 706-880-8269. She is located in Smith Hall in room 121.**

Date	Topic	Assigned Reading	CACREP Standard
Week 1 Feb 10 <sup>th</sup>	Syllabus/Class Overview Introduction to DSM V Mental Status Exam/Clinical Interviewing Differential Diagnosis	Syllabus	II.F.7.a V.A.2.d II.F.7.b V.A.1.e V.d.2.1
Week 2 Feb 17 <sup>th</sup>	Neurodevelopment Disorders Neurocognitive Disorders Other Mental Disorders  Hybrid Week	DSM V- pages 31-86 DSM V- pages 591-643 DSM V- pages 707-708	II.F.7.b. V.F.7.k II.F.7.1 V.A.1.e V.A.1.e
Week 3 Feb 24 <sup>th</sup>	Cultural Formulation Culture Bound Syndromes Other Conditions that may be a focus of clinical attention  Schizophrenia Spectrum and Other Psychotic Disorders <b>Quiz 1</b>	DSM V- pages 87-122 DSM V- pages 715-727 DSM V- pages 87-122	V.A.2.c V.A.2.d V.D.2.h V.G.2.h
Week 4 March 3 <sup>rd</sup>	Anxiety Disorders Obsessive-Compulsive & Related Disorders  Hybrid Week	DSM V- pages 155-188 DSM V- pages 123-154	V.A.2.c V.D.2.h V.G.2.h

Week 5 March 10 <sup>th</sup>	Depressive Disorders Bipolar and Related Disorders  <b>Quiz 2</b>	DSM V-pages 189-234 DSM V-pages 235-290	V.A.2.d V.D.2.h V.G.2.h
<b>Week 6</b> <b>March 17<sup>th</sup></b>	<b>Midterm</b>	<b>Mid-term Exam</b>	
Week 7 March 24 <sup>th</sup>	Substance Related and Addictive Disorders Trauma & Stressor-Related Disorders Dissociative Disorders  <b>Quiz 3</b>	DSM V- pages 481-589 DSM V-pages 265-290 DSM V-pages 291-307	V.A.2.d V.D.2.h V.g.2.h
<b>Week 8</b> <b>March 31<sup>st</sup></b>	<b>Feeding and Eating Disorders</b> <b>Elimination Disorders</b> <b>Hybrid Week</b>	<b>DSM V- pages 329-354</b> <b>DSM V- pages 355-422</b>	<b>V.A.2.d</b>
Week 9 April 7 <sup>th</sup>	Somatic Symptom and Related Disorders Sleep-Wake Disorders Sexual Dysfunctions Gender Dysphoria  <b>Quiz 4</b>	DSM V- pages 309-327 DSM V- pages 361-422 DSM V- pages 423-450 DSM V- pages 451-459	V.A.2.d V.D.2.h V.G.2.h
<b>Week 10</b> <b>April 14<sup>th</sup></b>	<b>Disruptive, Impulse Control and Conduct Disorders</b> <b>Hybrid Week</b>	<b>DSM V- pages 461-480</b>	<b>V.A.2.d</b> <b>V.D.2.h</b> <b>V.G.2.h</b>
Week 11 April 21 <sup>st</sup>	Personality Disorders Paraphilic Disorders  <b>Quiz 5</b>	DSM V- pages 645-684 DSM V- pages 685-705  <b>Diagnosis &amp; Tx Plan Project Due</b>	V.A.2.d V.D.2.h V.G.2.h
<b>Week 12</b> <b>April 28<sup>th</sup></b>	<b>Final Exam</b>	<b>Final Exam</b>	



### Current Research Reading Material

- Cipani, E., & Schock, K. M. (2007). *Functional behaviorial assessment, diagnosis, and treatment*. Retrieved from <https://ebookcentral.proquest.com>
- Clements, P. T., Seedat, S., & Gibbings, E. N. (2015). *Mental health issues of child maltreatment*. Retrieved from <https://ebookcentral.proquest.com>
- Ekleberry, Sharon. *Treating Co-Occurring Disorders : A Handbook for Mental Health and Substance Abuse Professionals*, Routledge, 2004. ProQuest Ebook Central, <https://ebookcentral.proquest.com/lib/lagrange/detail.action?docID=1656202>.
- Paulman, Paul M., et al. *Taylor's Differential Diagnosis Manual*, Wolters Kluwer, 2013. ProQuest Ebook Central, <https://ebookcentral.proquest.com/lib/lagrange/detail.action?docID=3417901>
- Cochran, S. V., & Rabinowitz, F. E. (2000). *Men and Depression : Clinical and Empirical Perspectives*. Academic Press.
- Hohenshil, T. H. (1996). Role of assessment and diagnosis in counseling. *Journal of Counseling and Development: JCD*, 75(1), 64.
- Seligman, L. (2011). *Diagnosis and treatment planning in counseling*. Springer Science & Business Media.



Course Assignment	Evaluation	Percentage of Grade	Course Objectives
Diagnosis and Treatment Plan Project	100	25%	CO 4, 6, & 7
Quizzes	100	25%	CO 1, 2, 3, 6, & 7
Mid-term	100	25%	CO 1, 2, 3, 6, & 7
Final	100	25%	CO 1, 2, 3, 6, & 7
<b>Total</b>	<b>400</b>	<b>100%</b>	

## Diagnosis and Treatment Plan Project

Students will select a character from a movie (the list will be provided) to serve as the basis for a comprehensive case study. Students will use what they know of this character to construct:

1. Presenting problem
2. Biopsychosocial history
3. Mental status report
4. DSM-5 diagnosis/diagnoses
5. Treatment goals and objectives
6. Evidence-based treatment plan and justification
7. Differential diagnosis – This section is an opportunity for you to offer challenges to the diagnosis you proposed in “4” above. I am interested in any alternative explanations of the client’s symptoms, especially those that do not fit in the medical model/DSM philosophy. The following are questions that may get you started and guide you in this section.
  - a. What is your client’s assessment of the presenting concerns? Does he/she believe he/she has a “mental disorder?”
  - b. In what ways does your client differ from the DSM criteria? For example, what are some behaviors that contradict the diagnosis you selected?
  - c. How might the client’s gender/cultural background/sexual orientation affect his or her diagnosis and treatment plan?
  - d. What historical-social-political-cultural-familial-religious issues do you need to consider before applying this diagnosis and developing the treatment plan? Are there any alternative explanations for the client’s behavior, taking into account these contextual factors?

*\*Students are welcome to format treatment documents (e.g., history, mental status, diagnosis, treatment goals, treatment plan) as they would in a professional setting. Text and rationale for the above topics should be in narrative form and formatted according to APA guidelines.*

All data included in the report must be written using professional language, based on evidence provided in the media source, and supported with a sound clinical rationale. Students are encouraged to consider and document multiple sources of information (e.g., client report, collateral report, observation). When information is not available, the student should indicate that additional information is needed and propose methods for gathering such information. Evidence of differential diagnosis should be provided. Finally, students should support rationale for treatment plan choices by incorporating data from at least six scholarly sources (e.g., DSM-5, treatment manual, journal article).

The grading rubric is as follows:

- Attention to presenting problem, biopsychosocial history, mental status (20 points)
- DSM-5 diagnosis and justification (20 points)
- Treatment goals/objectives (10 points)
- Treatment plan and justification (10 points)
- Attention to historical-social-political-cultural issues in all of above (20 points)

- Differential diagnosis (20 points)
- Incomplete or poor APA style and overall writing style can reduce your grade



## Movie List

<i>Forrest Gump</i>	<i>The King's Speech</i>
<i>One Flew Over the Cuckoo's Nest</i>	<i>A Beautiful Mind</i>
<i>Radio</i>	<i>The Fisher King (1991)</i>
<i>I am Sam</i>	<i>Awakenings (1990)</i>
<i>Shutter Island</i>	<i>The Soloist</i>
<i>Any Day Now</i>	<i>Take Shelter (2011)</i>
<i>There's Something About Mary</i>	<i>Black Swan (2010)</i>
<i>Adam (2009)</i>	<i>He Loves me, He Loves Me Not (2002, France)</i>
<i>Breaking and Entering (2006)</i>	<i>The Beaver (2011)</i>
<i>Rain Man</i>	<i>It's a Wonderful Life (1946)</i>
<i>Silent Fall (1994)</i>	<i>Silver Linings Playbook (2012)</i>
<i>To Kill A Mockingbird</i>	<i>Mr. Jones</i>
<i>Thumbsucker (2005)</i>	<i>Running with Scissors (2006)</i>
<i>Michael Clayton (2007)</i>	<i>Boy Interrupted (2009)</i>
<i>House of Sand and Fog (2003)</i>	<i>The Hours (2002)</i>
<i>Dead Poets Society (1989)</i>	<i>The Aviator (2004)</i>
<i>Matchstick Men (2003)</i>	<i>As Good As It Gets (1997)</i>
<i>Somethings Gotta Give (2003)</i>	<i>Panic Room (2002)</i>
<i>Kissing Jessica Stein (2002)</i>	<i>The Dryland (2010)</i>
<i>The Manchurian Candidate (2004)</i>	<i>The Upside of Anger (2005)</i>
<i>The Three Faces of Eve (1957)</i>	<i>What About Bob?</i>
<i>Psycho (1960)</i>	<i>Sybil (1976)</i>
<i>Swimming Pool (2002)</i>	<i>Frankie and Alice (2010)</i>
<i>Nurse Betty (2000)</i>	<i>Insomnia (2002)</i>
<i>Lost In Translation (2003)</i>	<i>Girl Interrupted (1999)</i>
<i>What's Eating Gilbert Grape? (1993)</i>	<i>Boys Don't Cry (1999)</i>
<i>Soldier's Girl (2003)</i>	<i>We Need to Talk About Kevin (2012)</i>
<i>My First Mister (2001)</i>	<i>Little Miss Sunshine (2006)</i>
<i>Flight (2012)</i>	<i>Smashed (2012)</i>
<i>I'm Dancing As Fast As I Can (1982)</i>	<i>Memento (2000)</i>
<i>The Notebook (2004)</i>	<i>No Country For Old Men (2007)</i>
<i>Lakeview Terrace (2009)</i>	<i>Reign Over Me (2007)</i>
<i>Blue Jasmine (2013)</i>	<i>Leap Year (2010)</i>
<i>Kill Bill (2003; 2004)</i>	<i>What About Bob? (1991)</i>
<i>When A Man Loves A Woman (1994)</i>	<i>The Lost Weekend (1945)</i>
<i>Iris (2010)</i>	<i>Away From Her (2007)</i>
<i>A Clockwork of Orange (1971)</i>	

<b>Rubric for Differential Diagnosis and Treatment Plan Project</b>			
	<b>High Mastery</b>	<b>Medium Mastery</b>	<b>Low Mastery</b>
Attention to Presenting Problem, biopsychosocial history, mental status exam. (20pts)	A thorough description of character's presenting problem was discussed, including complete description of biopsychosocial history and mental status exam.	A summary is presented that somewhat describes the character's presenting problem, included a limited description of biopsychosocial history and mental status exam.	A minimal summary is presented that somewhat describes the character's presenting problem, included a limited description of biopsychosocial history and mental status exam.
DSM-5 diagnosis and Justification for diagnosis chosen. (20pts)	Information is provided that demonstrates the student's understand of the DSM-5 diagnostic criteria. This information is relevant and the diagnosis is justified for the specific character's presenting problem and other information provided.	Some information is provided that somewhat demonstrates the student's understand of the DSM-5 diagnostic criteria. This information is relevant and the diagnosis is justified for the specific character's presenting problem and other information provided.	Little of no information is presented to provide the student's understanding of the DSM-5 diagnostic criteria and justification for the specific character's presenting problem and other information provided.
Treatment Goals and Objectives (10pts); Treatment plan and Justification (10pts)	Treatment goals, objectives, and interventions are thoroughly described and rooted in evidenced practices relevant for counseling setting and presenting problem.	Treatment goals, objectives, and interventions are briefly described and somewhat rooted in evidenced practices relevant for counseling setting and presenting problem.	Treatment goals, objectives, and interventions are minimally described and do not appear rooted in evidenced practices relevant for counseling setting and presenting problem.
Differential Diagnosis (20pts)	A thorough description of	A brief description of differential diagnoses	A minimal description of

	differential diagnoses as discuss with a complete explanation of client's symptoms and DSM philosophy.	as discuss with a complete explanation of client's symptoms and DSM philosophy.	differential diagnoses as discuss with a complete explanation of client's symptoms and DSM philosophy.
Attention to Historical-Social-Political-Cultural issues in all of the above. (15pts)	A thorough description of all cultural factors as it relates to the presenting problem, treatment plan, and diagnostic criteria was discussed.	A brief description of all cultural factors as it relates to the presenting problem, treatment plan, and diagnostic criteria was discussed.	A minimal description of all cultural factors as it relates to the presenting problem, treatment plan, and diagnostic criteria was discussed.
APA Style and Overall Writing Style (5pts)	Well-written with no writing, spelling, or punctuation errors. In APA style.	Fairly well-written with few errors. APA style formatting errors.	Poorly written with many errors. Not in APA style formatting or numerous errors.