

**THE UNIVERSITY OF TEXAS AT AUSTIN
SCHOOL OF SOCIAL WORK**

Course Number:	SW 393R1	Instructor's name:	Cynthia Franklin, Ph.D
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Unique Number:	61040	Office Number:	SSW 3.106
Semester:	Spring, 2002	Office Phone:	471-0533
Meeting Time/Place:	Wednesday, 2:30–4:30pm SW 2.112	Office Hours:	Wed. 1:00-2:00 or by appointment.

**CLINICAL ASSESSMENT AND DIFFERENTIAL
DIAGNOSIS**

I. Standardized Course Description

This course will focus on the incidence, etiology, and assessment of dysfunctional behavior patterns with children, adolescents, adults, and families. Students will learn models of assessment to evaluate human functioning throughout the lifecycle, with emphasis on vulnerable and diverse populations. Major nosological systems, such as Diagnostic and Statistical Manual of Mental Disorders and the International Classification of Diseases, and other schemes for assessing and understanding human behavior, will be covered.

This course is required of MSSW students in the Clinical concentration.

II. Standardized Course Objectives

By the end of the semester, students should be able to:

1. Demonstrate familiarity with biological, psychosocial, and cultural theories on the etiology of dysfunctional behavior patterns;
2. Demonstrate the ability to apply multiple methods of assessment, including those developed through classificatory schemes, standardized measures, and qualitative typologies;
3. Describe the relationship between assessment and intervention in social work practice;
4. Demonstrate the ability to adapt assessment models to reflect the needs of persons of diverse social, economic, cultural or ethnic backgrounds, including understanding issues of gender, sexual orientation, and ability;
5. Critically evaluate different theoretical and assessment models as to their efficacy in given situations. This includes: a) the adequacy of the research and knowledge base; b) the range of applicability; c) the value and ethical issues, including the student's own value system, and d) the policy implications involved in assessment and delivery of services;

6. Demonstrate an understanding of the limitations in using classification schemes in understanding human behavior and the danger of mislabeling people, particularly those from at-risk populations.

III. Teaching Methods

The primary teaching methods will be lectures, discussion, and group exercises. Guest lecturers, group presentations, and audio-visual presentations will also be utilized.

IV. Required and Recommended Texts, and Materials

Required:

American Psychiatric Association (APA). (2000). Diagnostic and statistical manual of mental disorders (4th Edition, Text Revision). Washington, DC: Author.

Schatzberg, A..F. & Nemeroff, C.B. (2001). Essentials of Clinical Psychopharmacology. Washington, DC American Psychiatric Association (APA).

ALL OTHER READINGS ON-LINE AT: <http://www.lib.utexas.edu/> Go to E-Reserves and pull down menu for Department and go to Social Work. Pull down menu for professor and go to my name. See the course Clinical Assessment and Differential Diagnosis and enter the pass word: diagnosis.

V. Course Requirements

The following course requirements will be completed during the semester, with a grade given for each assignment. Grading will be based on the final averages of cumulative grades across assignments and the students participation and attendance in the class.

Examinations

Two in class diagnostic case assessment exams will be given during the course of the semester (see course schedule for dates). Both exams will consist of making an accurate diagnosis of case vignettes and discussion of other differential diagnosis that are to be ruled out in the making of the diagnosis. Students will also be expected to list appropriate psychiatric medications that may be used to treat these diagnosis. Students will be allowed to use the DSM IV-TR during the exam but no other notes or aides may be used. The exams will be short answer and consist of three to five case vignettes.

Paper

Each student is to select a DSM IV-TR diagnosis and write a scholarly paper focused on assessment and treatment. A typed, well-written paper is to be submitted. The paper should be written in APA format (4th edition) and should not exceed 15 typewritten pages (excluding references and title page). It is recommended that students start on this assignment right away because the professor expects a thorough search of the literature in social work, psychology, psychiatry and related fields in order to demonstrate that one has mastered the up-to-date, current knowledge and methods concerning assessment and treatment of the problem area. A search of the literature should include journal articles as well as pertinent book chapters and monographs. Emphasis should be given to the most recent (within the past 5 to 7 years) literature and studies. Of course, seminal pieces that fall outside of this time parameter should still be included. In addition to the formal

paper, students will prepare an annotated bibliography for distribution to their classmates. Papers will be graded on both content and writing style; APA format will also be graded. An outline of the paper is provided below:

- I. Introduction/Statement of the Problem. This should include specification of your problem area of interest. For example, “depression” can mean many things. You would need to clarify if, by “depression,” you meant Major Depressive Disorder, Dysthymic Disorder, etc. Also, set parameters (e.g., age, gender, etc.) on the problem you are assessing. (For example, “This paper addresses adolescent females, ages 13 to 17, with a diagnosis of Major Depressive Disorder.”)
- II. Critical examination of assessment methods and instruments relevant to the particular problem area.
 - A. What are the preferred methods to assess this problem. If you were a social worker in the field, based on your review of the literature, how would you assess for the existence and severity of this problem in a client system.
 - B. Standardized measures, such as rating scales and self-report instruments.
 1. Description (e.g., This is a 25-item standardized self-report instrument, measured on a 5-point Likert scale, that measures level of depression).
 2. Summary of reliability (i.e., coefficients, standard error of measurement) and validity (i.e., construct, concurrent known-instruments, known-groups, factor analysis) characteristics of each available instrument.
 3. Discussion of clinical utility of assessment tools and how they are being used in assessment and treatment of clients. Identifying that a measurement tool possesses sound psychometric properties does not necessarily preclude its clinical utility. Describe which tool(s) you would use in the field and why.
- III. A review of the literature regarding the efficacy of treatment approaches with the problem area. The primary focus here should be on outcome studies.
- IV. An overview of any relevant contributions of diversity issues to the understanding of the assessment and treatment of the problem area.
- V. Conclusions that summarize the knowledge discussed in the paper and point out criticisms in available assessment methods.

Final grades:

COURSE GRADING CRITERIA:

Diagnostic Case Assessments: 20% each (40% total)		90-100% = A 80-89% = B 70-79% = C 60-69% = D Below 60% = F
Problem Area Assessment Methods Paper: 60%		
Total = 100%		

Grading Scale: (Grades are rounded up to the next number at .5). Grading of all written assignments will take into account the quality of the writing as well as the content. The APA format should be followed. Written material should be carefully proof-read and corrected for errors in punctuation, typographical errors, and spelling errors. Good writing requires a reiterative process that must be followed if quality is to improve. It is a good idea to read your paper several times and if possible have someone else read it.

ASSIGNMENT DUE DATES:

Diagnostic Case Exams due	February 20
	April 3
Research Paper due	May 1

Graduate students must earn a minimum grade of C in the course for credit; also, graduate students must maintain an overall B average.

VI. Class Policies

1. It is important for social work practitioners to be punctual in both attendance and in meeting deadlines. Therefore, class attendance is expected, as is handing in assignments on time. Students will lose 3 points for each day that an assignment is late. Any adjustments in due dates **MUST** be discussed with the instructor at least 24 hours **PRIOR** to the regularly scheduled date.
2. Students who fail to attend class on a regular basis (missing more than one class without a valid excuse, e.g., medical documentation) may receive one course grade lower than their final grade when points are totaled. Students who are one or two points below the cut-off for a letter grade may receive the higher grade at the end of the semester based on attendance/participation.
3. Social work practitioners assume responsibility for themselves. Therefore, it is expected that work handed in will be your own. Scholastic dishonesty, including plagiarism and cheating during examinations, violates social work values and will result in recommendation for dismissal from the social work program and a referral to the Dean of Student's Office.
4. Social work practitioners are assertive and function as team members. Therefore, feedback about the course is welcome and the course will be viewed as a joint effort between students and the instructor.
5. Social work practitioners respect others. Therefore, differences in values, opinions, and feelings of class members and guest speakers will be respected.
6. Because of the length and scope of this assignment students may work with one partner (but no more than one) and develop a joint paper. If a joint paper is written it is expected that each student will contribute equally to the research and writing of the paper. A summary of each student's contribution must be included along with the paper.

Course Schedule

Date	Description	Text / Readings
Week of 1/16	Introduction Overview of Syllabus Overview of Course	Read Syllabus
Week of 1/23	Introduction to Making Clinical Diagnosis: Assessment and Classification Systems DSM Multiaxial system Commonly Used Psychological Measures	DSM-IV-TR (pp. 1-27) Durand & Barlow, <i>Chapter 3 Clinical Assessment, Diagnosis and Research Methods</i> Brouillard, <i>Popular Psychological Tests</i> Graham, <i>Clinical Scales of the MMPI2</i> Millon & Davis, <i>Millon Clinical Multiaxial Inventory III</i> Millon & Davis, <i>Millon Adolescent Clinical Inventory III (MACI)</i> Koocher, <i>Assessing the Quality of a Psychological Test Report</i> Raskin & Lewandowski, <i>The construction of disorder as human enterprise</i>

Week of 1/30	Biopsychosocial understanding of mental disorders. The brain and behavior and common mechanisms for understanding the effects of medications Mental Status Examination	Baker & Trzepacz, <i>Mental Status Examination</i> Brown, <i>Discomforts of the Powerless: Feminist constructions of distress</i> Durand & Barlow, <i>An Integrative Approach to Psychopathology</i> Jordan & Franklin, <i>Assessment Models</i>
Week of 2/6	Disorders usually diagnosed in infancy, childhood or adolescence ADHD & Conduct Disorders Medications used with children Paper topic is due	DSM-IV-TR (39-134) Schatzberg & Nemeroff, <i>Treatment of childhood and adolescent disorders and Stimulants in Psychiatry</i> Jordan & Franklin, <i>Children & Adolescents, Family Systems</i>
Week of 2/13	Delirium, Dementia, Amnestic, and other Cognitive Disorders Mental Disorders due to a General Medical Condition	DSM-IV-TR (135-190) Schatzberg & Nemeroff <i>Treatment of noncognitive symptoms in Alzheimer's Disease and other dementias</i>
Week of 2/20	Substance Related Disorders In class, Diagnostic Case Exam I	DSM-IV-TR (191-296) Schatzberg & Nemeroff, <i>Treatment of substance-related disorders</i>
Week of 2/27	Schizophrenia & other psychotic disorders Antipsychotic medications Paper, preliminary bibliography due (Send to me on e-mail, electronic copy by this date)	DSM-IV-TR (297-344) Schatzberg & Nemeroff, <i>Antipsychotic medications. Atypical antipsychotics. Treatment of extrapyramidal side effects and Treatment of Schizophrenia</i>

Week of 3/6	Mood Disorders Major Depressive Disorder Antidepressant Medications	DSM-IV-TR (345-428) Schatzberg & Nemeroff <i>Tricyclics and tetracyclics. Selective serotonin reuptake inhibitors. Monoamine oxidase inhibitors and Treatment of depression and Electroconvulsive therapy</i>
Week of 3/13	HAPPY SPRING BREAK	
Week of 3/20	Mood Disorders Anti-manic Medications	DSM-IV-TR (345-428 cont'd) Schatzberg & Nemeroff <i>Drugs for Treatment of Bipolar Disorder, Lithium. Antiepileptic drugs. Calcium channel antagonists as novel agents for the treatment of bipolar disorder and Treatment of Bipolar Disorder</i>
Week of 3/27	PTSD and other Anxiety Disorders Anxiolytic Medications	DSM-IV-TR (429-484) Schatzberg & Nemeroff , <i>Trazodone, Nefazodone, Bupropion, and Mirtazapine. Benzodiazepines. Nonbenzodiazepine anxiolytics. Venlafaxine.</i>
Week of 4/3	Dissociative Disorders In class, Diagnostic Case Exam 2	DSM-IV-TR (519-534)
Week of 4/10	Eating Disorders Sleep Disorders Paper outline due (Send to me electronic copy by this date).	DSM-IV-TR (583-678) Schatzberg & Nemeroff <i>Sedative-hypnotics, Treatment of eating disorders.</i>

Week of 4/17	Personality Disorders	DSM-IV-TR (685-730) Schatzberg & Nemeroff <i>Treatment of personality disorders</i>
Week of 4/24	SCOTT HENGLER WORKSHOP	
Week of 5/1	Adjustment Disorders and V codes Paper Due, Annotated bibliography for class participants.	DSM-IV-TR (679-684, 743)

Bibliography

Required Books:

American Psychiatric Association (APA). (2001). Diagnostic and statistical manual of mental disorders (4th Edition-Text Revision). Washington, DC: Author.

Schatzberg, A.F. & Nemeroff, C.B. (2001). Essentials of clinical psychopharmacology. Washington, DC American Psychiatric Association (APA).

Required Readings On-Line

Baker, R.W. and Trzepacz, P.T. (1998). Mental status examination. In G.P. Koocher, J.C. Norcorss, and S.S. Hill III (eds.) Psychologists desk reference. New York: Oxford University. pp 6-11.

Brouillard, P. (1998). Popular psychological tests. In G.P. Koocher, J.C. Norcorss, and S.S. Hill III (eds.) Psychologists desk reference. New York: Oxford University. pp. 176-181.

Brown, L.S. (2000). Discomforts of the powerless: Feminist constructions of distress. In R.A. Neimeyer & J.D. Raskin (eds) Constructions of disorder. pp. 287-308.

Durand D. H., & Barlow, M. V. (2000) Abnormal psychology: An introduction (2nd ed.). Pacific Grove, CA: Brooks/Cole. [Chapters: Chapter 2, An Integrative Approach to Psychopathology and Chapter 3, Clinical Assessment, Diagnosis and Research]

Graham, J.R. (1998). Ckinical scales of the MMPI-2. In G.P. Koocher, J.C. Norcorss, and S.S. Hill III (eds.) Psychologists desk reference. New York: Oxford University. pp. 117-121.

Jordan, C. & Franklin, C. (1995). Clinical assessment for social workers. Chicago: Lyceum Press. [Chapters: Children & Adolescents, Family Systems, Assessment Models]

Koocher. G.P. (1998). Assessing the quality of a psychological testing report. In G.P. Koocher, J.C. Norcorss, and S.S. Hill III (eds.) Psychologists desk reference. New York: Oxford University. pp.169-171.

Millon, T. & Davis, R.D. (1998). Millon Clinical Multiaxial inventory (MCMI-III). In G.P. Koocher, J.C. Norcorss, and S.S. Hill III (eds.) Psychologists desk reference. New York: Oxford University. pp. 142-148.

Millon, T. & Davis, R.D. (1998). Millon Adolescent Clinical Inventory (MACI). In G.P. Koocher, J.C. Norcorss, and S.S. Hill III (eds.) Psychologists desk reference. New York: Oxford University. pp. 162-168.

Raskin, J.D., & Lewandowki, A.M. (2000). The construction of disorder as human enterrise. In R.A. Neimeyer & J.D. Raskin (eds) Constructions of disorder. pp. 15-40.