

## Week 2 - Discussion

No unread replies. No replies.

Your initial discussion thread is due on Day 3 (Thursday) and you have until Day 7 (Monday) to respond to your classmates. Your grade will reflect both the quality of your initial post and the depth of your responses. Refer to the Discussion Forum Grading Rubric under the Settings icon above for guidance on how your discussion will be evaluated.

### Initial Assessment

Prior to beginning work on this discussion, please read Chapters 2, 6, and 7 in *DSM-5 Made Easy: The Clinician's Guide to Diagnosis*. Additionally, please watch the video *Beer Is Cheaper than Therapy: Fort Hood's PTSD Problem*. [\(Links to an external site.\)](#)[Links to an external site.](#)

For this discussion, the patient for whom you wrote your transcript in the Week One Initial Call discussion has come to your office for a 15-minute initial assessment. As part of the intake process, you have asked the patient to fill out a biographical form that contains the same information included in the case study. Based on this information, propose three questions you would ask the patient to determine a diagnosis and treatment plan.

Provide a transcript of this brief initial session including your three questions and the answers you would expect the prospective patient to give. Beneath the transcript, provide a rationale for each of the three questions you proposed. Include the case study title you chose for your Week One Initial Call discussion post.

**Guided Response:** Review several of your colleagues' posts, and respond to at least two of your peers by 11:59 p.m. on Day 7 of the week. You are encouraged to post your required replies earlier in the week to promote more meaningful interactive discourse in this discussion.

Examine your colleague's transcript, and write an evaluation of the prospective patient's apparent symptoms and presenting problem(s) within the context of a theoretical orientation. Theoretical orientations are based on the personality theories you learned about in PSY615, and are referred to as "approaches" in *Abnormal and Clinical Psychology: An Introductory Textbook*.

Remember that symptoms may not be explicitly mentioned by the patient, but they may be inferred by the patient's presenting problem(s). Summarize views of these symptoms from at least two historical perspectives. For instance, how have these symptoms have been conceptualized and understood, historically? Finally, suggest diagnostic manuals and handbooks besides the *DSM-5* that might be used to assess this patient.

Continue to monitor the discussion forum until 5:00 p.m. Mountain Standard Time (MST) on Day 7 of the week, and respond to anyone who replies to your initial post.