### Subject Index

| AA. See Alcoholics Anonymous (AA) |
| ACA. See Affordable Care Act (ACA) |
| Acamprosate, 455 |
| Acculturation adjustment problems, 57 |
| Activities of daily living (ADLs), 247, 417 |
| Acute stress disorder (ASD), 309, 320 |
| AD. See Substance-related and addictive disorders |
| Addiction, 420. See also Substance-related and addictive disorders |
| ADHD. See Attention deficit hyperactivity disorder (ADHD) |
| Adjustment disorders, 309, 320–321 |
| ADLs. See Activities of daily living (ADLs) |
| Adolescence:  |
|   - bipolar disorder in, 236–238 |
|   - sexual activity and, 339 |
| Adolescents, crosscutting measurement and, 89 |
| Affordable Care Act (ACA), 419 |
| African Americans, 244 |
| Age:  |
|   - culture, gender-related information and, 47–53 |
|   - culture and other diagnostic factors related to, 57–59 |
|   - depressive symptoms and, 38 |
|   - differences in, alcohol and, 456 |
| Agoraphobia, 296 |
| AIDS:  |
|   - client consent and, 102 |
|   - support and, 142–143 |
| Akathisia, 81, 192–193 |
| Al-Anon, 453, 461 |
| Alcohol. See also Substance-related and addictive disorders |
| Brethalyzer and, 422–423 |
| differences in age and, 456 |
| excessive consumption of, common effects within family, 441 |
| gender differences, 456–457 |
| Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST), 424 |
| Alcohol and other drugs (AOD), 418, 457 |
| Alcoholics Anonymous (AA), 187, 452–453, 461, 501 |
| Alcohol-related problems, early recognition of, 458 |
| Alcohol use disorder, 221, 445–446 |
| Alcohol Use Disorders Identification Test (AUDIT), 424, 442 |
| Alogia, 157 |
| Alprostadil, 364 |
| Alternative therapies, schizophrenia and, 190 |
| Alzheimer’s disease, 457 |
| Anhedonia, 157, 208, 244–245, 247 |
| Anorexia nervosa:  |
|   - overview of, 536–538 |
|   - treatment plan, 538–539 |
| Antiadrenergic agents, 305–306, 335 |
| Antianxiety medications, 334 |
| Anticonvulsants, 234 |
| Antidepressant discontinuation syndrome, 41 |
| Antidepressants:  |
|   - annual sales of, 268 |
|   - bipolar disorder and, 234 |
|   - black box warnings and, 269 |
|   - crosscutting of symptoms and, 89 |
|   - major groups of, 269 |
|   - patient responses to, 269 |
|   - tricyclic, 305, 334 |
| Anti-Parkinson medications, 193, 194 |
| Antipsychotic agents, 305, 334 |
| Antipsychotic medication(s):  |
|   - general conditions and side effects, 193 |
|   - typical, 80, 192 |

*Antipsychotics* term, 80
Antisocial personality disorder (APD):
about, 476–477, 478
case example - case of David, 477
case example - case of Linda, 483
diagnostic label and, 15
malingering and, 85
Anxiety disorders:
comorbidity and, 221
DSM-5 and, 42
medication-related conditions and, 80
Anxiolytics, 461
AOD. See Alcohol and other drugs (AOD)
APD. See Antisocial personality disorder (APD)
APIE. See Assessed information, problems addressed, interventions provided, and evaluation (APIE)
Appendices, 44
Ascribed identity, 49
ASD. See Acute stress disorder (ASD); Autism spectrum disorder (ASD)
Asociality, 157
Assessed information, problems addressed, interventions provided, and evaluation (APIE), 113, 114
Assessment. See also Diagnostic assessment as collaborative process, 32–33
combination approach and, 33
culture and, 142
diagnosis and, 33
dimensional, 38–39
of disability, 91–92
of lethality, 72
psychological factors in, 72
reimbursement and, 32
social and environmental factors in, 73
ultimate purpose of, 34
ASSIST. See Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)
Associated features supporting diagnosis, 46
Ataque de nervios, 53–55, 57
Attachment theory, 246
Attention deficit hyperactivity disorder (ADHD):
bipolar disorder and, 221, 237, 238
conduct disorder and, 384, 392, 398, 399, 401–402, 410
depressive disorders and, 262
DSED and, 314–315
overview of, 515–516
treatment plan, 516–518
Attenuated psychosis syndrome, 160
Atypical antipsychotics, 234
Atypical medications, 81
AUDIT. See Alcohol Use Disorders Identification Test (AUDIT),
Autism spectrum disorder (ASD):
overview, 511–513
schizophrenia spectrum and, 168, 173
treatment plan, 513–514
Avoidant personality disorder (AVPD):
about, 482
case study - case of Linda, 483
Avolition, 157
AVPD. See Avoidant personality disorder (AVPD)
Axes, multiaxial assessments, 75. See also specific Axis
Axis I:
multiaxial diagnostic system and, 75
primary mental health diagnosis and, 74
Axis II:
primary mental health diagnosis and, 74
separate set of diagnoses and, 75
Axis III:
DSM-5 and, 77
medical conditions and, 74, 75
multiaxial diagnostic system and, 74, 75, 97
Axis V:
multiaxial diagnostic system and, 74, 75
purpose of, 91–92
BACSA. See Beliefs Associated with Childhood Sexual Abuse (BACSA)
BDD. See Body dysmorphic disorder (BDD)
Beck Depression Inventory, 293, 323
BED. See Binge eating disorder (BED)
Behavioral health care, time-limited practice in, 128–129
Behavioral parent training, 409–410
Behavior-based outcomes, 121
Behavior identification, 103
Behavior recognition, 103
Behaviors, identified problem, 121
Behavior therapies, trauma and stressor-related disorders and, 333
Beliefs and values:
  diagnostic assessment and, 34
  overidentification and, 52
  practice strategy and, 141–142
Beliefs and values, societal influences and, 49–50
Beliefs Associated with Childhood Sexual Abuse (BACSA), 491
Benzodiazepines, 305, 334, 454, 455, 461
Bereavement:
  complicated, 84, 85
  major depressive disorder (MDD) and, 253
  treatment plan, sample, 123–124
  uncomplicated, 84
Bereavement exclusion, 84–85
Be Responsible About Drinking chart, 423
Bibliotherapy, 131
Billing:
  DSM-5, codes and, 66
  ICD used for, 64–65
Binge eating disorder (BED), 222
Biomedical factors, assessment and, 71
Biomedical information, information gathering and, 71–72
Biopsychosocial approach:
  diagnostic assessment and, 32
  health care and, 19
Bipolar affective disorder, 213
Bipolar and related disorder due to another medical condition, 202, 214, 215, 220
Bipolar and related disorders, 202–239
  basic understanding of, 202–204
  in children and adolescents, 236–238
  counseling strategies for counseling strategy, 235
  diagnostic assessment in adults (see Bipolar disorder diagnostic assessment, adults)
  DSM-5 and, 42
  electroconvulsive therapy for depression and mania, 235–236
  future directions and, 238–239
  hypomanic episode, 206–207
  major depressive episode, 207–209
  manic episode, 204–206
  medications and psychotherapeutic agents, 227, 233–235
  models and treatment modalities, 232–236
  mood episodes/specifiers, 204
  overview of, 212–221
  specifiers for (see Specifiers, bipolar and related disorders)
  subgroups of, 214
  summary of, 221–222
  treatment planning (see Bipolar disorder treatment planning, adults)
  types of, 202, 214–215
Bipolar disorder diagnostic assessment, adults:
  about, 222–232
  case example - case of Dan, 223–224
  characterizations, symptoms, and behaviors, 230–231
  completion of diagnostic assessment, 224–229
Bipolar Disorder NOS, 220
Bipolar disorder treatment planning, adults:
  counseling strategies for counseling therapy, 231–232
  intervention strategy and, 229–232
  sample treatment plan, 229–230
Bipolar I disorder, 202, 214, 215–218
Bipolar I disorder, sample treatment plan, 229–230
Bipolar II disorder, 202, 214, 218–219
Bipolar term, 213
Blood alcohol levels, 423
BMSI. See Brief Male Sexual Inventory (BMSI)
Body dysmorphic disorder (BDD), 285–286
Borderline personality disorder (BPD), 487–502
  about, 478
  case example—case of Cara, 491–492
  case study—case of Sarah, 479
  diagnostic assessment for Cara, completion of, 493–494
  diagnostic system, application of, 494–496
  DSM-5 and diagnostic system, 488–490
  intervention strategy, 499–500
  overview of, 487–488
  primary and presenting problem, 495
  problem behaviors, identification of, 498
  psychopharmacological interventions, 501–502
  PTSD and, 495
  risk assessment and, 495
  sample treatment plan, 498–499
  therapeutic goals, 498
  treatment planning considerations, 496–497
BPD. See Borderline personality disorder (BPD)
Brain fag, 55, 56
Breathealyzer, 422–423
Brief Male Sexual Inventory (BMSI), 363
Brief psychotic disorder, 164–165
Bulimia nervosa:
  overview of, 540–542
  treatment plan (purging type), 542–543
Caffeine use disorder, 427
CAGE. See Cut-Down, Annoyed, Guilt, Eye-Opener (CAGE)
CAGE-AID, 424
Candace syndrome, 348
Cannabis use disorder, comorbidity and, 47
Cannabis withdrawal substance-use disorder, 432
CASAC. See Credentialed Alcohol and Substance Abuse Counseling Programs (CASAC)
Case application of diagnostic assessment, schizophrenia, 181–186
Clinician-Rated Dimensions of Psychosis Symptom Severity Scale Rating, 182–184
Economic Problems, 184–186
Housing and Economic Problems, 184
Other Circumstances of Personal History, 184
Problems Related to Crime or Interaction with the Legal System, 184
schizophrenia (reason for visit), 181–182
Catalepsy, 159, 180
Cataracts, 101
Catatonia:
  about, 159–160
  associated with another mental disorder (catatonia specifier), 172
  unspecified, 172
Catatonic disorder due to another medical condition, 172
Categorization. See Diagnostic labels
CBCL. See Child Behavior Checklist (CBCL)
CBF. See Cerebral blood flow (CBF)
CBT. See Cognitive-behavioral therapy (CBT)
CCS. See Contamination Cognitions Scale (CCS)
CD. See Conduct disorder (CD)
CDCU. See Computer-Based Driver’s Checkup (CDCU):
  Central nervous system (CNS), 431
  Cerebral blood flow (CBF), 152
CFI. See Cultural Formulation Interview (CFI)
CFI–Informant Version, 51
Child Behavior Checklist (CBCL), 389
Childhood, bipolar disorder in, 236–238
Childhood-onset schizophrenia (COS), 169
Child Protective Services, 409
Children:
crosscutting measurement and, 89
cultural and other diagnostic factors related to, 58
Child STEPs. See MacArthur Foundation’s Child System and Treatment Enhancement Projects (Child STEPs)
Chronic conditions:
  chronic pain and, 420–421
  misdiagnosis and, 77–78
Cirrhosis of the liver, 438
Client empowerment, 128
Client motivation, 140–141
Client resources. See Resources, client
Client’s environment. See Environmental factors
Client strengths. See Strengths, client
Clinically significant:
  impairment and, 92
  meaning of, 47
Clinical presentations suggestive of mental disorder, 94
Clinical records, maintaining, 114–115
Clinician-Rated Dimensions of Psychosis Symptom Severity, 90–91
  negative symptoms and, 90–91
  positive symptoms and, 90
Clinician-Rated Dimensions of Psychosis Symptom Severity Scale, 157, 164, 165, 169, 182, 183
Closed head injury, 94
Clozapine (Clozaril), 194, 502
Cluster A personality disorders, 471–475
  about, 469
  DSM editions and, 470
  paranoid personality disorder (PPD), 472, 473
  schizoid personality disorder (SPD), 473–474
  schizotypal personality disorder (STPD), 474–475, 476
Cluster B personality disorders, 475–481
  about, 469
  antisocial personality disorder (APD), 476–478
  borderline personality disorder (BPD) (see Borderline personality disorder (BPD))
DSM editions and, 470
histrionic personality disorder (HPD), 479–480
narcissistic personality disorder (NPD), 480, 481
Cluster C personality disorders, 482–485
about, 469
avoidant personality disorder (AVPD), 482, 483
dependent personality disorder (DPD), 482–484
DSM editions and, 470
obsessive-compulsive personality disorder (OCPD), 484–485
CMS. See Content Management Systems (CMS)
CNS. See Central nervous system (CNS)
Code of ethics:
duty to warn and, 120
legal considerations and, 101–102
Codependency, 304, 333
Codes, CPT. See CPT codes
Coding, in DSM-5, 65–66
Cognitive-behavioral therapy (CBT):
bibliotherapy and, 131
crosscutting of symptoms and, 89
dysfunctional thought patterns and, 143
mental health practices and, 135–137
obsessive-compulsive disorder and, 302–303
substance-related and addictive disorders and,
448–449
trauma and stressor-related disorders and, 331–332
Cognitive functioning, diagnostic impression and, 72
Cognitive-Somatic Anxiety Questionnaire (CSAQ), 293, 322
Cognitive therapy, 267
Collaborative team. See Team approach
Combination approach. See Diagnostic assessment
Comorbidity:
inclusion of dimensionalization, 39
potential for, 47
Completing diagnostic assessment, 70–105
basics for, 70–74
DSM-5 and, 74–76
ethical and legal considerations, 101–102
information gathering, 71–74
points to always consider in, 95–97
primary steps in, 103
principal diagnosis, 76–86
subtypes and course specifiers (see Subtypes and
course specifiers)
Complicated bereavement, 84, 85
Compulsions, defined, 281, 282
Compulsive behaviors, 279, 280, 285, 288, 293, 296,
298. See also Obsessive-compulsive and related
disorders
Computer-Based Driver’s Checkup (CDCU), 451
Computer-based therapies, 303–304, 332–333
Computer-generated notes, 115–116
Conduct disorder (CD), 381–385. See also Disruptive
impulse control and conduct disorders
ADHD and, 384, 392, 393, 398, 399, 401–402,
410
bipolar disorder and, 237
diagnostic label and, 15
discharge criteria and, 410
future directions and, 411
sample treatment plan, 405–408
Confidential information. See also Health Insurance
Portability and Accountability Act (HIPAA)
discussing with client, 463
exceptions allowing release of, 119
Contamination Cognitions Scale (CCS), 293
Content Management Systems (CMS), 64
Cortical brain dysfunction, 96–97
COS. See Childhood-onset schizophrenia (COS)
Counseling:
educative, 139–140
mood disorders and, 235
Counseling fields, professional training in, 18–19
Countertransference, 52
Course specifiers and subtypes, 86–91
CPT codes:
AUDIT and DAST and, 424
procedural categories, 65
Credentialed Alcohol and Substance Abuse
Counseling Programs (CASAC), 460
Crisis, defined, 137
Crisis intervention approaches, 137–139, 143
Crosscutting of symptoms:
application of, dimensional assessment and, 88
depressive disorders and, 248
in DSM-5, 42–43
measures, 88–89
Crosswalk, 64
CSAQ. See Cognitive-Somatic Anxiety
Questionnaire (CSAQ)
| Cultural assessment, overall | 50 |
| Cultural-bound syndrome | 53 |
| Cultural conceptualizations of distress | 50 |
| Cultural factors: |
| documentation of, | 94 |
| of vulnerability and resilience | 50 |
| Cultural features of relationship between individual and clinician | 50 |
| Cultural Formulation Interview (CFI), | 43, 49, 51, 52, 57, 73, 175, 292, 322 |
| Cultural identity | 50 |
| Cultural information, gathering | 72–73 |
| Culture: |
| age, gender-related information and | 47–53 |
| defined | 47 |
| diagnostic assessment and | 35 |
| globalization and | 23 |
| overidentification and | 52 |
| Culture and other diagnostic factors: |
| age and | 57–59 |
| children and | 58 |
| gender and | 59–62 |
| older adults and | 58–59 |
| Culture-bound syndrome | 53 |
| Curanderos | 175 |
| Current procedural terminology (CPT) codes. See CPT codes |
| Cut-Down, Annoyed, Guilt, Eye-Opener (CAGE), | 424 |
| Cyclothymic disorder | 202, 214, 219–220, 222 |
| Deparsonization | 316 |
| Depression: |
| electroconvulsive therapy (ECT) for | 235–236 |
| family therapy for | 232 |
| melancholic | 246 |
| Depressive disorder due to another medical condition: |
| about | 259 |
| definition, brief | 248 |
| Depressive disorders, 242–273. See also Major depressive disorder (MDD) |
| assessment of danger to self and others | 271–272 |
| basic understanding of | 243–244 |
| diagnostic assessment (see Depressive disorders, diagnostic assessment) |
| DMDD and | 37–38 |
| DSM-5 and | 42, 249 |
| endogenous and exogenous depression | 246–247 |
| future directions and | 272–273 |
| important features related to | 244–246 |
| overview of | 247–259 |
| sexuality and | 270–271 |
| Depressive disorders, diagnostic assessment, 259–270 |
| case example - case of Joey | 260–262 |
| counseling strategies | 267–268 |
| medication as treatment modality | 266, 268–270 |
Subject Index 567

other clinical conditions and, 263–264
sample treatment plan, 265
transition care, treatment planning, and strategy, 264–266
treatment planning and documentation, 264
Depressive episode with insufficient symptoms, 259
Depressive symptoms, age and, 38
Derealization, 316
Detoxification and withdrawal, 454
Developmental life span approach, 37, 45
Dhat syndrome, 55
Diagnosis:
absence of proper, 94
assessment and, 33
associate features supporting, 46
coding, in DSM-5, 65–66
combination approach and, 33
diagnostic process and, 29–32
identifying mental disorder, 28–29
information supportive of, 79
medical model and, 30, 32
principal, 75, 76–78
provisional, 75, 78–79
sharing with client, 24–25
underdiagnosing versus overdiagnosing, 84
Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. See DSM-5
Diagnostic and Statistical Manual of the American Psychiatric Association, 4
Diagnostic assessment:
beginning the process, 3–4
building rapport and, 62
completion of (see Completing diagnostic assessment)
cultural identity and, 56
documentation of, 93–94, 122
ethnic-sensitive, 52
examining/reexamining, 103–104
factors guiding initiation of, 140–142
five guiding factors, 33–35
older adults and, 60
situational factors and, 47
tests and, 46
three aspects to consider, 35
tools used in, 4
Diagnostic Assessment I, gender and, 61
Diagnostic codes:
major depressive disorder (MDD) and, 254–255
subtypes and, 212
Diagnostic impression, 75–76
Diagnostic labels, 14–16
Diagnostic process:
diagnosis and, 29–30
issue of process and, 30–31
whole person and, 31–32
Diagnostic product, 31
Dialectical behavior therapy (DBT), 500–501
Dimensional assessment:
of crosscutting of symptoms, 42–43
crosscutting of symptoms, application of, 88
DSM-5 and, 38–39
schizophrenia spectrum and, 177
Dimensionalization, inclusion of, 39
Diminished emotional expression, 157
Disability:
assessment of, 91–92
substance disorders and, 457
WHODAS 2.0 and, 43
Disability status, malingering and, 85
Disadvantaged populations, 49
Disease(s):
contagious, 31–32
disorder and, 28–29
Disinhibited social engagement disorder (DSED), 309, 314–315
Disinhibition, 378
Disorder(s):
additional categories and, 14
disease and, 28–29
other specified, 62–63
presentation of, 45
unspecified, 62–63
Disorganized thinking and speech, 156–157
DISP. See Depression Impairment Scale for Parents (DISP)
Disruptive impulse control and conduct disorders, 375–412. See also Conduct disorder (CD)
diagnostic assessment (see Disruptive impulse control and conduct disorders, diagnostic assessment)
future directions and, 411–412
intervention strategies, 403–410
Disruptive impulse control and conduct disorders

*Continued*

- medication use and, 410–411
- overview of, 377–387
- understanding individuals suffering from, 376–377

Disruptive impulse control and conduct disorders,

diagnostic assessment, 387–403

- behavioral problem identification, 403
- case example - case of Charlie, 392–394
- collateral contacts, inclusion of, 391
- contributing factors, 398–399
- cultural lens and, 392
- diagnostic summary, 398
- discharge criteria and, 410
- family system and, 391–392
- gender considerations, 390–391
- information to gather, 390, 399
- measurement and, 388–390
- mental status description, 401
- other conditions that may be a focus of clinical attention, 397–398
- principal diagnosis/ reason for visit, 394–397
- questions to ask, 387–388
- risk assessment and, 400
- sample treatment plan, 405–408
- treatment plan and intervention components, 401–402
- treatment process, starting, 399–401

Disruptive mood dysregulation disorder (DMDD):

- about, 249–250
- definition, brief, 247
- DSM-5 and, 37–38
- sample treatment plan, 265

Distress:

- concepts of, 53–57
- cultural conceptualizations of, 50

DMDD. See Disruptive mood dysregulation disorder (DMDD)

Documentation of information. See also Records, maintaining

- diagnostic assessment and, 93–94, 122
- ethical and legal considerations, 102
- five generic rules for, 109
- guiding principles for, 110
- helpful hints for, 115
- subtypes and course specifiers, 92–97

- treatment planning, practice strategy and, 107–116
- Dopamine, 152, 454, 455
- Dopamine inhibitors, 80, 192
- DPD. See Dependent personality disorder (DPD)
- Drug Abuse Screening Test (DAST), 424
- Drugs. See Substance-related and addictive disorders
- Drug testing: tolerance and withdrawal, 421–423
- DSED. See Disinhibited social engagement disorder (DSED)

*DSM. See also specific edition*

- personality disorders in each edition of, 470
- practice strategy and, 89
- publisher of, 4
- social workers and, 4–6

DSM-5:

- appendices, 44
- Axis III and, 77
- basis for changes in, 37, 38
- bereavement and, 84
- coding and diagnosis in, 65–66
- cultural aspects in, 48–53
- cultural information and, 50
- deletion of shared psychotic disorder from, 195–196
- diagnostic assessment and, 4, 74–75
- diagnostic impression, 75–76
- disorders/additional categories, 14
- elimination of multiaxial system in, 75
- important sections in, 45
- intended users of, 24–25
- multiaxial diagnostic system and, 97, 238
- Personality Inventory for (PID-5), 502
- practice framework and, 125–127
- in practice setting, 23–25
- pros and cons of, 15
- psychotic disorders and, 157–160
- sections of (see Three DSM-5 sections)
- sexual dysfunctions and, 344
- substance-related disorders and, 425, 427, 428
- tolerance term and, 422
- updates (see Updates/structural changes)

DSM-II, disorder term and, 28

DSM-III:

- disorder and disease terms, 28
- dynamic changes and, 16
Subject Index

**DSM-III-R:**
- Axis IV, 17
- cluster of disorders introduced, 471

**DSM-IV:**
- Mood Disorders, 42
- multiaxial diagnostic system, 17, 75
- PIE’s influence on, 17
- substance-related disorders and, 427

**DSM-IV-TR:**
- basis for changes and, 37
- diagnosis, assessment and, 33
- DSM-5 and, 4
- multiaxial diagnostic system, 17, 75
- NOS category and, 62, 63
- polysubstance and, 431, 432
- projective testing and, 36
- substance-related disorders and, 427

DTs. See Delirium tremens (DTs)

Duration of symptoms, documentation of, 93

Duty to warn, 120

Dyspareunia, 349

Dysphonia, 247

Dysthymia. See Persistent depressive disorder

Dysthymic syndrome, 257

Dystonia, 81, 192

Early dementia, 150

Eating disorders. See Anorexia nervosa; Bulimia nervosa:
- Echolalia, 160
- Echopraxia, 160
- E-codes, 44

ECT. See Electroconvulsive therapy (ECT)

ED. See Erectile disorder (ED)

Educative counseling, 139–140

Elderly. See Older adults

Electroconvulsive therapy (ECT), 235–236

Electronic records, 116

EMDR. See Eye movement desensitization and reprocessing (EMDR)

Emotional expression, diminished, 157

Empowering approach, 128

Endogenous depression, 246–247

Environmental factors:
- documentation of, 94
- substance abuse and, 125–126

Erectile disorder (ED):
- about, 346–347
- sample treatment plan, 359–360
- treatment options, 364–365

Espiritistas, 175

Ethical considerations, 101–102. See also Code of ethics

Ethnic identity, defined, 47

Ethnicity, 47

Evidence-based practices:
- information gathering and, 74
- multidisciplinary approaches and, 26

Evidence-based research, disruptive behavior disorders and, 412

Excessive constraint, 378

Excoriation (skin picking) disorder, 287

Exogenous depression, 246–247

Exposure therapies, 303

Extrapyramidal symptoms (EPS). See also Tardive dyskinesia (TD)
- medications and, 80, 192–193, 195
- described, 81

Eye movement desensitization and reprocessing (EMDR), 303

Family, common effects of excessive alcohol within, 441

Family Adaption Scales (FAS), 264

Family Sense of Coherence (FSOC), 264

Family support group therapy, 268

Family system approach, chemically affected individuals and, 447–448

Family systems:
- disruptive impulse control and conduct disorders, 391–392
- schizophrenia and, 191
- substance-related and addictive disorders and, 437–438

Family therapy:
- for depression and mania, 232, 267–268
- trauma and stressor-related disorders and, 333

FAS. See Family Adaption Scales (FAS)

FASD. See Fetal alcohol spectrum disorders (FASD)

FDA. See Food and Drug Administration (FDA)

Federal Register, 64

Fee-for-service environment, 32
<table>
<thead>
<tr>
<th>Subject</th>
<th>Page(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female orgasmic disorder (FOD)</td>
<td>347–348</td>
</tr>
<tr>
<td>Female sexual arousal disorder (FSAD)</td>
<td>348–349</td>
</tr>
<tr>
<td>Female Sexual Function Index (FSFI)</td>
<td>363</td>
</tr>
<tr>
<td>Feminist theory</td>
<td>60</td>
</tr>
<tr>
<td>Fetal alcohol spectrum disorders (FASD)</td>
<td>437, 457</td>
</tr>
<tr>
<td>fMRI. See Functional magnetic resonance imaging (fMRI)</td>
<td></td>
</tr>
<tr>
<td>FOD. See Female orgasmic disorder (FOD)</td>
<td></td>
</tr>
<tr>
<td>Folstein Mini Mental State Examination (MMSE)</td>
<td>293, 297, 322</td>
</tr>
<tr>
<td>Food and Drug Administration (FDA)</td>
<td>194, 269, 305, 334, 455, 462</td>
</tr>
<tr>
<td>Forensic settings</td>
<td>36</td>
</tr>
<tr>
<td>FSAD. See Female sexual arousal disorder (FSAD)</td>
<td></td>
</tr>
<tr>
<td>FSFI. See Female Sexual Function Index (FSFI)</td>
<td></td>
</tr>
<tr>
<td>FSOC. See Family Sense of Coherence (FSOC)</td>
<td></td>
</tr>
<tr>
<td>Functional magnetic resonance imaging (fMRI)</td>
<td>203</td>
</tr>
<tr>
<td>GABA. See Gamma-amino butyric acid (GABA)</td>
<td></td>
</tr>
<tr>
<td>GAD. See Generalized Anxiety Disorder (GAD)</td>
<td></td>
</tr>
<tr>
<td>GADSS. See Generalized Anxiety Disorder Severity Scale (GADSS)</td>
<td></td>
</tr>
<tr>
<td>GAF. See Generalized Assessment of Functioning (GAF)</td>
<td></td>
</tr>
<tr>
<td>Gambling disorder (GD)</td>
<td>425–426</td>
</tr>
<tr>
<td>Gamma-amino butyric acid (GABA)</td>
<td>455</td>
</tr>
<tr>
<td>GCS. See Generalized Contentment Scale (GCS)</td>
<td></td>
</tr>
<tr>
<td>GD. See Gambling disorder (GD)</td>
<td></td>
</tr>
<tr>
<td>Gender:</td>
<td></td>
</tr>
<tr>
<td>culture and other diagnostic factors related to,</td>
<td>59–62</td>
</tr>
<tr>
<td>Diagnostic Assessment I and, 61</td>
<td></td>
</tr>
<tr>
<td>Diagnostic Assessment II and, 61</td>
<td></td>
</tr>
<tr>
<td>Gender differences, alcohol and, 456–457</td>
<td></td>
</tr>
<tr>
<td>Gender-related information, culture, age, and, 47–53</td>
<td></td>
</tr>
<tr>
<td>Generalized anxiety disorder (GAD):</td>
<td></td>
</tr>
<tr>
<td>overview of, 522–523</td>
<td></td>
</tr>
<tr>
<td>as primary diagnosis, 494–495</td>
<td></td>
</tr>
<tr>
<td>treatment plan, 524–525</td>
<td></td>
</tr>
<tr>
<td>Generalized Anxiety Disorder Severity Scale (GADSS), 389</td>
<td></td>
</tr>
<tr>
<td>Generalized Assessment of Functioning (GAF), 92, 184</td>
<td></td>
</tr>
<tr>
<td>Generalized Contentment Scale (GCS), 294, 323</td>
<td></td>
</tr>
<tr>
<td>Genito-pelvic pain/penetration disorder (GPPD), 349–350</td>
<td></td>
</tr>
<tr>
<td>Globalization, culture and, 23</td>
<td></td>
</tr>
<tr>
<td>Glossaries, 44, 49, 53, 73</td>
<td></td>
</tr>
<tr>
<td>Golombok-Rust Inventory of Sexual Satisfaction (GRISS), 350, 363</td>
<td></td>
</tr>
<tr>
<td>GPPD. See Genito-pelvic pain/penetration disorder (GPPD)</td>
<td></td>
</tr>
<tr>
<td>GRISS. See Golombok–Rust Inventory of Sexual Satisfaction (GRISS)</td>
<td></td>
</tr>
<tr>
<td>Group therapy:</td>
<td></td>
</tr>
<tr>
<td>family support, 268</td>
<td></td>
</tr>
<tr>
<td>peer support, 232, 267</td>
<td></td>
</tr>
<tr>
<td>Growing old. See Older adults</td>
<td></td>
</tr>
<tr>
<td>Hair pulling disorder, 287</td>
<td></td>
</tr>
<tr>
<td>Halldol, 194</td>
<td></td>
</tr>
<tr>
<td>Hallucinations:</td>
<td></td>
</tr>
<tr>
<td>psychotic disorders and, 156</td>
<td></td>
</tr>
<tr>
<td>schizophrenia spectrum and, 90</td>
<td></td>
</tr>
<tr>
<td>screening process and, 96</td>
<td></td>
</tr>
<tr>
<td>Harm reduction approach, substance abuse and, 459–460</td>
<td></td>
</tr>
<tr>
<td>HD. See Hoarding disorder (HD)</td>
<td></td>
</tr>
<tr>
<td>Head injury, closed, 94</td>
<td></td>
</tr>
<tr>
<td>Health Insurance Portability and Accountability Act (HIPAA), 116</td>
<td></td>
</tr>
<tr>
<td>ICD-10 and, 64–65</td>
<td></td>
</tr>
<tr>
<td>ICD and, 65–66</td>
<td></td>
</tr>
<tr>
<td>Hearing problems, 100–101</td>
<td></td>
</tr>
<tr>
<td>HIPAA. See Health Insurance Portability and Accountability Act (HIPAA)</td>
<td></td>
</tr>
<tr>
<td>HIPPA. See Health Insurance Portability and Accountability Act (HIPAA)</td>
<td></td>
</tr>
<tr>
<td>Histrionic personality disorder (HPD):</td>
<td></td>
</tr>
<tr>
<td>about, 479–480</td>
<td></td>
</tr>
<tr>
<td>case study - case of Celeste, 480</td>
<td></td>
</tr>
<tr>
<td>HIV:</td>
<td></td>
</tr>
<tr>
<td>statistics on, 142–143</td>
<td></td>
</tr>
<tr>
<td>Telephone Delivered Sex Checkup (SCU) and, 452</td>
<td></td>
</tr>
<tr>
<td>whole person and, 31–32</td>
<td></td>
</tr>
<tr>
<td>Hoarding disorder (HD), 286</td>
<td></td>
</tr>
<tr>
<td>Homicides, 188</td>
<td></td>
</tr>
<tr>
<td>Horizontal clinical relationship services, 452</td>
<td></td>
</tr>
<tr>
<td>HPD. See Histrionic personality disorder (HPD)</td>
<td></td>
</tr>
</tbody>
</table>
Hyperphagia, 208, 251
Hypersomnia, 208, 251
Hypersomnolence disorder:
  overview of, 530–533
  treatment plan, 534–535
Hypomaniac episode, 205, 206–207

ICD. See International Classification of Diseases (ICD), 4

ICD-9-CM:
  codes, appendices and, 44
  codes in, 63
  V codes, 66
ICD-10:
  diagnostic assessment and, 4, 95
  WHO and, 63
ICD-10-CM:
  replacement of, 64
  Z codes, 66
ICD-10-DRC codes, appendices and, 44
ICD-11:
  diagnostic assessment and, 4
  expected release or, 65
  updating and consistency with, 63–64
ICF. See International Classification of Functioning, Disability and Cognitive Health (ICF)
ID. See Intermittent explosive disorder (ID)
Ideas of reference, 180
Identified problem behaviors, 121
Identity:
  ascribed, 49
  cultural, 50
  ethnic, 47
  personal, 49
  racial, 47
  situational, 47
IMET. See Integrated motivational enhancement therapy (IMET)
Infections, obsessive-compulsive disorder and, 291
Information, documentation of, 92–97
Information gathering:
  approach or method of intervention and, 141
  diagnostic assessment and, 34, 71–74
Information technology (IT), 64
Inhibited sexual desire, 350
In-Person Driver’s Checkup (DCU), 451
In-Person Marijuana Checkup (MCU), 451–452
In-School Teen Marijuana Checkup (TMCU), 452
Insomnia, 208, 251, 296
Insomnia disorder:
  overview of, 525–528
  treatment plan, 528–530
Insurance reimbursement:
  billable and nonbillable conditions, 5
  diagnostic assessment and, 32
  medical diagnosis and, 16
  misdiagnosis and, 6
  time-limited practice and, 128
Integrated motivational enhancement therapy (IMET), 451–452
Intelligence testing, 297
Intensity of symptoms, documentation of, 93
Interdisciplinary team, 26–27
Intermarriage, 47
Intermittent explosive disorder (ID), 381
International Classification of Diseases (ICD):
  as global standard, 63–64
  medical conditions and, 78
International Classification of Functioning, Disability and Cognitive Health (ICF), 92, 184
Internet. See also Computer-based therapies, clients and, 24
Intervention framework:
  about, 123, 125
  utilizing DSM-5 when selecting, 125–127
Intervention planning:
  assessing for suicide/safety plan, 117–119
  danger to self and others, 119–120
  treatment and, 116–120
Intrusive thoughts, 296
In vivo exposure therapy, 303
IQ, 399
IT. See Information technology (IT)
Joint United Nations Programme on HIV/AIDS, 142

Khyal cap/Kyal attacks, 55
Kleptomania, 386
Kufungisisa, 55

Labels, diagnostic, 14–16
LASC. See Los Angeles Symptom Checklist (LASC)

Latinos:
- ataque de nervios, 53–55, 57
- indigenous healers, 175
- mareos, 55
- nervios, 53, 54–55

Legal considerations:
- about, 101–102
- clinical records and, 114, 115
Lethality, 72. See also Suicide ideation

Level 1 Cross-Cutting Symptom Measure, 88
Level of Personality Functioning Scale, 44
Libido, 271
Life transitions, 82–83
Likert scale, 293
Lithium, 233–235
Long-term therapy, 130
Los Angeles Symptom Checklist (LASC), 323

MacArthur Foundation’s Child System and Treatment Enhancement Projects (Child STEPs), 388
Magnetic resonance imaging (MRI), 152, 203
Major depressive disorder (MDD), 250–255
- appetite changes, 251
- bereavement and, 84, 253
- crosscutting of symptoms and, 42–43
- definition, brief, 247–248
- depressed mood, 250
- diagnostic codes and, 254–255
- diminished concentration and indecisive thoughts, 252
- fatigue and loss of energy, 251–252
- feelings of worthlessness or guilt, 252
- markedly diminished interest or pleasure, 250–251
- psychomotor agitation, 251
- recurrent thoughts of death, 252
- risk factor areas, 253–254
- sleep disturbance, 251
- specifiers for, 255
- symptoms, 250–252
Major depressive episode, 205, 207–209
Maladimoun, 56
Male Hypoactive Sexual Desire Disorder (MHSDD), 350
Malingering, 85
Malpractice, 101

Mania:
- electroconvulsive therapy (ECT) for, 235–236
- family therapy for, 232
Manic depression, 213
Manic episode, 204–206
MAOIs. See Monoamine oxidase inhibitors
Mareos, 55
MAT. See Medication-assisted therapy (MAT)
MCU. See In-Person Marijuana Checkup (MCU)
MDD. See Major depressive disorder (MDD)
Measurement instruments, client progress and, 122–123
MEC. See Motivational enhancement catalyst (MEC)
Medical condition(s). See also Disease(s)
- catatonic disorder due to another, 172
- coding of, 97–100
- diseases and, general categories of, 98
- personality change due to another, 486
- psychotic disorder due to another, 171–172
Medical Expenditure Panel Survey, 176
Medical factors:
- importance of assessing for, 99
- mental health-related behaviors and, 94–95
Medical problem(s):
- clients ignoring warning signs of, 77–78
- coding of, 97–100
- medical problems and, 77, 78
- mental illness and, 96
- organ failure, 97
Medical symptoms, questions in assessing, 99
Medical urethral system for erection (MUSE), 364
Medication-assisted therapy (MAT), 455–456
Medication-induced acute akathisia, 80
Medication-induced acute dystonia, 80
Medication-induced movement disorders:
- examples of, 41
list of, 82
other adverse effects of medication and, 79–82
Medication-induced Parkinsonism, 41
Medication-induced psychotic disorder, 171
Medication-related disorders, 41
Medication(s). See also specific medication or medication type
  atypical, 81
  bipolar disorder and, 233–235
  borderline personality disorder and, 501–502
  conduct disorder and, 410–411
  depressive disorders and, 266, 268–270
  minimal use of, 190
  neuroleptic (see Neuroleptic medications)
  obsessive-compulsive and related disorders and, 305–306
  polypharmacy and, 96
  psychotherapeutic, 455, 461
  psychotropic, 234, 501
  schizophrenia and, 191–195
  substance-related and addictive disorders and, 454–456
  trauma and stressor-related disorders and, 334–335
Melancholic depression, 246
Men seeking men (MSM), 452
Mental disorder:
  clinical presentations suggestive of, 94
  defined, 77
  in DSM-5, defined, 40
  identification of, 28–29
  normal human functioning and, 38
  Mental functioning, diagnostic assessment and, 72
  Mental health practice:
    cognitive-behavioral approaches to, 135–137
    crisis intervention approaches to, 137–139
  Mental health professionals, role of, 4–6
  Mental health-related behaviors, medical factors and, 94–95
  Mental health status exam, 72, 179
  Mental retardation (MR), 173, 437
  Mental status description, 296
  Mental status exam. See Folstein Mini Mental State Examination (MMSE)
  METs. See Motivational enhancement therapies (METs)
  MHSDD. See Male Hypoactive Sexual Desire Disorder (MHSDD)
  Military basic training, 166–167
  Mind-body connection:
    biomedical assessment and, 72
    coding medical conditions and, 97–100
  Mini Mental State Examination. See Folstein Mini Mental State Examination (MMSE)
Misdiagnosis:
  clients at greatest risk of, 77–78
  documentation and, 94
  insurance reimbursement and, 6
  of schizophrenia, 176–177
  MMSE. See Folstein Mini Mental State Examination (MMSE)
  Monoamine oxidase inhibitors (MAOIs), 270, 305, 334
  Mood-congruent and mood-incongruent features, 209
  Mood Disorder Questionnaire, 264
  Mood disorders, schizophrenia and, 176
  Mood episodes, types of, 205
  Mood Related Pleasant Events Schedule (MRPES), 264
  Mood stabilizers, 234
  Morbid ideation, 296
  Morbidity and Mortality Weekly Report, 243
  Motivation, client’s, 140–141
  Motivational enhancement catalyst (MEC), 451
  Motivational enhancement therapies (METs), 449–451
  MR. See Mental retardation (MR)
  MRI. See Magnetic resonance imaging (MRI)
  MRPES. See Mood Related Pleasant Events Schedule (MRPES)
  MSM. See Men seeking men (MSM)
Multiaxial system:
  DSM editions and, 17
  elimination of, 74–75
  five axes, described, 75
  Multidisciplinary team, 25–26
  MUSE. See Medical urethral system for erection (MUSE)
  Mutism, 159
  Mutual peer-to-peer self-help group, 452
NA. See Narcotics Anonymous (NA)
Naltrexone, 455, 502
Narcissistic personality disorder (NPD):
    about, 480, 481
    case study - case of Gary, 481
Narcotics Anonymous (NA), 187, 452
NASW. See National Association of Social Workers (NASW)
NASW Program Advancement Fund, 16
National Association of Social Workers (NASW), 16
National Comorbidity Survey, 410
Natural disasters, crisis intervention approaches and, 138
Negative emotionality, 378, 379
Negative symptoms, psychotic disorders and, 157
Nervios, 53, 54–55
Neurocognitive term, DSM-5 and, 37
Neurodevelopmental term, DSM-5 and, 37
Neuroimaging, 152, 203
Neuroleptic-induced Parkinsonism, 41
Neuroleptic malignant syndrome (NMS), 88–89
Neuroleptic medications:
    newer atypical, 193–195
    older typical, 191–194
    risks and side effects of, 405
Neuroleptic term, 80
Neuromodulatory treatment techniques, 272
Neurotransmitters, 152, 192, 269, 454
NMDA. See N-methyl-D-aspartate (NMDA)
N-methyl-D-aspartate (NMDA), 455
NMS. See Neuroleptic malignant syndrome (NMS)
Non-substance-related disorders, 420, 425–426
Norepinephrine, 269
Normal human functioning, mental disorder and, 38
NOS. See Not otherwise specified (NOS)
Notes, computer-generated, 115–116
Not otherwise specified (NOS), 62, 63
NPD. See Narcissistic personality disorder (NPD)
Obsessional Beliefs Questionnaire, 292
Obsessions, defined, 281, 282
Obsessive-compulsive and related disorder due to another medical condition, 288
Obsessive-compulsive and related disorders, 278–306
    basic understanding of, 278–280
diagnostic assessment (see Obsessive-compulsive and related disorders, diagnostic assessment)
    future directions and, 306
    important features related to, 281–283
    OCD spectrum disorders, 280–281
    overview of, 283–288
    self-reporting and, 282–283
Obsessive-compulsive and related disorders, diagnostic assessment, 291–306
    beginning diagnostic assessment, 294
    case example - case of Kurt, 294–295
    diagnostic assessment - case of Kurt, 295–297
    dimensional assessment and, 292
    general considerations, practice strategy and, 300, 302–304
    measurement scales and, 292–294
    medication as treatment modality, 305–306
    mental status description, 296
    other conditions that may be a focus of clinical attention, 298
    self-regulatory executive function model (S-REF) and, 304–305
    treatment planning and intervention strategy, 298–300
Obsessive-compulsive disorder (OCD):
    about, 285
    better understanding of, 289–291
    dimensional assessment and, 292
    genetic/environmental factors and, 290
    infections and, 291
    measurement scales and, 292–294
    neurobiological factors and, 290
    risk factors and, 290
    sample treatment plan, 301–302
    stressful life events and, 290–291
Obsessive-Compulsive Inventory, 293
Obsessive-compulsive personality disorder (OCPD):
    about, 484–485
    case study - case of Ray, 485
Obsessive-Compulsive Trait Core Dimensions Questionnaire, 293
OCD. See Obsessive-compulsive disorder (OCD)
OCPD. See Obsessive-compulsive personality disorder (OCPD)
Oculogyric crisis, 81
OD, 396
ODD. See Oppositional defiant disorder (ODD)
Older adults. See also Dementia
culture and other diagnostic factors related to, 58–59
diagnostic assessment and, 60
misdiagnosis and, 77–78
urinary tract infections (UTIs) and, 71
Olfactory reference syndrome, 56
Oppositional defiant disorder (ODD):
about, 379–381
bipolar disorder and, 237
Organ failure, 97
Other conditions that may be a focus of clinical
attention, 82–86
Other specified bipolar and related disorder, 202,
215, 221
Other specified depressive disorder, 248, 259
Other specified disruptive impulse-control, and
disorder, 386–387
Other specified obsessive-compulsive and related
disorder, 288
Other specified personality disorder, 486
Other specified sexual dysfunction, 353
Other specified trauma and stressor-related disorders,
309, 321
Outcome measures, 122–123
Overdiagnosing, 84
Overeating, 208, 251
Overidentification, 52
Overlapping of symptoms. See Crosscutting of
symptoms
Overquantification of behavior, 47
Oversleeping, 208, 251

PANDAS. See Pediatric autoimmune
neuropsychiatric disorders (PANDAS)
Paranoid delusional thinking, 180
Paranoid personality disorder (PPD):
about, 472
case example – case of Leon, 473
ParentCorps, 409
Parkinsonian symptoms, side effect profiles and, 80
Parkinsonism, medication-induced, 41
Parkinson’s disease, 347
Partialization of problem, 113–114
PCS. See Procedural Coding System (PCS)
PE. See Premature ejaculation (PE)
Pediatric autoimmune neuropsychiatric disorders
(PANDAS), 291
Peer support group therapy, 232, 267
Penn Inventory for Posttraumatic Stress Disorder
(PI-PTSD), 323
Persistent depressive disorder, 255–258
definition, brief, 248
depressive disorders and, 262
Personal identity, 49
Personality change due to another medical
condition:
about, 486
case study – case of Peter, 486
Personality disorders, 467–503
alternative DSM model for, 502–503
ancient civilizations and, 468
basic understanding of, 468
Cluster A grouping (see Cluster A personality
disorders)
Cluster B grouping (see Cluster B personality
disorders)
Cluster C grouping (see Cluster C personality
disorders)
described, 471
DSM-5 and, 468
in each edition of DSM, 470
future directions and, 503
history of DSM and, 469–471
ideas of reference and, 180
multiaxial system and, 75
other, 485, 486–487
summary of, 487
understanding individuals suffering from, 468–471
Personality disorder–trait specified (PD-TS), 502
Personality Inventory for DSM-5 (PID-5), 502
Person in environment, social workers and, 16
Person-in-Environment Classification System (PIE),
16–18
PET. See Positron emission tomography (PET),
Peyronie’s disease, 347
Phantosmia, 156
PID-5. See Personality Inventory for DSM-5
(PID-5)
PIE. See Person-in-Environment Classification
System (PIE)
PI-PTSD. See Penn Inventory for Posttraumatic Stress Disorder (PI-PTSD)
PIRP. See Problem, intervention, response, and plan (PIRP)
Polypharmacy, 96
Polysubstance, 431, 432
POR. See Problem-oriented recording (POR)
Positron emission tomography (PET), 203
Posttraumatic stress disorder (PTSD), 315–319
borderline personality disorder and, 495
combat-related experiences and, 183
depersonalization, derealization and, 316
depressive disorders and, 262
DSM-5 and, 309
flashbacks and, 316, 317, 318, 319
medication-related conditions and, 187
overlapping diagnoses and, 319
peritraumatic factors and, 318
populations and, 315
posttraumatic factors and, 318
sample treatment plan, 329–330
Posturing, 159, 180, 181
Power differentials, gender sensitive process and, 60–61
PPD. See Paranoid personality disorder (PPD)
Practice strategy:
application and, 127–131
documentation, treatment planning and, 107–116
factors guiding initiation of, 140–142
Practitioner, twofold role of, 20
Premature ejaculation (PE):
about, 350–352
assessment and treatment of, 365–367
Premenstrual dysphoric disorder (PMDD), 248, 249, 258
Premorbid term, 472
Presenting symptoms, documentation of, 93
Primary care settings, brief interventions in:
about, 453–456
detoxification and withdrawal, 454
Primary diagnosis, documentation and, 93
Principal diagnosis:
about, 76–78
diagnostic impression and, 75
information supportive of diagnosis and, 79
medication-induced movement disorders and
other adverse effects of medication, 79–82
other conditions that may be a focus of clinical
attention, 82–86
provisional diagnosis and, 78–79
Privacy Rule, 116
Problem, intervention, response, and plan (PIRP), 113
Problem behaviors, sample of identified, 121
Problem-oriented recording (POR), 109–114
APIE, 113, 114
DAP and DAPE, 113
information to be included in, 111
problem, intervention, response, and plan (PIRP), 113, 114
SOAP, SOAPIE, SOAPIER recording formats, 111, 112, 113
Problem(s):
partialization of, 113–114
recognition of, 103
Procedural Coding System (PCS), 64
Projective testing, 36
Protected health information (PHI), 116
Provisional diagnosis:
about, 78–79
diagnostic impression and, 75
Psychodynamic approaches:
about, 132, 134
case example, 133–134
relationship experiences and, 143
Psychomotor agitation, 208, 209
Psychopathology, gradient of, 45
Psychosis:
characteristic symptoms of, 160
fear of, 152
hallucinations and, 156
multiple dimensions of, 158
psychotic disorders and, 149
Psychosis symptom severity, clinician-rated severity of, 90–91
Psychosocial information, gathering, 72
Psychosocial stressors, 50
Psychotherapeutic medications, 455, 461
Psychotic break, first, 90, 166
Psychotic disorder due to another medical condition, 171–172
Psychotic disorders, 149–197. See also Schizophrenia spectrum
  basic understanding of conditions, 150–151
  biology and etiology of, 152–153
  characteristics and symptoms, 158
  diagnostic assessment, beginning, 173–174
  dimensional measurement, 43
  diseases, types of, 161–162
  features related to, 153–157
  future directions and, 196–197
  other specified or unspecified, 172–173
  overview of, 160–167
  shared psychotic disorder, 195–196
  understanding individuals and, 151–153
  PTSD. See Posttraumatic stress disorder (PTSD)
  Pyromania, 385–386
  Quality of Sexual Life Questionnaire (QVS), 362–363
  QVS. See Quality of Sexual Life Questionnaire (QVS)
  Race:
    assessment phase and, 142
    defined, 47
    diagnostic assessment and, 35
  Racial identity, 47
  RAD. See Reactive attachment disorder (RAD)
  RAIs. See Rapid assessment instruments (RAIs)
  Rapid assessment instruments (RAIs), 122, 389
  Rapport, building, 62
  Rational emotive behavior therapy (REBT), 331–332, 450
  Reactive attachment disorder (RAD), 309, 313–314
  Reactive depression, 246
  Reasons for Living Inventory (RFL), 490
  REBT. See Rational emotive behavior therapy (REBT)
  Recording, problem-oriented (POR), 109–114
  Records, maintaining, 114–115. See also
    Documentation of information
  Recovery, 12 steps to, 453
  Recurrent brief depression, 259
  Referrals:
    focused, 102
    malingering and, 85
    signing of releases and, 95
  Reimbursement. See Insurance reimbursement
  Relapse:
    client’s environment and, 126
    substance-related and addictive disorders and, 418, 419, 430, 445, 447, 450, 455, 461
  Relaxation training, 303
  Remission:
    bipolar and related disorders and, 212
    coding and, 87
  Resources, client:
    assessment and, 142
    diagnostic assessment and, 35
  Reversed vegetative symptoms, 208, 251
  RFL. See Reasons for Living Inventory (RFL)
  Rigid perfectionism, 378
  Risperidone (Risperdal), 194–195, 234
  Safety plan:
    danger to self and others, 119–120
    suicide and, 117–119
  SANS. See Scale for the Assessment of Negative Symptoms (SANS)
  SAS. See Self-Rating Anxiety Scale (SAS)
  Scale for the Assessment of Negative Symptoms (SANS), 183
  Schizoaffective disorder, 170–171, 209
  Schizoid personality disorder (SPD):
    about, 473, 474
    case example - case of Sal, 474
  Schizophrenia:, 167–173
    alternative therapies for, 190
    diagnostic assessment, factors for consideration in, 174–187
    diagnostic assessment and (see Case application of diagnostic assessment, schizophrenia)
    hallucinations and, 180
    misdiagnosis and, 176–177
    multiple episodes, 168
    provisional diagnosis and, 78
    schizoaffective disorder and, 90
    self-harm and, 190
    sinus infection and, 78, 99
    special concerns in placing diagnosis for, 175–176
    suicide and, 188
    treatment and, 176–177 (see also Schizophrenia
      treatment planning and intervention strategy)
Schizophrenia spectrum, 149–197
  basic understanding of conditions, 150–151
  biology and etiology of, 152–153
  case example - case of Jacob, 177–178
  diagnostic assessment, beginning, 173–174
  diagnostic assessment and, 177–181
  dimensional assessment and, 177
  dimensional measurement, 43
  diseases, types of, 161–162
  future directions and, 196–197
  hallucinations and, 90
  other specified or unspecified, 172–173
  overview of, 160–167
Schizophrenia treatment planning and intervention
  strategy, 186–195
  acute care and, 188
  acute treatment plan and intervention, 186–187
  alternative therapies and, 190
  family and support systems, 191
  general considerations for chronic care treatment
  planning and practice strategy, 187–188
  goals, identified, 186
  medication and, 191–195
  medication as treatment modality, 191
  sample treatment plans, 188, 189–190
  transition care, treatment planning, and strategy, 187
Schizophreniform disorder, 78, 90, 165–167
Schizotypal personality disorder, 162, 180
  medication and, 194–195
Schizotypal personality disorder (STPD):
  about, 474–476
  case example - case of Marge, 476
Screen for Posttraumatic Stress Symptoms (SPTSS), 323
SCU. See Telephone Delivered Sex Checkup
(SCU):
SDCSW. See Sexual Desire Conflict Scale for
Women (SDCSW)
SDFMS. See Semantic Differential and Mood Scales
(SDFMS)
SDI-2. See Sexual Desire Inventory (SDI-2)
Section I, DSM-5, 39–40
Section II, DSM-5, 40–41
Section III, DSM-5, 42–44
Security Rule, 116
Sedatives-hypnotic-anti-anxiety-related disorders, 461
Selective serotonin reuptake inhibitors (SSRIs):
  children, adolescents and, 269
  list of, 270
  obsessive-compulsive disorder and, 305
  sexual dysfunctions and, 347
  trauma and stressor-related disorders and, 334
Self-determination:
  client’s right to, 52
  danger to self and others, 119–120
Self-help group, mutual peer-to-peer, 452
Self-help strategies, diagnoses and, 24
Self-Rating Anxiety Scale (SAS), 491
Self-referrals, malingering and, 85
Self-regulatory executive function model (S-REF),
  304–305, 332
Self-reporting:
  obsessive-compulsive and related disorders and,
  282–283
  trauma and stressor-related disorders and, 312
Semantic Differential and Mood Scales (SDFMS),
  264
Senior citizens. See Older adults
Separation anxiety disorder:
  depressive disorders and, 262
  overview of, 518–520
  treatment plan, 520–521
Serotonin, 152, 269, 455
Service plan, assessment process and, 34
SES. See Sexual Inhibition (SIS) and Sexual
  Excitement (SES) Scales I; Socioeconomic
  status (SES)
Sex education, 339
Sexual Desire Conflict Scale for Women (SDCSW),
  362
Sexual Desire Inventory (SDI-2), 350
Sexual dysfunctions, 338–370
  assessment scales/treatment methods, 361–364
  basic understanding of, 338–340
  case example - case of Julian, 354–355
  cultural aspect, diagnosis and, 367–368
  desire for sexual activity and, 339–340, 356
  diagnostic assessment and (see Sexual dysfunctions,
    diagnostic assessment)
  DSM-5 and, 344
  environmental and situational issues and, 356
features and terms related to, 341–343
future directions and, 369–370
individuals suffering from, 340–341
medical conditions and, 355–356
most common, 338
overview of, 343–353
partner-relationship issues and, 356
psychological aspects and, 356
sample treatment plan, 359–360
severity of, specifying, 343
sexual abuse and, 350
subtypes, 341–343
treatment methods, overview of, 358–361
Sexual dysfunctions, diagnostic assessment, 353–358
case example - case of Julian, 354–355
completion of, 357–358
treatment planning and intervention strategy, 358
Sexual Inhibition (SIS) and Sexual Excitement (SES)
Scales I, 350, 363–364
Sexual Interaction System Scale (SISS), 350, 362
Sexual intercourse:
drugs and, 347
normal frequency and, 340
pain during (see Genito-pelvic pain/penetration disorder (GPPD))
Sexuality, depressive disorders and, 270–271
Sexual response cycle, phases of, 341
Shared psychotic disorder, 195–196
Shenjing shuairuo, 55–56
Short-duration depressive episode, 259
SIDs. See Substance-induced disorders (SIDs)
Sinus infection, 78, 99
SIS. See Sexual Inhibition (SIS) and Sexual Excitement (SES) Scales I
SISS. See Sexual Interaction System Scale (SISS)
Situational ethnicity, 47
Skin picking (excoriation) disorder, 287
Sleep agents, 305, 334
Sleep-related disorders, 222
SOAP. See Subjective, Objective, Assessment, Plan (SOAP)
SOAPIE. See Subjective, Objective, Assessment, Plan, Implementation, Evaluation (SOAPIE)
SOAPIER. See Subjective, Objective, Assessment, Plan, Implementation, Evaluation, Review (SOAPIER)
Social factors, documentation of, 94
Social functioning, person in environment and, 17
Social information, gathering, 72–73
Social learning theory, 338
Social workers:
person in environment and, 16
role of, 4–6
Societal influences, 49, 49–50
Socioeconomic status (SES), 91
Solution-focused approaches, 134–135, 143
Solution-focused brief therapy (SFBT), 134–135
Soteria project, 190
SPD. See Schizoid personality disorder (SPD)
Specifiers (“specify if”/“specify whether”), 87
Specifiers, bipolar and related disorders:, 209–212
with anxious distress, 210
with atypical features, 211
with catatonic features, 211
with melancholic features, 211
with mixed features, 210
with peripartum feature, 211–212
with psychotic features, 211
with rapid cycling, 210–211
related to remission and current severity, 212
with seasonal pattern, 212
Speech, disorganized, 156–157
Spiritual information, gathering, 72–73
SPTSS. See Screen for Posttraumatic Stress Symptoms (SPTSS)
S-REF. See Self-regulatory executive function model (S-REF)
SSRIs. See Selective serotonin reuptake inhibitors (SSRIs):
Stereotypy, 159
STPD. See Schizotypal personality disorder (STPD)
Strengths, client:
assessment and, 142
diagnostic assessment and, 35
Stressor-related disorders. See Trauma and stressor-related disorders
Stressors, psychosocial, 50
Subjective, Objective, Assessment, Plan, Implementation, Evaluation, Review (SOAPIER), 111, 112
Subjective, Objective, Assessment, Plan, Implementation, Evaluation (SOAPIE), 111, 112
Subjective, Objective, Assessment, Plan (SOAP), 111, 112, 113
Substance abuse. See also Substance-related and addictive disorders chart, sample, 228
clinician-rated dimensions of psychosis symptom severity, 90–91
coding medical conditions and, 97–100
crosscutting of symptoms measures, 88–89
diagnostic codes and, 212
documentation of information, 92–97
questions to guide process, 94
special considerations, 100–101
WHODAS: assessing disability, 91–92
SUD. See Substance-related and addictive disorders
Suicidal intent, 208
Suicidal thoughts, 269
Suicide:
  assessing for/safety plan, 117–119
danger to self and others, 119–120
schizophrenia and, 188
Suicide attempts, acculturation adjustment problems and, 57
Suicide ideation:
crosscutting measurement and, 89
depressive disorders and, 85, 260, 271
older adults and, 59
prominence of, 208
Support network. See also Family systems; Group therapy, diagnostic assessment and, 35
Susto, 56
Systematic desensitization, 303
Taijin kyofusho, 56
Tardive dyskinesia (TD), 81, 193
TBI. See Traumatic brain injury (TBI)
TD. See Tardive dyskinesia (TD)
Team approach:
  about, 25, 28
  assessment and, 32–33
  information gathering and, 72, 74
  interdisciplinary team and, 26–27
  multidisciplinary team, 25–26
  transdisciplinary teams and, 27
Telephone Delivered Sex Checkup (SCU), 454
Termination, time-limited settings and, 131
Tests, diagnostic assessment and, 46
Thinking, disorganized, 156–157
Third-party payment, 16
Three DSM-5 sections, 39–40
  list of, 13, 39
Section I, 39–40
Section II, 40–41
Section III, 42–44
Time-limited brief therapies, 129–131
Time-limited practice:
in behavioral health care, 128–129
time-limited brief therapies, 129–131
types of, 131–140
TMCU. See In-School Teen Marijuana Checkup (TMCU)
Tolerance:
defined, 421
DSM-5 and, 422
Training, in counseling fields, 18–19
Transtheoretical model (TTM), 449
Trauma:
defined, 309
unknown, 94
Trauma and stressor-related disorders, 309–334
acute stress disorder (ASD), 320
adjustment disorders, 320–321
basic understanding of, 309–310
diagnostic assessment (see Trauma and stressor-related disorders, diagnostic assessment)
features related to, 311–312
future directions and, 335
medication as treatment modality, 334–335
overview of, 313–315
posttraumatic stress disorder (PTSD), 315–319
self-reporting and, 312
understanding individuals suffering from, 310–311
Trauma and stressor-related disorders, diagnostic assessment, 321–333
behavior therapies and, 333
case example - case of Marmarie, 323–328
cognitive-behavioral therapy and, 331–332
computer-based treatments and, 332–333
family therapy and, 333
integrated approach and, 333–334
sample treatment plan, 329–330
self-regulatory executive function (S-REF) model and, 332
supporting diagnostic assessment, 322–323
treatment planning and intervention strategy, 328
treatment planning and practice strategy, 328, 330–331
Subject Index

Traumatic brain injury (TBI), 319, 457
Treatment plan:
  development of, 120–123
  diagnostic assessment and, 103
  documentation, practice strategy and, 107–116
  factors guiding initiation of, 140–142
  intervention planning and, 116–117
Trichotillomania, 287
Tricyclic antidepressants, 305, 334
12 steps to recovery, 453

Uncomplicated bereavement:
  DSM-5 and, 84
  treatment plan, sample, 123–124
Underdiagnosing, 84
Unipolar disorders, 259–260
Unipolar term, 213, 243
Unspecified bipolar and related disorder, 202, 214, 215
Unspecified bipolar disorder, 214, 220
Unspecified catatonia, 172
Unspecified depressive disorder, 259
definition, brief, 248
Unspecified disruptive, impulse-control and conduct disorder, 386–387
Unspecified obsessive-compulsive and related disorder, 288
Unspecified personality disorder, 486–487
Unspecified sexual dysfunction, 353
Unspecified trauma-and stressor-related disorder, 309, 321
Updates/structural changes, 35–44
  changes to organizational structure, 37–38
dimensional assessment, 38–39
  research evidence and, 36–37
Urinary tract infection (UTI), 71

Vaginismus, 349
Values. See Beliefs and values
Vancouver Obsessional Compulsive Inventory, 293
V codes, 66
Vegetative term, 208, 251
Vision problems, 100, 101
Vulnerability and resilience, cultural factors of, 50

Washington Post, 3
Waxy flexibility, 159, 180–181
Webster-Stratton Incredible Years Program, 409
Wellstone-Domenici Mental Health and Addictions
  Equity Parity Act of 2008, 424, 459
Wernicke’s encephalopathy, 435
WHODAS:
  administration of, 180
  case application and, 184
disability assessment and, 91–92
  self-administered version, 185–186
WHODAS 2.0, 43
WHO Disability Assessment Schedule, 92
Whole person:
  biomedical information and, 72
  working with, 31–32
Withdrawal:
  detoxification and, 454
  substance intoxication and, 431, 433, 434–436
Withdrawal, defined, 421
World Health Organization:
  ICD-10 and, 63
  WHODAS 2.0 and, 43
Worldview, client’s, 34

Yale-Brown Obsessive-Compulsive Scale, 293
Z codes, 66