

Psychology 2260

Abnormal Psychology

Student Course Materials

Flexible Learning in the Learning Commons

College of DuPage

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Notes:

Section 1: Syllabus

Catalog Description Including Prerequisites

PSYCHOLOGY 2260

Abnormal Psychology

3 credit hours

An introduction to the theoretical approaches and empirical research in psychology used to define, assess, categorize, prevent, and treat psychological disorders. Prerequisite: Psychology 1100.

Course Objectives

Upon successful completion of the course the student should be able to do the following:

- Identify and apply theoretical approaches that are used to define, assess, and categorize psychological disorders
- Identify, compare, and evaluate the therapeutic approaches and assessments associated with each of the major theories
- Understand and evaluate the research methods used in abnormal psychology
- Identify the symptom pattern for major categories of psychological disorders according to the Diagnostic Statistical Manual
- Apply the categorization system of the Diagnostic Statistical Manual to case studies

Course Materials

You will need the following materials to successfully complete this course. Books are available from the College of DuPage Bookstore and at local college bookstores.

Textbook (required): Oltmanns, Thomas and Emery, Robert (2012). Abnormal Psychology 7th edition Prentice Hall, New Jersey. The textbook can be bought at the College of DuPage bookstore, at local college bookstores or on-line bookstores.

Abnormal Psychology, 7/E



MyPsychLab comes with the new text if purchased at the College bookstore **and is highly recommended for the course**. You may also purchase MyPsychLab separately through the publisher's website or the College of DuPage bookstore. **To access MyPsychLab**, you will need to go to <http://pearsonmylab.com> enter the Access Code that comes with the text **and** the following Course ID: lettieri80564

If you do not have Internet access at home, you can use College of DuPage computers. Refer to the computer information on page 11 of this document.

Audio and Video Lessons

In addition to the text readings you will be assigned 13 one-hour video lessons to view from the Annenberg Series “The World of Abnormal Psychology” and 5 one-hour lessons from the PBS Home Video Series “The Secrets of the Brain.”

Several options are available for viewing video lessons.

- View *The World of Abnormal Psychology* programs online with a broadband connection on the Annenberg Media Website <http://www.learner.org/resources/series60.html> for no cost.
- Checkout individual video lessons at the Off-Campus Learning Commons at Bloomingdale, Naperville, or Westmont.
- Rent all lessons for the entire term from the College Library in Glen Ellyn for a nominal fee.
- View video lessons at the main campus Library or the Off-Campus Learning Commons.

For more information about the Library, visit www.cod.edu/library.

Visit <http://www.cod.edu/academics/resources/flexlearning/index.aspx> for hours and other information about Flexible Learning.

The videos are designed to give you additional explanations of the concepts and disorders you have been reading about. They will provide you with examples of professionals working with individuals who have the disorders.

The series on the brain will give you very detailed information on biological explanations for the various disorders. This information is very current and should enhance your understanding of the material in this course. This visual material is sometimes easier to recall at exam time than material you have read. The videos also highlight key points about the disorders.

There will be questions on the exams covering the material in the videos.

Case Studies

Case study assignments are required for Units 2, 3 & 4. The Course Handbook Section 4 provides the cases, the outline that you will follow in writing your assignments, and details on the format and information to be included in the assignment. The graded papers will be mailed back to you.

If you select the service learning option, you will have journal entries and a case study based on an individual you observe through your service learning experience. This service learning project would substitute for the 3 case study assignments described above.

Details on the nature of your paper for the service learning project are included in the Course Handbook. In addition, a packet of materials explaining the project will be provided to you during your initial appointment with your instructor.

Your Case Study assignments and Service Learning Paper will assess your **application, analysis** and **synthesis** skills.

Service Learning

A service learning option (10-20 hours at a community agency) is available for this course. This volunteer assignment would substitute for the case study assignments that are explained in the Course Handbook. If this type of opportunity is of interest to you, please contact your instructor early in the semester about sites that are available for you to do your service, as well as the type of report that would be due upon completion of your service learning experience.

You must contact the instructor before starting your service learning project.

This type of opportunity is recommended because it not only contributes to your community, but it provides you with experience working with individuals who are experiencing a variety of psychological problems; it will make your coursework more interesting and rewarding. In addition this type of experience could be listed on your resume and if you are considering working in the field of mental health, this would definitely give you an advantage.

Talk with your instructor if you have questions about the nature of this assignment. More details are in the Course Handbook.

Orientation

Group orientations are scheduled at the beginning of each term. Check your Orientation & Deadline Dates sheet for times and dates. This information is posted in Blackboard. These are **optional (but highly recommended), however if you are selecting to do the service learning option, you need to meet with your instructor early in the term to get an orientation to the service learning experience.**

If you miss the group sessions, orientations can be done individually either in person or by phone during your instructor's scheduled hours. These hours are listed on the Contact Information and Availability Sheet, in the information for Psychology 2260 in Blackboard at bb.cod.edu.

The purpose of the orientation is to be sure you:

1. Have all the required material.
2. Know what needs to be done to begin the course.
3. Set a schedule that will allow you to successfully complete the course on time.
4. Establish contact with your instructor so you will be more comfortable asking questions.

If you are an experienced distance learning student you may be able to begin the course without an orientation. The information in this Syllabus and the Course Handbook should provide adequate direction for proceeding through the course.

Exams and Evaluations

Five Unit Exams are required for this course. Each exam consists of multiple choice questions, covering material presented in the text and videos.

There are two forms of each exam available. You must do Form A first. If you are not satisfied with your score you may do additional reviewing and studying and take Form B of the exam. Your highest score will be counted toward your grade. Your exams will be taken on a computer and will be graded immediately after you complete the exam.

These exams are fairly detailed and as you study for your exams focus on definitions of key terms, concepts, and perspectives. Be able to apply what you are learning. Questions on the exam will assess **knowledge, understanding and application**. Practice tests for each unit are available through your Blackboard account. Log in to your Blackboard account, click on Psychology 2260 then click on Practice tests.

Students will turn in their Case Study Assignments in Learning Commons.

Service Learning assignments may be turned in to the instructor during the scheduled appointments. These arrangements can be made with the instructor.

Students will turn in their assignments in the Learning Commons.

Exams will be administered in the Testing Center on campus or at the Off-Campus Learning Commons where you are registered.

Exams will be graded in the Testing Center or at an Off-Campus Learning Commons and your score will be reported to you at that time. After completion of an exam, you are encouraged to meet with your instructor during his/her scheduled hours to discuss missed questions. If you are unable to make this time, please contact the instructor to discuss other options.

Grading Policy

Your grade will be based on the number of points earned during the course.

A total of 460 points may be earned by completing all assignments and taking all the exams and receiving maximum points.

3 Case Study Assignments	50 points each	150 points
	Or	
Service Learning Assignment	150 points	
5 Module Exams		310 points
Unit 1	90 points	
Unit 2, 3, 4	50 points each	

A = 414-460

B = 368-413

C = 322-367

D = 276-321

Testing Locations

Students should take their quizzes and exams in the Testing Center in Glen Ellyn (BIC 2405) or at the Off-Campus Learning Commons in Bloomingdale, Naperville or Westmont. Appointments are not required. Tests may be taken on a computer or on scantron (paper/pencil) at each location, but you must request the scantron tests. Tests are not offered on the internet, however there are practice tests available on your Blackboard account.

When you are ready to take a quiz or exam, sign in at the front desk. You will be expected to write in the date, course name and number, the instructor's name, test number, and time the exam is taken. You must present a photo ID as well. You may not use notes or books during the exam. No food, drink, pagers or cell phones are allowed in the testing room.

Each test must be completed in one sitting. All tests will be collected 10 minutes prior to closing. It is important for you to plan sufficient time to complete your test within the Center's hours. No additional time will be given to complete a test. No tests are distributed 30 minutes prior to closing.

Satisfactory/Fail (S/F) Grade Option

The instructor retains the prerogative to determine whether the "Satisfactory/Fail" option is applicable to the course. It is the responsibility of the instructor to set deadlines for a student's grade option decision and communicate these deadlines to the student during the student's first week of instruction. All students desiring the "Satisfactory/Fail" option must sign an agreement with the instructor confirming the use of the "Satisfactory/Fail" grading option. Grade option forms will be submitted to the Registration Office no later than one week prior to the end of the course. Grade options will not be changed after they have been sent to the Records office. The satisfactory or "S" grade will not be computed in the GPA; the fail or "F" grade will be computed. Students seeking an associate's degree may apply a limited number of hours of satisfactory or "S" credit toward these degrees.

Incomplete Policy

In order to receive an incomplete grade, **you must obtain permission from the instructor**, satisfy minimum completion requirements, and sign an incomplete contract. A minimum amount of completed work is required to receive an incomplete grade. Contact the instructor if you are interested in receiving an incomplete grade. You should be aware that an "I" grade on a transcript may be interpreted by other colleges as an "F". If you do not complete the remaining course work by the deadline specified in the incomplete contract, then you will receive an "F".

An “I” grade will be given only when all the following conditions are met:

1. A contract must be filled out and signed, indicating work to be completed and the completion date. Students will be allowed up to one additional term in which to complete their work.
2. The student must have completed one-half of the course requirements by the end of the original term with a grade of “C” or better.

All incomplete work must be completed by the contracted date.

Exceptions to the above may be made by special arrangements with the instructor. Students should be aware that an “I” grade left on a transcript may be interpreted by other colleges as an “F”. It may also affect other aspects of a student’s college experience, such as financial aid.

Withdrawal Policy

Course Withdrawals

Students are encouraged to consult directly with the instructor when considering a course withdrawal. The student may withdraw from a course by contacting the Registration Office up to eight days after the mid-term date of the class. Thereafter, a grade will be assigned which reflects the student’s actual performance in the class. Exceptions require an agreement with the instructor and the student. Written permission to withdraw signed by the instructor must be presented to the Registration Office by the student prior to the end of the term.

Medical Withdrawals

Requests for medical withdrawals should be made to the Dean of Enrollment Services. Send medical forms to Student Registration Services, SSC 2221, (630) 942-2687. Requests should be made in writing and accompanied by documentation from a physician or medical institution to verify the medical condition, date of onset and estimated length of treatment. [Request forms for medical withdrawals](#) are reviewed individually. Refunds are issued when appropriate within the guidelines of the College of DuPage refund policy. You will receive written notification of the decision within three (3) weeks from the office of the Student Registration Services.

Administrative Withdrawals

Students not actively pursuing the completion of course objectives may be withdrawn from the class by the instructor any time up to two weeks prior to the end of the term and given a grade of “W” without an official withdrawal through the Registration office.

Plagiarism/Academic Dishonesty Policy

All work submitted for credit must be completed by the student who is registered for the course. Disciplinary action will be pursued in all instances in which it is determined that academic dishonesty has occurred. Academic dishonesty can include the dishonest use of course materials such as student papers and exams.

Library Information

The College of DuPage Library has a wealth of information in both print and online formats. The Library homepage is found at <http://www.cod.edu/library>. To access the online sources, click on Databases. You may access these databases from within the Library or from off-campus with a College of DuPage library card. You will need to come to the Library or an Off-Campus Learning Commons to get a card.

The Library is located in the Student Resource Center (SRC) building at the Glen Ellyn campus.

Additional information regarding the current Library hours and services can be obtained by visiting their web site at www.cod.edu/library.

Computer Use

The Library computers may be used for more than accessing the Library Catalog and online sources. You can also use Microsoft Word, Excel, PowerPoint, and Access.

Learning Commons computers are intended for all Flexible Learning students; therefore, use must be restricted to tasks that take less than 30 minutes. You may use tutorials and review course materials with your instructor. Access is granted on a first-come, first serve basis.

Academic Computing Center (ACC) is located in the Student Resource Center (SRC) room 3600. The Academic Computing Center is open for use by individuals registered at College of DuPage, as well as, community residents.

Off-Campus Learning Commons welcome Flexible Learning students to use the computers. Access is granted on a first-come, first serve basis. To use computers at an Off-Campus Learning Commons, the person must be currently enrolled at the College of DuPage and have a photo ID.

At all College of DuPage computer labs, you are expected to work independently and bring your own storage media for your work. Please check for and remove viruses before each use. No peripheral equipment (e.g. calculators, laptop computers, or mice) may be attached to any computer. Students may NOT install software or programs on any computer in the computer labs.

Notes:

Section 2: Course Map

<i>Number</i>	<i>Required Text</i>	<i>Video Tapes</i>	<i>Activity</i>	<i>Exam Number</i>
1.	Chapter 1: Examples and Definitions of Abnormal Behavior Chapter 2: Causes of Abnormal Behavior Chapter 3: Treatment of Psychological Disorders Chapter 4: Classification and Assessment of Abnormal Behavior Chapter 18: Mental Health and the Law	<i>Annenberg Series:</i> 1: Looking at Abnormal Behavior 12: Psychotherapies 13: Ounce of Prevention	No Paper	Exam 1A/1B 90 items
2.	Chapter 6 Anxiety Disorders Chapter 7 Acute and PTSD, Dissociative and Somatoform Disorders Chapter 9 Personality Disorders The first two units are due by mid-term. Please check Orientation and Deadline dates on Blackboard for the mid-term date.	<i>Annenberg Series:</i> 3: The Anxiety Disorders 5: Personality Disorders <i>PBS Home Video Series:</i> 4: The Adult Brain (Depression and Anxiety Disorders)	Case Study Paper OR Service Learning Assignment	Exam 2A/2B 50 items
3.	Chapter 10: Eating Disorders Chapter 11: Substance Use Disorders Chapter 12: Sexual and Gender Identity Disorders	<i>Annenberg Series:</i> 6: Substance Abuse Disorders 7: Sexual Disorders <i>PBS Home Video Series:</i> 3: The Teen Brain (Schizophrenia and Substance Abuse)	Case Study Paper OR Service Learning Assignment	Exam 3A/3B 50 items
4.	Chapter 5: Mood Disorders and Suicide Chapter 13: Schizophrenic Disorders Chapter 14: Dementia, Delirium and Amnesic Disorders	<i>Annenberg Series:</i> 8: Mood Disorders 9: Schizophrenias 10: Neuropsychological Disorders <i>PBS Home Video Series</i> 3: The Teen Brain (Review) 4: The Adult Brain (Review) 5: The Aging Brain	Case Study Paper OR Service Learning Assignment	Exam 4A/4B 50 items
5.	Chapter 15: Mental Retardation/Developmental Disorders Chapter 16: Psychological Disorders of Childhood Chapter 17: Adjustment Disorder Chapter 8: Stress and Physical Health	<i>Annenberg Series:</i> 11: Behavior of Disorders of Childhood 2: The Nature of Stress 4: Psychological Factors and Health <i>PBS Home Video Series</i> 1: The Baby's Brain 2: The Child's Brain	No Paper	Exam 5A/5B 70 items

The first 2 units are due by mid-term. Points will be deducted for work turned in past that date.

Look at the Orientation and Deadline Dates Sheet, in Blackboard for the mid-term date for this course.

Notes:

Section 3: Course Handbook

Foreword

How to Use the Handbook Section

This course handbook should serve as the guide to direct you to the readings and assignments that are required for this course.

If you are starting the course late, then your instructor can assist you in setting up a time schedule that would allow you to complete the course on time. Check the Orientation & Deadline Date sheet for **deadline dates** and instructor information.

Note to Students

The unit assignments that follow will inform you specifically of what work needs to be done for each unit. The recommended time frame for completion of **each unit is three weeks**.

Use the semester calendar to map out when you will do your readings, view your videos lessons, write your paper (do your volunteer service learning) and take your exam. If you mark these tasks on the calendar as well as other requirements of other courses you are taking, or other commitments at work or with your family, you can quickly see where time conflicts occur and make necessary adjustments in your schedule.

It is recommended that you begin the course promptly. Set up your course work schedule and call your instructor if you have any questions. If you are unable to contact your instructor during their scheduled hours, call and leave a message on their voice mail or contact your instructor via e-mail (addresses are listed on the Instructor Availability Sheet).

A Word of Warning: A common ailment that strikes students taking an abnormal psychology course is that students begin to think they have the disorders they are reading about. This ailment is so common it has been given a name, the “medical student syndrome.” Rest assured you do not have all of the disorders.

Though it is helpful to try and personalize the material you are reading to help you store it in your long-term memory, overly personalizing the material may lead to development of the medical student syndrome.

The early chapters in your text will begin to help you differentiate between normal and abnormal behaviors and could serve as a reference to help you keep a proper perspective, as you read the chapters that follow on the various disorders.

Service Learning

There is an optional service-learning project available for this course.

In lieu of doing the case study assignments, you may instead choose to do 10-20 hours of service learning (the hours will depend on the agency you choose). The service-learning component will allow you to either observe or to work with individuals who have a clinical diagnosis and to see the interventions used to treat them. The time that you put in will not only be helpful to you by giving you real life examples and experience in this field, but it will also help the social service agency and community.

For the service-learning component **you must contact your instructor and make an appointment early in the term.** You will also be required to meet during the term with your instructor; appointment times can be arranged at your first meeting. You will receive detailed information about the project and the sites available in your community at your initial appointment.

For the project you will be required to turn in the following assignments based on your 10-20 hours of service:

1. **Reflections Journal** (50 points) For each 1-2 hours of service you provide, you are to write a journal entry (minimum of 10 entries) noting how the experience has impacted you personally.
2. **Connections Journal** (50 points) For each 1-2 hours of service you provide, you are to write a journal entry (minimum of 10 entries) connecting your experience to course material from the text or videos.
3. **Case Paper** (50 points) Based on your observations, choose one individual and write a case paper about him/her using the outline for the case study paper that is included in the course handbook. **Remember to respect the individual's confidentiality when writing your case paper.**

Case Study Assignments

For 3 of the units you are to complete either an outline (Unit 2) or a paper (Units 3 and 4) based on the case study included with each unit assignment. Each paper should be about 5 pages in length, typed, double spaced. Each paper is to be done using the format of the Case Study Outline that is included in this course handbook.

The outline is based on the DSM IVTR axes. You are to diagnose the individual in the case study on Axis I and/or Axis II, and include a list of behavioral examples to support your diagnosis. Use the text and video information to help you in your diagnosis. If no diagnosis is made on an axis write "deferred" or "not applicable."

On Axis III you will list the person's physical conditions that might be contributing to the diagnosis. Do not confuse the symptoms of Axis I disorders with medical conditions (e.g. fatigue and sleep difficulties are support points for Major Depression on Axis I and NOT medical conditions under Axis III.) Again, if not applicable, write "deferred."

Axis IV will require an assessment of psychosocial stressors present in the person's life and listing of those stressors and how they contribute toward maintaining the disorder.

Axis V requires an assessment of global functioning and supporting behavioral examples. Consider the individual's employment (if they are a student, then school is considered their job), relationships, and self-care skills.

An explanation of the DSM IVTR and the various axes is in your text and you may need to refer to that chapter frequently as you write your case study assignments.

In the Assessment section of the paper, you will need to gather information to help clarify the diagnosis and determine the best treatment for the individual. It may be helpful to review Chapter 4. Remember to include specific questions as well as other types of assessments.

In the etiology section, you will be asked to discuss the causes of the disorder for this individual. It is important that you cite specific information about the possible causes in the individual's history to support the development of this disorder. DO NOT restate the symptoms as the cause of the disorder. It may be helpful to review Chapter 2.

It is helpful to organize both the assessment and etiology sections of your assignment around the perspectives in the text; physiological, sociocultural, and psychological. Offer an explanation on the origins of the disorder from each of the perspectives.

In the last section of the case study assignment you are to develop a viable treatment. Use text information on the disorder and video information to assist you in developing a treatment plan. Again, organize your thinking around the theoretical perspectives. It may be helpful to review Chapter 3.

Your Unit 2 assignment must be turned in by mid-semester. Papers for Units 3 and 4 must be turned in 14 days apart with the last paper being turned in prior to the deadline date noted on the Orientation & Deadline Date sheet.

Notes:

Unit 1

Overview of the Unit

Chapter One will offer you a definition of abnormal behavior. The answer, as you will see, is complex and takes into consideration a variety of perspectives. In chapter one of your text you will be introduced to the use of case studies, the politics of abnormal behavior, the dimensions vs. categories controversy, and a brief historical overview of the treatment of mental illness.

Chapter Four develops in detail the controversy of dimensions vs. categories, and introduces you to the current categorization system, the Diagnostic Statistical Manual Fourth Edition TR (DSM IVTR). This is the chapter you will need to refer back to as you write your case study assignments for this course. An explanation is also included of how the diagnostic system was developed and how to evaluate a classification system. Psychological assessments are also introduced in this chapter as well as assessments from several other perspectives, biological and social.

Chapter Two (note, it is recommended that you read the chapters out of order) begins to explain the various theoretical perspectives used to view abnormal behavior and their causes. This is an important chapter to understand since in many ways it forms the basis for this course. All of the disorders that will be explained in the following chapters will be addressed from each of these perspectives.

Chapter Three introduces you to the treatments for psychological disorders. The various treatments are tied to the theories that you learned about in the previous chapter. Make an effort in your notes to clarify this relationship as you study this chapter. As you prepare for your exam and case study papers it will be helpful to see the relationship between cause and treatment presented from each theoretical perspective.

Chapter Eighteen covers the issues of mental health and the law. It highlights court cases that played a significant role in determining the rights of mental patients. Many current news stories involving mentally ill individuals and violent crimes, call into question the role of the courts in the lives of individuals and families dealing with mental illness. It is an area that is of great societal interest and impact.

The first video lesson you will watch for this unit briefly covers the definition of abnormal behavior but then focuses on where people with emotional problems seek help; who are the practitioners; and what are the components of an assessment. A brief overview of each of the theoretical models is also given. Take notes on these sections.

Video #12 discusses the therapeutic relationship and the integration of therapies (eclectic models.) It then introduces you to clients being treated with a psychodynamic therapy, a cognitive-behavioral therapy, and a gestalt therapy. You will also see examples of couples therapy and group therapy. Note the differences in these types of therapies as you view the video.

Video #13 explains the early intervention steps that can be taken to prevent mental illness. It presents the difficulties in taking this approach but then highlights several programs around the country that have been successful in working with individuals who are at risk for developing mental disorders.

Objectives

The overall objective for this unit is to introduce you to the theoretical perspectives in psychology and their view of the causes of abnormal behavior. This unit also introduces you to the DSM IV TR

Learning Activities

Read: Text Chapters

- 1 Examples and Definitions of Abnormal Behavior
- 4 Classification and Assessment
- 2 Causes of Abnormal Behavior: From Paradigms to Systems
- 3 Treatment of Psychological Disorders
- 18 Mental Health and The Law

View: Video lessons

- 1 Looking at Abnormal Behavior
- 12 Psychotherapies
- 13 Ounce of Prevention

Key Terms

Chapter One

Psychopathology
Abnormal Psychology
Syndrome
Insanity
DSM-IV-TR
Psychosis
Epidemiology
Co-morbidity
Psychiatrist
Psychologist
Case study

Chapter Two

Etiology
Paradigm
Psychoanalytic paradigm
Id
Ego
Superego
Defense mechanisms
Oedipal conflict
Electra complex
Cognitive-behavioral paradigm
Classical conditioning
Operant conditioning
Humanistic paradigm
Systems theory
Causality
Diathesis-stress model

Chapter Two (cont.)

Developmental psychopathology
Pre-morbid
Prognosis
Neurons
Synapse
Neurotransmitters
Re-uptake
Midbrain
Forebrain
Hindbrain
Reticular activating system
Limbic system
Hypothalamus
Cerebral cortex
Autonomic nervous system
Endocrine system
Corpus callosum
Frontal lobe
Parietal lobe
Temporal lobe
Occipital lobe
Behavior genetics
Evolutionary psychology
Attachment theory
Temperment
Emotions
Cognition
Attribution
Modeling
Social factors

Chapter Three

Treatment
Psychotherapy
Biological treatments
Psychopharmacology
Psychodynamic psychotherapies
Psychoanalysis
Free association
Transference
Interpretation
Cognitive-behavioral therapy
Systematic desensitization

Aversion therapy
Rational-emotive therapy
Contingency management
Social skills training
Humanistic therapies
Psychotherapy outcomes
Family therapy
Group therapy

Chapter Four

Assessment
Diagnosis
Labeling theory
Reliability
Validity
Assessing psychological systems
Interviews
Observation
Rating scales
Behavioral coding systems
Personality inventories
MMPI-2
Self-report inventories
Beck depression inventory
Projective personality tests
Assessing social systems
Assessing biological systems

Chapter Eighteen

Criminal responsibility
Insanity
Competence
Irresistible impulse
Civil commitment
Outpatient commitment
Deinstitutionalization
Informed consent
Child custody
Duty to warn
Confidentiality

Assignments

NO PAPER FOR UNIT 1.

Exams

Prepare for and take your exam. Exam 1 contains 90 multiple-choice items.

Proceed to Unit Two.

Unit 2

Overview of the Unit

In this unit you will begin to explore disorders that are perhaps the most common. Anxiety is viewed as the underlying cause of all of these disorders. The development of the various symptom patterns that form the syndromes are thought to be abnormal attempts on the part of the individual to deal with this anxiety. As you read each chapter you will begin to understand how the various theoretical models offer an explanation on how these disorders develop (their cause or etiology) as well as treatments or combinations of treatments that are most effective.

Video #3 attempts to define anxiety and distinguish normal anxiety responses from abnormal anxiety responses. It presents case illustrations of Panic Disorder, Agoraphobia, and Generalized Anxiety Disorder. Origins and treatment are also covered from the various theoretical perspectives.

Video #5 defines personality (necessary for a discussion of individuals with a disordered personality); then defines personality disorders and helps to distinguish the disorder from other eccentric behaviors that normal individuals may exhibit. The case illustrations focus on Narcissistic, Antisocial and Borderline Personality Disorders. Following the same format as the other videos (and your text) causes and treatments are also covered.

The video from the Secret Life of the Brain series (#4) covers depression (which you will be asked to review in a later unit) and anxiety disorders. It provides you with very current brain research on contributing factors to the development of anxiety disorders.

Objectives

- To know the distinguishing symptom pattern for each of the anxiety disorders and personality disorders.

Learning Activities

Read: Text Chapters

- 6 Anxiety Disorders
- 7 Acute and Posttraumatic Stress Disorder, Dissociative Disorders, and Somatoform Disorders
- 9 Personality Disorders

View: Video lessons

- 3 The Anxiety Disorders
- 5 Personality Disorders

Secret Life of the Brain: The Adult Brain #4

Key Terms

Chapter Six

Anxiety
Fear
Worry
Panic attacks
Phobias
Agoraphobia
Generalized anxiety disorder
Obsessions
Compulsions
Causes
Social factors
Cognitive factors
Biological factors
Treatment
Systematic desensitization
Cognitive therapy

Chapter Seven

Acute and Post-traumatic stress disorders
Acute stress disorder
Dissociation
Post-traumatic stress disorder
Dissociative disorders
Dissociative identity disorder
Amnesia
Psychogenic
Depersonalization
Somatiform disorders -
Conversion disorder
Somatization disorder
Body dysmorphic disorder
Hypochondriasis
Malingering
Factitious disorder
Causes
Treatment

Chapter Nine

Personality disorders
Axis II
Ego-dystonic
Ego-syntonic
Five factor model of personality
Personality disorders (cluster A,B,C)
Causes - of each personality D/O
Treatment- of each personality D/O

Assignments

Case Study

Sara

Sara is a 47 year old female who was referred to the psychiatric evaluation center by her doctor. She stated that she had gone to her doctor initially due to continual headaches, difficulty sleeping and at times feeling as though her heart was racing. Sara stated that she has always had these problems intermittently, but that over the past 6 months they have increased.

During the initial interview Sara fidgeted and was unable to sit during the entire interview process (45 minutes). She stated that she drinks several cups of coffee a day because she often feels fatigued. She is extremely thin and reports not being a big eater.

Sara stated that she got divorced 1 year ago and started a graduate program to try to further her career in business. She stated that she feels she needs to be able to advance since she needs more financial stability now that she and her husband are divorced. She stated that she only worked part-time prior to the divorce, but has been working full-time since the divorce. Sara stated that she sometimes has difficulty concentrating because she is so worried about her grades and completing the assignments. She states she also worries about the time it takes away from her being with her two teenage children.

Sara reported that she worries about other things as well...bills, the health of family members, and whether she made the right decision going back for a graduate degree.

Sara stated that she has good friends and dates since her divorce, but often feels like she doesn't have enough time for them given her busy schedule. Recently though, Sara reports withdrawing from family and friends due to feeling overwhelmed with life. She also reported that even when she is with family and friends, she is easily irritated by them.

Sara reported that 6 months ago her ex-husband informed her that he had met someone he would like to marry. Sara and her husband have joint custody of their two children and she worried about how his new wife would impact the children and time she spent with them. She noticed her problems escalating during this time period and had no one to talk to about the situation.

A recent physical exam showed an increase in blood pressure (hypertensive category), rapid pulse (89), and weight loss of 16 lbs from 1 year ago, normal blood work, and normal EKG readings.

Case Study Assignment

1. For the case of Sara, you are to propose a **diagnosis**, on either Axis I or Axis II. Give adequate behavioral examples to support your diagnosis. Use your text to establish the criteria for the diagnosis you are proposing.

2. Using **Axes III, IV and V**, evaluate Sara and provide adequate examples to justify your statements.
3. If you could continue this interview to gather additional **assessment information** to help support the diagnosis, determine cause and aid in developing a treatment plan, **what questions would you ask?**
4. Make a general statement **about causes** of this disorder in individuals. Make a specific statement about causes of this disorder for Sara.
5. Develop a **treatment plan** for Sara. **Indicate the perspective of each therapeutic approach that you include.** (A review of Chapter 3 might be helpful.)

Note on writing your Case Study Assignment: This Course Handbook includes Appendix A the Case Study Outline you are to use when writing your case study paper, and Appendix B the Case Study Outline presented in a worksheet format.

You are to use the worksheet format for the first case study assignment to help you organize your thinking about the case.

Just fill in the blanks with the information that is asked for in each of the items. The outline and worksheet follow the 5 questions noted above.

For this first case study assignment you will turn in the worksheet and receive feedback from your instructor that will help you with your writing case papers 3 and 4.

Service Learning Project Option

Follow the schedule that you set up with your instructor at the start of the term for assignments and appointments for your project.

Exams

Prepare for your exam and drop off your paper. Take Form A of the exam.

Proceed to Unit Three.

Notes:

Unit 3

Overview of the Unit

The chapters you will read in Unit Three cover disorders that are thought to be related to impulse control problems; eating disorders, substance use disorders, and sexual and gender identity disorders. Again note the organization which is presented in the text (and videos), a description of the behaviors or symptoms that define each disorder, the classification in the DSM IVTR, etiology, and treatment.

The first video you will be viewing (#6) covers substance use and abuse. The distinction is made between abuse, dependence and addiction. Case illustrations focus on Cocaine, Alcohol and Nicotine. Sections in the video also cover risk factors for substance abuse and treatment, relapse and prevention for substance abuse.

The second tape (#7 in the series) looks at sexual deviations by presenting case illustrations on paraphilias, rape, gender dysphoria, sexual dysfunction, arousal disorders, and desire disorders. Treatment recommendations are also covered. Also included in this video is an explanation of the concept of the “lovemap.” This concept has proven useful when discussing normal and abnormal origins of sexual behaviors.

The video from the series on the brain, covers Schizophrenia (which you will review in a later unit) and substance abuse related to adolescence.

Objectives

- To know the distinguishing symptom pattern for each of the substance abuse disorders.
- To know the distinguishing symptom pattern for each of the sex and gender identity disorders.
- To know the distinguishing symptom pattern for each of the eating disorders.

Learning Activities

Read: Text Chapters

- 10 Eating Disorders
- 11 Substance Use Disorders
- 12 Sexual and Gender Identity Disorders

View: Video lessons

- 6 Substance Abuse Disorder
- 7 Sexual Disorders

The Secret Life of the Brain: The Teen Brain #3

Key Terms

Chapter Ten

Eating disorders
Anorexia nervosa
Bulimia nervosa
Distorted body image
Amenorrhea
Binge eating
Purging
Causes-
Treatment-

Chapter Eleven

Substance dependence/addiction
Substance abuse
Polysubstance abuse
Psychoactive substances
Stimulants
Depressants
Tolerance
Dependence
Withdrawal
Delirium tremens
Blackout
Flashback
Benzodiazepines
Opiates
Cannabis intoxication
Causes -
Treatment -
Alcoholics anonymous

Chapter Twelve

Sexual response cycle
Hypoactive sexual desire
Male erectile disorder
Female sexual arousal disorder
Premature ejaculation
Sensate focus
Paraphilia
Fetishism
Transvestic fetishism
Sexual masochism
Sexual sadism
Voyeurism
Frotteurism
Pedophilia
Rape/sexual assault
Gender identity disorder
Causes -
Treatment -

Assignments

Case Study

Josh

Josh is a 30 year old male. He contacted the psychiatric services center at the hospital for counseling with regard to his upcoming marriage. He had previously been a client of the psychiatric center during his early teen years to help with adjustment issues relating to his adolescence and his family.

Josh reported that he is about to marry in 3 months and he is becoming increasingly worried about the marriage because of some of his sexual issues. Upon further questioning Josh reported that since adolescence he has utilized women's clothing to become aroused and while masturbating.

He initially stated that he was concerned that when he is married he will be unable to reach arousal with his new wife and will have to rely on wearing an article of women's clothing to become aroused. Upon further discussion of the role of fantasies in a marital relationship and the use of garments, or other props to encourage arousal, Josh indicated that there was more to it that was creating all of the anxiety.

Josh then shared that he had started to wear the items around the house and sometimes dress entirely in female attire. He stated that he had begun to feel more comfortable in women's clothing than in men's; and what started out as an article of women's clothing to feel aroused was now turning into him almost preferring to dress entirely as a female. Josh stated that he still felt very attracted to women and to his fiancé.

His fear is that his fiancé will find out about this and that he might need to dress in the undergarments to become and maintain arousal. He has not been intimate with his fiancé and he has not shared any of this with her. She has commented on his avoidance of any intimate contact with her and that is causing stress in the relationship as well.

Josh further noted that since he has wanted more female attire, he has had to go out to purchase it rather than obtain an article here or there from family and friends. Josh reported that he often needs to become intoxicated to purchase the female clothing, since he has to lie about why he is buying it. He also stated that he often feels uncomfortable around family and friends, since he has taken garments from many of them in the past.

Case Study Paper

1. Provide a provisional **diagnosis** for Josh on either Axis I or II. Give behavioral examples to support your diagnosis.
2. Use the remaining axes of the DSM to discuss Josh's case. List supporting behaviors for the statements you list on Axes **III, IV, and V**.
3. List any **additional assessments or interviews** that you feel would be necessary in order to clarify the diagnosis. Note what information you would hope to gain by doing these assessments or interviews. (A review of Chapter 4 might be helpful.)
4. Based on the case study information and the video and text material make a statement about the **causes** of Josh's problem. **Identify the perspective that you are presenting.**
5. Develop a **treatment plan** for Josh. **Indicate the perspective of each therapeutic approach that you include.** (A review of Chapter 3 might be helpful.)

Note on writing your Case Study Paper: For this case study paper, you are to follow the Case Study Outline (Appendix A) to write the paper.

Service Learning Project Option

Follow your schedule as established with your instructor for assignments and appointments.

Exams

Prepare for your exam and drop off your paper. Take Form A of the exam.

Proceed to Unit Four.

Unit 4

Overview of the Unit

The chapters that comprise this unit deal with the most severely impairing psychological disorders.

Chapter 5 covers affective or mood disorders and looks at unipolar (major depressive) and bipolar (manic depressive) disorders. The various perspectives, social, psychological, and biological all offer an explanation on the origins and treatment of mood disorders. This chapter also covers another behavior that is frequently associated with mood disorders and that is suicide. The classification system for types of suicides is covered as well as prevention approaches.

Chapter 13 covers the array of schizophrenic disorders, their symptom patterns, classification, origins and treatments. Schizophrenia is a complex group of disorders that affect cognitive functioning. You will note the treatment options section is very short and covered in 2 pages.

The final chapter in this unit (#14) covers dementias, delirium, and amnesic disorders. With an aging population the disorders covered in this chapter have current application and importance to our society.

The video on mood disorders (#8) presents case illustrations that are most poignant in highlighting the tremendous emotional impact of these disorders. Covered are major depression (unipolar) and manic depression (bipolar), origins and treatments.

The second video (#9) on schizophrenia attempts to define what the schizophrenias are and what they are not. Causal factors and treatment are the main focus of this video.

The next video (#10) looks at organic mental disorders and focuses on case illustrations on head trauma, medical problems, and toxic substances.

The first two videos in the brain series, Teen and Adult, were viewed in previous units, but a review is in order, since the topics of schizophrenia and depression are addressed in these videos.

Video #5 in this series, The Aging Brain explores in detail the recent research on brain disorders of the elderly. Specifically it looks at instances of brain damage from stroke, and Alzheimer's disease. It offers a very hopeful picture with regard to our knowledge of what is occurring in the brain and how this research might aid in recovery or even prevention.

Objectives

- To know the distinguishing symptom pattern for each of the mood disorders.
- To know the distinguishing symptom pattern for each of the schizophrenic disorders.
- To know the distinguishing symptom pattern for each of the neuropsychological disorders.

Learning Activities

Read: Text Chapters

- 5 Mood Disorders
- 13 Schizophrenic Disorders
- 14 Dementia, Delirium, and Amnestic Disorders

View: Video lessons

- 8 Mood Disorders
- 9 The Schizophrenias
- 10 Neuropsychological Disorders

- The Secret Life of the Brain
- 3 The Teen Brain Review
- 4 The Adult Brain Review
- 5 The Aging Brain

Key Terms

Chapter Five

Affect
Mood
Depression
Euphoria
Dysphoria
Mania
Symptoms (somatic, cognitive, behavioral, emotional)
Psychomotor retardation
Unipolar
Bipolar
Hypomania
Cyclothymia
Melancholia
Seasonal affective disorder
Dysthymia
Psychotic features
Post-partum depression
Relapse
Remission
Causes of mood D/O's
Attribution
Schema

Treatment of mood D/O's
Suicide
Causes -
Treatment -

Chapter Thirteen

Schizophrenia
Prodromal phase
Residual phase
Positive symptoms
Hallucinations
Delusions
Negative symptoms
Blunted affect
Anhedonia
Apathy
Avolition
Alogia
Tangentiality
Perseveration
Disorganized
Catatonia
Schizophrenia subtypes
Schizoaffective disorder
Delusional disorder

Chapter Thirteen (cont.)

Brief psychotic disorder

Causes -

Vulnerability marker

Treatment -

Antipsychotic medication

Psychosocial

Chapter Fourteen

Dementia

Delirium

Amnesic disorders

Retrograde amnesia

Anterograde amnesia

Aphasia

Apraxia

Agnosia

Korsakoff's syndrome

Alzheimer's disease

Pick's disease

Huntington's disease

Parkinson's disease

Vascular dementia

Dementia with lewy bodies

Causes -

Treatment -

Assignments

Case Study

Carl

Carl is a 45 year old male who was referred to the psychiatric evaluation center by his primary health care physician. Carl reported that he had went to his doctor due to sleeping all the time, low energy and having a difficult time getting motivated. Carl reported that the doctor had run some blood tests to see if there was a medical cause for his symptoms...the results were negative.

During the initial interview, Carl appeared to be upset, at times even becoming tearful. Carl reported that he has been married for 20 years and has two children ages 17 and 14. Carl reported that for the most part he has had a good marriage and feels that his relationship with his children has been good. He stated that he was a soccer and baseball coach for both of his boys and has always enjoyed spending time with his family.

Carl reported that recently thing have changed significantly for him. He stated that he is currently unemployed and has been since he was laid off about 6 months ago. Since that time, Carl had been interviewing for positions, but as of yet had not found anything in his field. He stated that when he first got laid off that he was very good about looking for jobs daily and felt positive about that fact that he would secure a new position soon. Carl had been a salesman for 15 years and enjoyed his work.

Over the last few weeks though Carl reported he had been having an increasingly difficult time getting motivated to look for a job and stated that he began to feel hopeless about ever finding another job. Carl stated that he was also beginning to have concerns about how much longer he would be able to get health benefits and unemployment. Carl stated that at times he would feel so overwhelmed that he didn't feel like doing anything.

Carl reported that he and his wife were also having problems. He stated that initially she was supportive after he was laid-off. However, now they have been fighting because she sees how he has stopped being consistent about looking for a job. Carl stated that he tried to explain to his wife that he felt bad about not filling out more applications, but that he just couldn't seem to concentrate enough to fill out the long forms required. Carl noted since he and his wife have been fighting, he has withdrawn almost entirely from his family. He stated that he just feels too bad to be around them, feeling like he is failing as a husband and father.

Carl reported that he had initially kept in touch with his friends from work, which was especially helpful since he and his wife had begun arguing. Carl noted that lately he has also started to withdraw from them.

Case Study Paper

1. For this final paper you are to again **use Appendix A** and respond to all sections **in detail** and propose a diagnosis on Axis I or II and give behavioral support.
2. Address **Axes III, IV and V** and note all relevant information from Carl's case.
3. Note any additional **assessments** that may be helpful in developing a treatment plan. Indicate what you would hope to gain by these assessments.
3. Make a statement about the **causes** of Carl's disorder. Use your text to help you write on the possible causes of this disorder in general, and then write a section on the specific causes as they relate to Carl.
5. Develop a **treatment plan** for Carl. Again use your text to focus on what might work with this disorder. You may have to take an eclectic approach so identify each treatment with its theoretical base.

Note on Case Study Paper: For this case study paper you are to use Appendix A, the Case Study Outline.

Though you may want to use the worksheets to organize your thinking, your grade will be based on how well your final case study paper adheres to the case study outline and the grading criteria that is noted on the outline.

Service Learning Project Option

Follow the schedule you have set with your instructor for assignments and appointments.

Exams

Turn in your paper and take Exam 4

Unit 5

Overview of the Unit

Chapter 15 presents mental retardation and pervasive developmental disorders which are both present at birth and therefore are Axis II disorders. The treatment for mental retardation has typically fallen under the domain of special education and frequently the adjustment and emotional issues are overlooked. The serious disruptions in the life of individuals with these disorders are explored.

Chapter 16 of this unit focuses on disorders of childhood and emphasizes the developmentally appropriate behavior or norm expected at each developmental stage. Disorders are then categorized as deviations from these norms.

Chapters 17 and 18 address the adjustment disorders, life cycle transitions and stress related disorders. These chapters cover changes and situations that are in some way categorized as normal life events and offers suggestions as to how to deal with them in your life.

The first video for this unit (#11) discusses the psychological disorders of childhood by using case illustrations to highlight various disorders. Again, note the organization of the video as it focuses on symptom patterns, causes, and treatments.

The next two videos (# 2 and 4) explore the nature of stress and its sources in our every day lives and how it can be managed. Also covered is how this stress can impact our physical health.

The videos from the brain series cover the early stages of brain development and the impact on the development of disorders that may be expressed in infants or children.

Objectives

To know the distinguishing symptom pattern for each of the disorders of MR

To know the distinguishing symptom pattern for each of the disorders of childhood.

Learning Activities

Read: Text Chapters

- 15 Mental Retardation and Pervasive Developmental Disorders
- 16 Psychological Disorders of Childhood
- 17 Adjustment Disorders and Life-cycle Transitions
- 8 Stress and Physical Health

View: Video lessons

- 11 Behavior Disorders of Childhood
- 2 Nature of Stress
- 4 Psychological Factors and Physical Health

- 1 Secret Life of the Brain: The Baby's Brain
- 2 Secret Life of the Brain: The Child's Brain

Key Terms

Chapter Fifteen

Mental retardation
 Culture fair tests
 Diagnosis
 Biological causes
 Chromosomal disorders
 Genetic disorders
 Infectious diseases
 Toxins
 Social factors
 Psychological factors
 Treatment -
 Pervasive developmental disorder
 Autism
 Symptoms -
 Causes -
 Treatment -

Chapter Sixteen

Developmental Psychopathology
 Externalizing disorders
 ADHD
 ODD
 Conduct disorder
 Status offenses
 Causes -
 Parenting styles
 Internalizing disorders
 Separation anxiety
 Pica
 Rumination disorder
 Tourettes
 Selective mutism
 Reactive attachment disorder
 Encopresis/enuresis
 Causes -
 Types of attachments

Chapter Seventeen

Life-cycle transitions
 Adjustment disorders
 Erickson's psychosocial theory
 Family transitions
 Marital therapy
 Ageism
 Grief and bereavement
 Gerontology

Chapter Eight

Stress
 Fight or flight response
 Adrenal hormones
 Psychoneuroimmunology
 General adaptation syndrome
 Coping
 Role of psychological factors in illness
 Cardiovascular disease
 Type A behavior
 Prevention & treatment of cardiovascular disease

Assignments

NO PAPER FOR THIS UNIT

Service Learning Option

Service Learning students should follow their appointment and assignment schedule.

Exams

Prepare for your last exam. Take Form A of the exam.

You have worked hard to complete this course. We hope that it has met your educational goals and provided you with some insight into the world of abnormal psychology.

Good Luck to you in your future endeavors.

Notes:

Appendix A

Case Study Outline

Axis I and/or Axis II

(List both and if no diagnosis, note “deferred.”)

State the general diagnostic category.

List behavioral examples to support your diagnosis.

(Accurate category.)

(Well supported with behavioral examples.)

(**Diagnostic criteria** is met as specified in text.)

Axis III

Physical conditions that may influence the disorder.

(Accurate inclusion of specific conditions and noted involvement in the disorder.)

(No restatement of symptoms noted on Axis I or II)

Axis IV

Psychosocial Stressors

List stressors that have occurred within the past year.

If within past 2-3 years, note date that the stressor occurred.

(Accurate identification of relevant stressors.)

(No restatement of symptoms.)

Axis V

Global Functioning in key areas:

- **self care,**
- **employment,**
- **relationships.**

(Accurate description of functioning with behavioral support.)

(Rate as None, Mild, Moderate, Severe, Extreme, Catastrophic.)

Assessment

Use text, video and case material to determine any assessments or interviews that you believe would be helpful to clarify the diagnosis.

(Correct terminology.)

(Consideration of assessments in each perspective.)

(Selection of appropriate assessment for that individual.)

Etiology/Causes of the Disorder

Use text and any other supporting materials to describe, in general, the origins of this disorder.

From each of the perspectives, discuss the applicable origins of the disorder for the individual in the case study.

(Correct use of terminology.)

(Adequate explanation of origins in **general**.)

(Consideration of each perspective: physiological, social, psychological.)

(Clear statement of origins for this **individual**.)

Treatment

Use text and other materials to describe viable treatments for this disorder.

Describe treatments for this particular individual.

Identify the perspective for each of the treatments you list.

(Correct use of terms.)

(Accurate description of viable treatments.)

(Clear indication of appropriate treatment for this individual.)

(Correct identification of the perspectives of the treatments noted.)

Appendix B

Case Study Worksheets

Axis I Diagnosis _____

Supporting Behavioral Examples:

- _____
- _____
- _____
- _____
- _____
- _____

Axis II Diagnosis _____

Supporting Behavioral Examples:

- _____
- _____
- _____
- _____
- _____

Axis III Physical conditions that may influence the disorder.

Condition _____

Involvement in Disorder: _____

Condition _____

Involvement in Disorder: _____

Condition _____

Involvement in Disorder: _____

Axis IV Stressors/Timeframe

- _____ / _____
- _____ / _____
- _____ / _____
- _____ / _____
- _____ / _____
- _____ / _____
- _____ / _____

Axis V Global Functioning: Rate problems in each area as None, Mild, Moderate, Severe, Extreme, or Catastrophic. Support with behavioral examples.

Rating of self-care: _____

Behavioral examples:

- _____
- _____
- _____
- _____
- _____

Rating of Employment _____

Behavioral examples:

- _____
- _____
- _____
- _____

Rating of Relationships _____

Behavioral examples:

- _____
- _____
- _____
- _____
- _____

Assessment

Use text, video and case material to determine any assessments or interviews that you feel would be helpful to clarify the diagnosis.

Biological: _____

Sociocultural: _____

Psychological: _____

Etiology/Causes: Use text, videos, and case information to describe the causes of this disorder from each of the perspectives for the individual in the case study.

Biological: _____

Sociocultural: _____

Psychological: _____

Additional Comments?

Treatment

Use text, video and case material to determine viable treatments for this disorder for the individual in the case study. You may not need to use every treatment modality.

Biological: _____

Psychodynamic: _____

Cognitive/Behavioral: _____

Humanistic: _____

Group/Couples/Family: _____

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