

College of Education and Human Development Department of Counseling, Health & Kinesiology

EDCG 5326 Special Problems in Guidance & Counseling - Psychopharmacology Spring 2025

Instructor: Sabina de Vries, Ph.D., LPC-S, NCC

Class Time & Location: Tuesdays 5:30 – 6:45pm; hybrid format; CH #205 E-mail & Phone: sabina.devries@tamusa.edu; 210-784-2513 Office Hours: By appointment; zoom office hours also available

Office Location: Classroom Hall 214L

Prerequisite: Admission into the Graduate Program

Required Text: Ingersoll, R. E., & Rak, C. F. (2016). *Psychopharmacology for mental health*

professionals: An integrative approach. Boston: Cengage Learning. ISBN: 1-

285-84522-6

Recommended Text: Pedersen, D. D. (2018). *Pocket psych drugs, 2nd Ed.* Philadelphia, PA: F. A.

Davis Company.

Course Description: Psychopharmacology for Counselors.

Working in mental health and school counseling settings, counselors rely on information pertaining to psychotropic medication to treat mental health conditions. This introductory course surveys major psychotropic drugs that are utilized in the treatment of mental, behavioral, as well as addictive disorders. Medication classification, drug interactions, and side effects will be explored. In addition, cultural and contextual factors as well ethical considerations are addressed. Professional

collaboration across treatment providers are also explored.

Prerequisite: Admission into the Graduate Program

Rationale for the Course: This is a graduate course designed to provide pre-service and/or practicing counselors with the necessary knowledge and skills to understand psychotropic medication in a counseling context. This course offers an introduction to basic psychopharmacology principles and strategies. The goal is to provide students with basic skills to identify main types of psychotropic medications and their most common side effects.

Course Objectives:

Through lectures, discussions, and other class projects, students will:

- 1. Gain knowledge of major psychotropic medications used to treat mood disorders, anxiety disorders, psychotic disorders, ADHD & DO of attention, cognitive disorders, sleep disorders, personality disorders, substance abuse disorders, as well as comorbidity and other disorders.
- 2. Gain knowledge of ethical and legal implications as they apply to psychotropic medications.
- 3. Gain knowledge of how to collaborate with prescribers such as psychiatrists, primary care physicians, nurse practitioners, as well as physician assistants.

INSTRUCTOR EXPECTATIONS:

All students are expected to follow university policies as written in the student handbook, which can be found online at http://www.tamusa.tamus.edu/studenthandbook.html. Other expectations include the following:

- (1) Attendance is considered mandatory and will be taken at each class meeting.
- (2) Non-attendance of class will be the basis for a grade adjustment. TWO absences are allowed (excused or unexcused). With further absences, one letter grade per missed class day will be deducted from the final grade. This means if a student has more than two absence, the highest grade that can be attained is a 'B'. Students absent three class sessions or more will receive a failing grade. Consult with your professor concerning any questions about absences. If you decide not to attend this class or find yourself doing poorly, it is your responsibility to drop the class. Faculty is not responsible for dropping students from a course. If the course is not dropped in a timely manner, a failing grade will be assigned at the end of the semester.
- (3) A student will be considered tardy if he/she arrives more than fifteen minutes after class is scheduled to begin. Three tardies equal one absence. Attendance will be taken at the beginning of each class period.
- (4) Students must be able to access course information online through Blackboard. It is the student's responsibility to check Blackboard one or more times a week. Trouble with Blackboard access should be reported to the university computer information services.
- (5) **Visitors, including children are not allowed in the classroom.** Make arrangements for childcare and have a backup plan ready.
- (6) No make-up exams are given except under extenuating, rare circumstances that are verified with documentation. Late submission will be penalized 25% of the assignment grade unless there are exceptional circumstances verified by WRITTEN documentation. Late work MUST be submitted the following class date or sooner. Work that is late more than one class day will not be accepted and a grade of '0' will be assigned.
- (7) Cell phones must be turned off or put on vibrate during class. NO TEXTING during class.
- (8) Laptop computers will remain closed unless used for taking notes or to access e-books.
- (9) The instructor reserves the right to require the literate behavior expected of a graduate student. All work turned in should be typed and have a cover sheet using the most recent APA style.
- (10)In order to be eligible for consideration for an "I" (incomplete), you must have completed 75% of the coursework and have a "C" or better in the course. Generally, reasons for requesting an incomplete include but are not necessarily limited to medical emergency, unforeseen crisis, death in the family, and so forth. Circumstances for the request must be extenuating and available documentation should be supplied to your professor. If an "I" is granted, a contract outlining timeline and conditions for completion will be drafted by the professor.

OUALITY OF WORK:

- Writing should show substantive content and quality writing skills (clarity of expression, appropriate use of references, use of inclusive language, and correct grammar/mechanics).
- APA Style (7th ed.) is mandatory for all assignments. Work that does not adhere to these standards is subject to point deductions.

Helpful Websites:

http://www.apa.org (APA website)

http://owl.english.purdue.edu/owl/resource/560/01/ (APA format and style help)

http://scholar.google.com (great source for research topic overview)

https://www.nami.org

Americans with Disabilities Act

The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disability. Disability Support Services (DSS) provides services, auxiliary aids and accommodations for students at Texas A&M University-San Antonio (A&M-SA) who have self-identified, registered and provided DSS with documentation supporting their disability. Students may access additional information on the Disability Support Services webpage:

http://www.tamusa.edu/studentengagementsuccess/dss/AccessDSS/index.html

Counseling Resources:

As a college student, there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily functioning. If you or someone you know is experiencing life stressors, emotional difficulties, or mental health concerns at Texas A&M University – San Antonio, please contact the Student Counseling Center (SCC) located in Modular C, Room 166 (Rear entrance) or call 210- 784-1331 between the hours of 8:00AM and 5:00PM, Monday – Friday. All mental health services provided by the SCC are free, confidential (as the law allows), and are not part of a student's academic or university record. SCC provides brief individual and group therapy, crisis intervention, consultation, case management, and prevention services. For more information, please visit www.tamusa.edu/studentcounseling

In a crisis situation, please walk-in to the Student Counseling Center (SCC) any time between the hours of 8:00AM and 5:00PM, Monday – Friday, to be seen by a clinician. For after-hours support, please call 210-784-1331. Please contact UPD at 911 if harm to self or harm to others is imminent.

Academic Dishonesty

Students at Texas A&M University-San Antonio are expected to adhere to the highest standards of academic honesty and integrity. Academic Dishonesty for which a student is subject to penalty includes cheating, plagiarism, fabrication, multiple submission, misrepresentation of academic records, facilitating academic dishonesty, unfair advantage, violating known safety requirements and ethical misconduct. This includes holding other students to same standards and reporting any incidents of alleged violation of the honesty policy to the instructor involved or, if necessary, to the appropriate academic department head. All students are responsible for being familiar with the Academic Dishonesty Policy which may be found in the Texas A&M University-San Antonio Student Handbook.

Forms of academic dishonesty:

- 1. <u>Cheating</u> A student can be accused of academic dishonesty if he/she uses, or attempts to use, unauthorized assistance (e.g., asking someone else for an answer during a test, copying answers from another person's paper during a test, etc.), uses unauthorized study aids in examinations or other academic work (i.e., "cheat sheets" or textbook/notes when that use has been disallowed by the faculty), or submits the work of another as his/her own.
- 2. <u>Plagiarism</u> A student can be accused of academic dishonesty if he/she uses the ideas, data, or language of another without specific or proper acknowledgment. Failure to identify information or essays from the Internet and submitting them as one's own work also constitutes plagiarism.
- 3. <u>Fabrication</u> A student can be accused of academic dishonesty if he/she submits, or attempts to submit material that is contrived or altered (e.g., making up data for an experiment, misrepresenting data, citing nonexistent articles, contriving sources, falsifying design and/or troubleshooting data, or padding estimates with the intent to defraud customers, etc.).
- 4. <u>Multiple Submission</u> A student can be accused of academic dishonesty if he/she submits, without prior permission, any work previously submitted to fulfill another academic requirement (e.g., the unauthorized submission of a pre-existing paper or project).
- 5. <u>Misrepresentation of Academic Records</u> A student may be accused of academic dishonesty if he/she misrepresents, tampers with or attempts to tamper with any portion of a student's transcripts or academic record (e.g., changing one's grade, altering computer records, falsifying academic information on one's resume, etc.).
- 6. <u>Facilitating Academic Dishonesty</u> A student may be accused of academic dishonesty if he/she knowingly helps or attempts to help another violate the principles of academic integrity (e.g., working together on a take-home exam without the instructor's permission, providing another student with a pre-written paper or test, unauthorized collaboration of any kind, including online testing, giving answers to lab projects with the intent to help students take practical exams, etc.).
- 7. <u>Unfair Advantage</u> A student may be accused of academic dishonesty if he/she attempts to gain unauthorized advantage over fellow students (e.g., acquiring unauthorized access to exam materials, preventing or interfering with another student's efforts, lying about a need for an extension for an exam or paper, continuing to write even when time is up during an exam, destroying or keeping library materials for one's own use, holding equipment back so students are slowed or unable to complete labs, etc.).
- 8. <u>Violating Known Safety Requirements</u> A student may be accused of academic dishonesty if he/she acts so as to have unfair advantage during lab assignments and project testing, grading, or jeopardizes the health, well-being of the students or others around him so as to gain unfair advantage on lab assignments or graded projects.
- 9. <u>Ethical Misconduct</u> A student may be accused of academic dishonesty if he/she violates client confidentiality or interferes with, alters, falsifies or inappropriately accesses or discloses client and/or agency or company records or trade secrets without authorization.

All written work is subject to being run through a plagiarism detection computer program (turnitin). Work that is deemed unacceptable due to plagiarism will be considered a form of academic dishonesty. Students will be reported and consequences will ensue.

Nonacademic Misconduct (See Student Handbook):

The university respects the rights of instructors to teach and students to learn. Maintenance of these rights requires campus conditions that do not impede their exercise. Campus behavior that interferes with either (1) the instructor's ability to conduct the class, (2) the inability of other students to profit from the instructional program, or (3) campus behavior that interferes with the rights of others will not be tolerated. An individual engaging in such disruptive behavior may be subject to disciplinary action. Such incidents will be adjudicated by the Dean of Students under nonacademic procedures.

Sexual Misconduct (See Student Handbook):

Sexual harassment of students and employers at Texas A&M University-San Antonio is unacceptable and will not be tolerated. Any member of the university community violating this policy will be subject to disciplinary action.

Grading

A = 100 - 90

B = 89 - 80

C = 79 - 70

D = 69 - 60

F = 59 and below

Case Study Assignment:

Students are required to complete one psychopharmacology projects which are to address the following:

- 1) Select a fictional character from a movie or a book who displays some type of mental health condition that is normally treated with psychotropic medication.
- 2) Conduct a mental health status exam and write up the results including possible diagnoses.
- 3) Discuss possible medication(s) this client may be prescribed by a psychiatrist.
- 4) Discuss benefits and side effects of your chosen medication(s) that need to be considered when working with your client.
- 5) Discuss at least one alternative medication regimen for this client and pertinent diagnoses.
- 6) Discuss the role of counselor/counseling in treating this client.
- 7) Discuss possible advocacy and ethical concerns that may arise for you as a counselor when working with this client.

Extra Credit: Students who have accrued no absences and have completed all work on time will receive 3 extra points toward their final grade.

ADDITIONAL READINGS:

- Abraham, O., Schleiden, L., & Albert, S. M. (2017). Over-the-counter medications containing diphenhydramine and doxylamine used by older adults to improve sleep. *International Journal of Clinical Pharmacy*, 39(4), 808–817. https://doi.org/10.1007/s11096-017-0467-x
- Apaydin, E. A., Maher, A. R., Shanman, R., Booth, M. S., Miles, J. N. V, Sorbero, M. E., & Hempel, S. (2016). A systematic review of St. John's wort for major depressive disorder. *Systematic Reviews*, 5(1), 148. https://doi.org/10.1186/s13643-016-0325-2
- Cohen, S. S. (2016). Soaring prescription drug prices. *Policy, Politics, & Nursing Practice*, 17(3), 115-117.
- Culpepper, L., & Wingertzahn, M. A. (2015). Over-the-counter agents for the treatment of occasional disturbed sleep or transient insomnia: a systematic review of efficacy and safety. *The Primary Care Companion for CNS Disorders*, 17(6).
- Fugh-Berman, A. (2000). Herb-drug interactions. The Lancet, 355(9198), 134-138.
- Hamilton, J., Decker, N., & Rumbaut, R. D. (1986). The manipulative patient. *American Journal of Psychotherapy*, 40(2), 189-200.
- Harvard University. (2010, January). Encouraging patients to take medication as prescribed. *Harvard Mental Health Letter*, 26(7), 4-5.
- Hussain, M., Waheed, W., & Hussain, S. (2005). Intravenous quetiapine abuse. *American Journal of Psychiatry*, 162(9), 1755-1756.
- Ingersoll, R. E. (2004). Children and Psychotropic Medication: What Role Should Advocacy Counseling Play? *Journal of Counseling & Development*, 82(3), 337-343. (chapter 9)
- Ingersoll, R. E. (2005). Herbaceuticals: An Overview for Counselors. *Journal of Counseling & Development*, 83, 434–443.
- Kaut, K., & Dickson, J. (2007). The mental health practitioner and psychopharmacology. *Journal of Mental Health Counseling*, 29 (3), 204-225.
- Kaut, D., (2011). Psychopharmacology and mental health practice: An important alliance. *Journal of Mental Health Counseling*, 33(3), 196-222.
- Kessler, R., Soukup, J., & Davis, R. (2001). The use of complementary and alternative therapies to treat anxiety and depression in the United States. *American Journal of Psychiatry*, 158(2), 289–294. Retrieved from http://ajp.psychiatryonline.org/doi/abs/10.1176/appi.ajp.158.2.289
- King, J. H., & Anderson, S. M. (2004). Therapeutic implications of pharmacotherapy: Current trends and ethical issues. *Journal of Counseling & Development*, 82(3), 329-336.
- Longo, L., & Johnson, B. (2000, April 1). Addiction: Part 1: Benzodiazepines—side effects, abuse risk, and alternatives. *American Family Physician*, 61(7), 2121-2128.

- Lader, M. (2011). Benzodiazepines revisited-will we ever learn? *Society for the Study of Addiction*, 106(12), 2086-2109.
- Miyasaka, L. S., Atallah, Á. N., & Soares, B. (2006). Valerian for anxiety disorders. *The Cochrane Library*.
- Newmaster, S. G., Grguric, M., Shanmughanandhan, D., Ramalingam, S., & Ragupathy, S. (2013). DNA barcoding detects contamination and substitution in North American herbal products. *BMC Medicine*, 11(1), 222. https://doi.org/10.1186/1741-7015-11-222
- Ng, Q. X., Venkatanarayanan, N., & Ho, C. Y. X. (2017). Clinical use of Hypericum perforatum (St John's wort) in depression: A meta-analysis. *Journal of Affective Disorders*, 210(1), 211–221. https://doi.org/10.1016/j.jad.2016.12.048
- Sarris, J., & Kavanagh, D. J. (2009). Kava and St. John's Wort: Current evidence for use in mood and anxiety disorders. *The Journal of Alternative and Complementary Medicine*, 15(8), 827-836.
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- Sepulveda, V., Piazza, N. J., Devlin, M., Ritchie, M. H., & Tucker-Gail, K. (2016). Psychopharmacology in Counseling, Psychology, and social work education: An interdisciplinary history and implications for professional counselors. *The Wisconsin Counseling Journal, Spring 2016*, 35-48.
- Shallcross, L. (2012). Client, counselor, prescriber. *Counseling Today*. Retrieved from http://ct.counseling.org/2012/07/client-counselor-prescriber/
- Schmidt, S. (2006). Sleep aids--Don't be fooled by the flash. *Journal of Addictions Nursing*, 17(2), doi:10.1080/10884600600668476
- van der Watt, G., Laugharne, J., & Janca, A. (2008). Complementary and alternative medicine in the treatment of anxiety and depression. *Current Opinion in Psychiatry*, 21(1), 37-42.
- World Health Organization, (2013). WHO traditional medicine strategy. *Essential Drugs and Medicine*. Retrieved from http://www.who.int/medicines/publications/traditionalpolicy/en/
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Discussion Board Posts:

Students are to respond weekly to discussion topics. Main discussion board posts should be substantial in length (a minimum of 5 paragraphs) and are due by Saturdays (midnight or earlier).

Students are to respond to one or two of their classmates' posts and elaborate on their topic/main discussion post, offer additional information, or alternative viewpoints. If a post already has two responses, students must choose another post. Peer responses are due by Mondays (midnight or earlier) of each week and a minimum of two paragraphs are required.

Each discussion session is worth 20 point; 13 for the main discussion post, and 7 for responses to classmates.

Quizzes:

There will be quizzes covering the assigned chapters. Quizzes are due each on Sundays before midnight. The quizzes will replace the Final Exam. So, there will be NO FINAL EXAM. Each quiz can be taken a total of two or three times and the highest grade will be registered in the grade center.

Course Requirements and Assignments:

The following updates will be in effect for the weekly schedule:

Week/Date	Topic	Assignments	Due Dates
January 21	University closed due inclement weather!		
Week 1: Jan 28	Review of the Syllabus Chapter 1 - Introduction	Discussion board 1	DB1: Sat. 2/1 & Mon. 3/3
Week 2: Feb 4	Chapter 2 – Intro to the Nervous System, Neurons, & Pharmacodynamics	Quiz 1(Ch. 1&2)	QZ1: Sunday, 2/9
Week 3: Feb 11	Chapter 3 – Pharmacokinetics: How the Body Acts on Psychotropic Medication		
Week 4: Feb 18	Chapter 4 – Psychological, Social, & Cultural Issues in Psychopharmacology	Discussion board 2	DB2: Sat. 2/22 & Mon. 2/24

Week 5: Feb 25	Chapter 5: The Antidepressant Era	Quiz 2 (Ch. 3&4)	QZ2: Sun. 3/2
Week 6: Mar 4	Chapter 5: continued	Discussion board	DB3: Sat. 3/8 & Mon. 3/10
	March 10 – March 15 Spring Break No Class!		
Week 7: Mar 18	Chapter 6: The Age of Anxiety		
Week 8: Mar 25	Chapter 6: Continued	Quiz 3 (Ch. 5&6)	QZ3: Sun. 3/31
Week 9: Apr 1	Chapter 7 – Antipsychotics		
Week 10: Apr 8	Chapter 8 – Mood Stabilizers	Discussion board	DB4: Sat. 4/12 & Mon. 4/14
Week 11: Apr 15	Chapter 13 – Psychotropic Medication and the Elderly Chapter 9 – Medicating Children	Quiz 4 (Ch. 7,8,&9)	QZ4: Mon. 4/21
Week 12: Apr 22	Chapter 10 – Herbaceuticals	Case Study Case Study discussion board activity	Tuesday, April 22; submit to Turnitin & Discussion Board DB5: Sat. 4/26 & 4/28
Week 13: Apr 29	Chapter 11 – Pharmacotherapy of Alcohol & Drug Related Disorders Chapter 12 – Drug Assisted Psychotherapy *self-study* Finals May 7 – May 13		

ASSIGNMENT	DUE DATES	PERCENT
Chapter Quizzes	Sundays	35%
Case Study Assignment	Thursday, April 22, submit to turnitin	30%
Discussion Board Posts	Saturdays & Mondays	35%

Note: All dates, times, and assignments are subject to change. A minimum of one week notice will be provided if changes to the syllabus are made.