

Identification	Subject	Clinical Psychology , CPSY 710, 3KU (6 AKTS)
	Department	Department of Psychology
	Program (Undergraduate, Graduate)	Graduate (Master's) — Clinical Psychology
	Term	Fall Semester 2026
	Instructor	Aygun Zeynalova
	Email:	isgandarovaaygun@gmail.com Mobile: +994 55 268 29 30
	Classroom/hours	Neftchilar campus
Prerequisites	-	
Language	English	
Compulsory/Elective	Compulsory (core course of the Clinical Psychology graduate program)	
Textbooks and course materials	Main Textbooks 1. Harrison, P., Cowen, P., Fazel, M., & Bhui, K. (2026). <i>Shorter Oxford textbook of psychiatry</i> (8th ed.). Oxford University Press. 2. Williams, E. R., Moskowitz, L., Boland, R., & Verduin, M. (2023). <i>Kaplan & Sadock's study guide and self-examination review in psychiatry</i> (10th ed.). Wolters Kluwer. 3. Ventura, E. (Ed.). (2017). <i>Casebook for DSM-5: Diagnosis and treatment planning</i>. Springer Publishing Company. 4. Gibson, C., & Galea, L. A. M. (Eds.). (2023). <i>Sex differences in brain function and dysfunction</i> (Current Topics in Behavioral Neurosciences, Vol. 62). Springer. 5. Rippon, G. (2019). <i>The gendered brain: The new neuroscience that shatters the myth of the female brain</i>. The Bodley Head. 6. Hill, S. E. (2025). <i>The period brain</i>. HarperCollins. 7. Gazzaniga, M. S., Ivry, R. B., & Mangun, G. R. <i>Cognitive neuroscience: The biology of the mind</i>. W. W. Norton & Company. Additional Readings 8. American Psychiatric Association. (2022). <i>Diagnostic and statistical manual of mental disorders</i> (5th ed., text rev.; DSM-5-TR). American Psychiatric Association Publishing. 9. Barlow, D. H. (Ed.). (2014). <i>Clinical handbook of psychological disorders: A step-by-step treatment manual</i> (5th ed.). Guilford Press. (Core departmental reference text; not used for psychotherapy-technique teaching in this course.) 10. Leahy, R. L., Holland, S. J. F., & McGinn, L. K. (2012). <i>Treatment plans and interventions for depression and anxiety disorders</i> (2nd ed.). Guilford Press. (Core departmental reference text; not used for psychotherapy-technique teaching in this course.) 11. Smith, R. G., & Thorner, M. O. (Eds.). (2012). <i>Ghrelin in health and disease</i>. Humana Press.	
Course description	This course introduces graduate students to the science and practice of clinical psychology. It focuses on three skills that every clinician needs: taking a complete patient history through a well-structured interview and reaching a sound diagnostic classification; recognizing what to do first when a patient presents in an urgent or high-risk state; and managing severe cases, such as suicidality, self-harm, and personality disorders, safely and appropriately.	

	Students will learn the main models of psychopathology, the DSM-5-TR and ICD-11 classification systems, psychological assessment, and diagnostic case formulation. These skills are practiced through mock clinical interviews, written diagnostic formulations, and class discussion of case material. The course does not cover psychotherapy techniques; instead, it concentrates on accurate diagnosis, first-response actions, and the practical steps of managing severe and urgent presentations. The course also pays close attention to sex and gender differences in common disorders, including mood disorders, anxiety disorders, and hormone-related conditions such as premenstrual dysphoric disorder. Sex- and gender-sensitive practice is treated as a basic clinical skill, not an optional extra. By the end of the course, students will be able to take and write up a structured psychiatric history and mental state examination, classify a case correctly using DSM-5-TR/ICD-11 criteria, take the right first steps when a patient is in crisis, manage severe and high-risk cases responsibly, and explain how sex and gender should shape assessment and initial management.
Course objectives	• Build skill in structured clinical interviewing and in taking a complete psychiatric history (anamnesis). • Teach students how to perform a mental state examination, reach a differential diagnosis, and use standardized assessment tools. • Give students a solid working knowledge of psychiatric diagnostic classification (DSM-5-TR and ICD-11) across the major categories of mental disorder. • Train students to identify the right first response and initial intervention when a patient presents in an urgent or high-risk state. • Train students to recognize and manage severe, high-risk, and crisis cases, including suicide risk, self-harm, and personality disorders. • Give students an evidence-based understanding of sex and gender differences in the biology, prevalence, and presentation of psychiatric disorders. • Encourage ethical, culturally aware, and stigma-free clinical practice.
Learning Outcomes	By the end of this course, students will be able to: • Conduct a structured psychiatric interview and take a complete history, covering the presenting complaint, history of the present illness, past psychiatric and medical history, family history, personal and social history, and premorbid personality. • Carry out and write up a mental state examination and choose the right standardized assessment tools. • Classify a clinical presentation correctly using DSM-5-TR/ICD-11 criteria and reach a well-reasoned differential diagnosis. • Identify the correct first response and initial intervention when a patient presents in an urgent, high-risk, or unstable state.

	• Assess suicide and self-harm risk, and explain the main steps of crisis intervention and severe case management, including when and how to refer a patient on. • Explain how sex and gender differences in brain function, hormones, and social context affect how psychiatric disorders present, are diagnosed, and are managed. • Present clinical reasoning and case material clearly and professionally, in speech and in writing, while respecting patient dignity and avoiding stigmatizing language. Each outcome above is tied to at least one graded assessment component (see Evaluation Criteria), so that what is taught, practiced, and assessed all match up.		
Teaching methods	Case analysis		+
	Group discussion		+
	Lecture		+
	Simulation		+
Evaluation Criteria	Methods	Date/deadlines	Percentage (%)
	Midterm Exam	Week 7 (after Weeks 1–7 content)	30
	Quizzes	Throughout the semester (4 unannounced quizzes; best 3 of 4 counted)	10
	Practical Assignments	Week 4 (Part 1: written diagnostic formulation) and Week 11 (Part 2: recorded mock interview)	10
	Attendance	Throughout the semester	10
	Final Exam	Final Exam Period (TBA)	40
	Total		100
Class Policy	Detailed explanation of evaluation criteria: Midterm Exam (30%): A written exam covering Weeks 1–6, including short-answer questions and case vignettes. Full marks require accurate use of psychiatric terminology, correct application of DSM-5-TR/ICD-11 classification, and the ability to identify the key elements of a psychiatric history from a short case description. Quizzes (10%): Four short, unannounced quizzes (10–15 minutes) check preparation of the assigned reading. Only the best three of four scores count. Quizzes are marked on the accuracy and precision of clinical terms used. Practical Assignments — History-Taking & Diagnostic Formulation (10%): Part 1 (Week 4, 5%) is a written diagnostic formulation based on a case vignette. Part 2 (Week 11, 5%) is a recorded mock psychiatric interview with a written history summary and initial risk assessment. Full marks require complete coverage of all history domains, good rapport-building and open-ended questioning, a correctly reasoned differential diagnosis, an accurate risk assessment where needed, and clear, professional written documentation. Attendance (10%): Attendance is recorded at every class. Up to two unexcused absences are permitted without penalty; each further unexcused absence removes 2 points, up to a maximum loss of 10 points. Participation marks reflect active, informed engagement, not merely physical presence.		

	Final Exam (40%): A cumulative written exam covering the whole semester, weighted toward clinical interviewing and history-taking, diagnostic classification, and risk assessment/severe case management, including sex- and gender-related considerations. Includes case-vignette questions requiring real clinical reasoning, not only memorized facts. General class policies: Punctuality: Students are expected to arrive on time; recurring lateness may be treated as an unexcused absence at the instructor's discretion. Deadlines: Written assignments are due at the start of class on the specified date. Late submissions are penalized 5% of the assignment grade per day, up to five days, after which a grade of zero is recorded unless a documented medical or personal emergency applies. Confidentiality: Any case material discussed in class or submitted for assignments (including student-conducted mock interviews) must be fully de-identified. Discussion of real, identifiable patient information from clinical placements is strictly prohibited in class materials. Academic integrity: Plagiarism, unauthorized collaboration, and fabrication of clinical or interview data are treated as serious violations of academic integrity and will be referred to the relevant university disciplinary process. Respectful conduct: Given the sensitive nature of course material (including suicide, self-harm, and gender-related health topics), students are expected to engage with peers and case material respectfully and professionally at all times. Use of Artificial Intelligence (AI): Generative AI tools may be used to support studying, to check grammar and clarity, and to generate practice case vignettes. AI tools may not be used to generate the substantive clinical reasoning, diagnostic formulation, or risk assessment submitted for graded assignments, to fabricate or alter interview recordings, or to draft exam responses. Any AI assistance used in an assignment must be briefly disclosed in a short note accompanying the submission. Undisclosed or prohibited use of AI is treated as an academic integrity violation.
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Tentative Schedule

Week	Date/Day (tentative)	Topics	Textbook/Assignments
1	20.09.2026	Introduction to Clinical Psychology: Scientific Foundations, History, and Professional Roles	Shorter Oxford Textbook of Psychiatry, Ch. 1 "Signs and Symptoms of Psychiatric Disorders," pp. 1–20; Kaplan & Sadock's Study Guide, introductory chapter on the scope of psychiatry and clinical psychology.
2	27.09.2026	Diagnostic Classification of Mental Disorders: DSM-5-TR and ICD-11	Shorter Oxford Textbook of Psychiatry, Ch. 2

			“Classification,” pp. 21–36; Ventura (Ed.), Casebook for DSM-5, “Introduction,” pp. xiii–xiv.
3	04.10.2026	Clinical Interviewing and Psychiatric History-Taking (Anamnesis)	Shorter Oxford Textbook of Psychiatry, Ch. 3 “Assessment” — “Psychiatric Interviewing” and “The Psychiatric History,” pp. 38–46; Kaplan & Sadock’s Study Guide, chapter on the Psychiatric Interview, History, and Mental Status Examination.
4	11.10.2026	The Mental State Examination and Standardized Diagnostic Assessment	Shorter Oxford Textbook of Psychiatry, Ch. 3 “Assessment” — “The Mental State Examination” through “Standardized Assessment Methods,” pp. 46–70. → History-Taking Assignment (Part 1) due.
5	18.10.2026	Diagnostic Classification of Mood Disorders: Depression and Bipolar Disorder	Shorter Oxford Textbook of Psychiatry, Ch. 9 “Depression,” Clinical Features and Classification, pp. 193–203; Ch. 10 “Bipolar Disorder,” pp. 231–250.
6	25.10.2026	Sex and Gender in Clinical Neuroscience I: Studying Sex Differences in the Brain	Gibson & Galea (Eds.), Sex Differences in Brain Function and Dysfunction, Part I: “Sex and Gender Science” and “Best Practices in the Study of Gender”; Rippon, The Gendered Brain, Ch. 2 “Her Raging Hormones” and Ch. 3 “The Rise of Psychobabble.”
7	01.11.2026	Review Session (Weeks 1–6)	Cumulative review of Weeks 1–6 in preparation for the Midterm Examination.
8		Midterm exam	
9	08.11.2026	Sex and Gender Differences in Mood and Anxiety Disorders	Shorter Oxford Textbook of Psychiatry, Ch. 9 “Depression” — “The Epidemiology of Depressive Disorders,” pp.

			203–204; Gibson & Galea (Eds.), Part II: “Sex Differences in Depression and Anxiety”; Gazzaniga, Ivry & Mangun, Cognitive Neuroscience, Ch. 14 “Psychopathology.”
10	15.11.2026	Hormonal Cycles and Women’s Mental Health: PMS, PMDD, and the Reproductive Lifespan	Hill, The Period Brain, Ch. 6 “Is There a Method to Your Madness?” and Ch. 10 “When a Good Hormone Goes Bad: PMDD”; Shorter Oxford Textbook of Psychiatry, Ch. 13 “Eating, Sleep–Wake, and Sexual Disorders,” pp. 305–320; Smith & Thorner (Eds.), Ghrelin in Health and Disease, Ch. 4, pp. 51–72 (supplementary).
11	22.11.2026	Diagnostic Classification of Anxiety, Trauma- and Stressor-Related, and Psychotic Disorders	Shorter Oxford Textbook of Psychiatry, Ch. 7 “Reactions to Stressful Experiences,” pp. 137–160; Ch. 8 “Anxiety and Obsessive–Compulsive Disorders,” pp. 161–192; Ch. 11 “Schizophrenia,” Clinical Features and Diagnosis, pp. 251–270.
12	29.11.2026	Personality and Personality Disorders: Diagnostic Classification	Shorter Oxford Textbook of Psychiatry, Ch. 15 “Personality and Personality Disorder,” pp. 381–402. → History-Taking Assignment (Part 2 — recorded mock interview) due.
13	06.12.2026	Risk Assessment and Initial Intervention in Suicidal and Self-Harming Patients (Severe Case Management I)	Shorter Oxford Textbook of Psychiatry, Ch. 21 “Suicide and Self-Harm” — “The Assessment of Suicidal Risk,” “The Management of Suicidal Patients,” and “The Management of Self-Harm,” pp. 596–608.
14	13.12.2026	Crisis Intervention and First-Response Management of Acute, Severe, and Complex Presentations (Severe Case Management II)	Shorter Oxford Textbook of Psychiatry, Ch. 26 “Psychiatric Services” — “Specialist Services for

			Acute Psychiatric Disorder,” pp. 772–776; Kaplan & Sadock’s Study Guide, chapter on Psychiatric Emergencies.
15	20.12.2026	Stigma, Culture, and Ethical Practice in Clinical Psychology	Shorter Oxford Textbook of Psychiatry, Ch. 4 “Ethics and Civil Law,” pp. 71–88; Ch. 23 “Public Mental Health and Global Mental Health,” pp. 645–654 (selected sections); in-class review of a student-authored conference presentation on mental illness stigma.
16	27.12.2026	Integrative Case-Based Review: Complex, Comorbid, and Gender-Sensitive Diagnostic Formulation	Ventura (Ed.), Casebook for DSM-5, student-selected complex cases, pp. 1–75; course review and synthesis.
		Final exam	