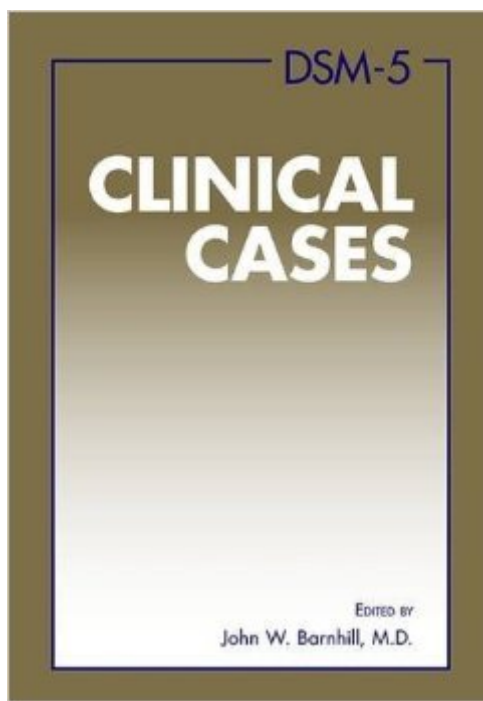


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# DSM-5 Clinical Cases



## Synopsis

DSM-5[trademark] Clinical Cases is a versatile volume designed to be used in a variety of contexts and for an audience that includes teachers, students, and clinicians. A companion to DSM-5[trademark], Clinical Cases brings DSM-5[trademark] to life through engaging narratives of every disorder. Faithful to the new edition, the book emphasizes the diagnostic concerns of severity, dimensionality, culture, age and development, and gender. Each case is presented by an expert who concludes with a discussion of the context of the diagnosis. Anyone interested in understanding the interface between disorder classification and patient diagnosis will find DSM-5[trademark] Clinical Cases compelling, captivating, and enlightening to read.

## Book Information

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Average Customer Review: 4.4 out of 5 stars [See all reviews](#) (53 customer reviews)

Best Sellers Rank: #18,216 in Books (See Top 100 in Books) #32 in [Books > Textbooks > Medicine & Health Sciences > Medicine > Clinical > Psychiatry](#) #39 in [Books > Health, Fitness & Dieting > Psychology & Counseling > Psychiatry](#) #335 in [Books > Medical Books > Medicine > Internal Medicine](#)

## Customer Reviews

I work as a child psychologist, where mental health diagnosis plays a big part in my daily role. I also teach DSM/diagnostics to graduate level graduate students. For me, these casebooks are extremely helpful, both in my role as a diagnostician, as well as in my work as an instructor. This book doesn't go into much description about DSM, the process of diagnosing, or treatment. Thus, you will need to have a copy of DSM 5. Unlike previous editions of the DSM case studies, these are organized by diagnostic category [e.g., Depressive Disorders, Somatic Symptoms, Sleep Disorders, etc.] and there is a brief description of what symptoms/characteristics these entail. For the most part, this book is a collection of vignettes [103, if I counted correctly]. Some are relatively easy and straight-forward [e.g., Jane was referred for an urgent psychiatric consultation after she told her

roommate that she was suicidal], while others are much more complex [e.g., Sally presented to a psychiatrist as part of a court proceeding that was intended to legally reassign her gender to female]. The goal is to get you to think about the symptoms being presented and for you to formulate your diagnostic hypotheses. With many of the vignettes, you are left with more questions than anything, as these descriptions are brief. Unlike your more typical case study, you aren't provided with extensive information about the person's family history, prior mental health background, treatment history, etc. When that information is included, it is done so to help you come up with the accurate diagnosis, particularly in situations where time-lines, family history, or prior history must be taken into account. For teaching/learning purposes, however, this is ok.

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