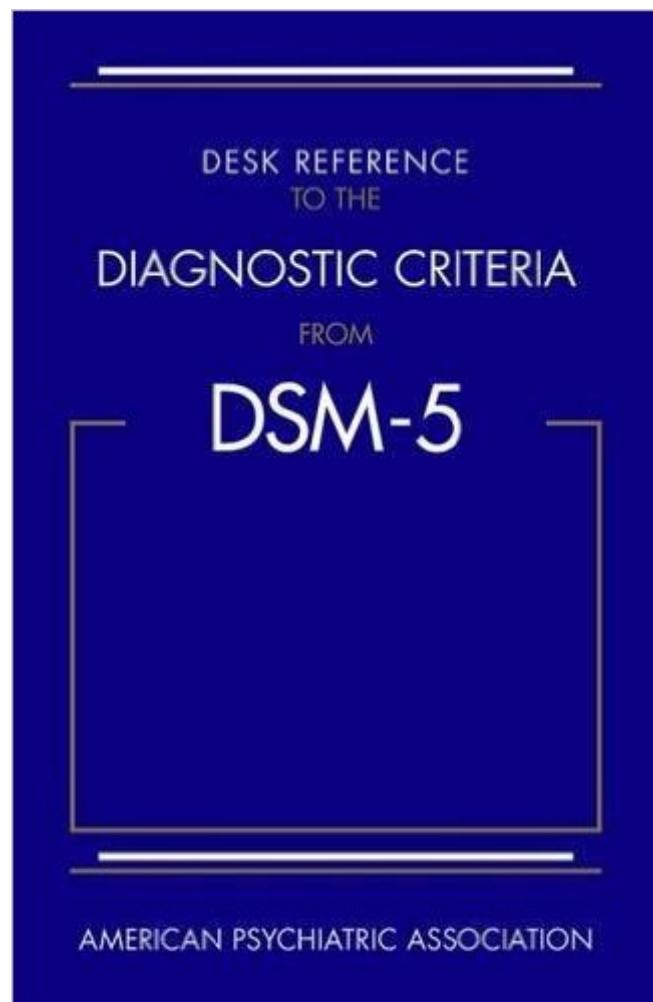


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# Desk Reference To The Diagnostic Criteria From DSM-5



## **Synopsis**

The Desk Reference to the Diagnostic Criteria From DSM-5 is a concise, affordable companion to the ultimate psychiatric reference, DSM-5. It includes the fully revised diagnostic classification, as well as all of the diagnostic criteria from DSM-5 in an easy-to-use paperback format. This handy reference provides quick access to the information essential to making a diagnosis. Designed to supplement DSM-5, this convenient guide will assist all mental health professionals as they integrate the DSM-5 diagnostic criteria into their diagnoses. The Diagnostic and Statistical Manual of Mental Disorders stands alone as the most authoritative reference available for clinical practice in the mental health field, and the structural and diagnostic changes in the fifth edition are must-know material for every clinician. The Desk Reference to the Diagnostic Criteria From DSM-5 distills the most crucial, updated diagnostic information from this volume to provide clinicians with an invaluable resource for effectively diagnosing mental disorders, ranging from the most prevalent to the least common.

## **Book Information**

Paperback: 444 pages

Publisher: American Psychiatric Publishing (May 27, 2013)

Language: English

ISBN-10: 0890425566

ISBN-13: 978-0890425565

Product Dimensions: 1 x 4.2 x 6.2 inches

Shipping Weight: 12 ounces (View shipping rates and policies)

Average Customer Review: 4.1 out of 5 starsÂ  See all reviewsÂ  (1,035 customer reviews)

Best Sellers Rank: #1,447 in Books (See Top 100 in Books) #3 inÂ  Books > Reference > Encyclopedias & Subject Guides > Medical #4 inÂ  Books > Health, Fitness & Dieting > Psychology & Counseling > Reference #4 inÂ  Books > Textbooks > Medicine & Health Sciences > Reference

## **Customer Reviews**

I am a Licensed Alcohol/Drug Counselor and a Licensed Independent Mental Health Practitioner in Nebraska. While I have not examined the Desk Reference thoroughly yet, here are some initial observations.1. My copy is not missing any pages2. Both the ICD-9 and ICD-10 codes are included in the DSM-5. The ICD-10 codes are in parenthesis. This is helpful and means we do not have to buy a new book when the use of ICD-10 becomes mandatory October 1, 2014.3. I wish the DSM-5 Desk Reference was spiral bound as it will not take long before the binding breaks down due to

frequent use.4. DSM-5 does away with the multiple axis system which I find very helpful, particularly, the elimination of Axis 5 which was very subjective.5. DSM-5 makes stressors that were previously identified on Axis 4 into diagnosis which are identified as "V" codes in ICD-9 and "Z" codes in ICD-10. I find this troubling. For example, Homelessness is now a mental health diagnosis V60.0 (Z59.0) OR, probably my current favorite, Problem Related to Current Military Deployment Status V62.21 (Z56.82). Given that I am a civilian counselor in the Army Substance Abuse Program and I am currently stationed in S. Korea, I will be using this code a lot. Are both of these problems stressful? YES. Can both of these lead to further chemical use or exacerbate or sometimes lead to actual mental health issues? You better believe it! But to make them diagnosis in their own right is a travesty. It is not going to lead insurance companies to pay for treatment for Homelessness or Problem Related to Current Military Deployment Status now or in the future. If I remember correctly, even Medicaid does not pay for treatment of "V" codes.

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