

PAP 687- Behavioral Health

Expected Learning Outcomes

Upon completion of this course, students will be able to:

1. Formulate a patient-centered history and problem-focused history for adults with acute and chronic conditions in the behavioral medicine setting. (B3.03a, B3.03b, B3.03e) (MK)
2. Develop differential diagnoses for adult patients with acute and chronic conditions in a behavioral medicine setting. (B3.03a, B3.03b, B3.03e) (MK)
3. Choose appropriate diagnostic tests for adult patients in a behavioral medicine setting. (B3.03a, B3.03b, B3.03e) (MK)
4. Evaluate diagnostic test results to assess both acute and chronic behavioral health conditions in adult patients within a behavioral medicine setting. (B3.03a, B3.03b, B3.03e) (CTS)
5. Formulate an appropriate diagnosis based on clinical case information, in the behavioral health setting. (B3.03e) (CRPS)
6. Demonstrate motivational interviewing to encourage patient's adherence with recommended treatment plans, in the behavioral health setting. (B3.03e) (CTS)
7. Develop appropriate acute and chronic treatment plans for adult patients presenting to a behavioral medicine setting. (B3.03a, B3.03e) (CRPS)
8. Engage in person-centered communication with members of the healthcare team, in the behavioral health setting. (B3.03e) (ICS)
9. Produce accurate, organized, and comprehensive medical documentation, in the behavioral health setting. (B3.03e) (ICS)
10. Apply principles of evidence-based medicine to the practice of behavioral medicine. (B3.03e) (CRPS)
11. Exhibit empathy, respect, cultural humility, and ethical integrity in all interactions with patients and those involved in their care, in the behavioral health setting. (B3.03e) (PROF)
12. Demonstrate ability to use feedback to make performance improvements, in the behavioral health setting. (B3.03a, B3.03e) (PROF)
13. Understand the PA scope of practice in the behavioral health setting. (B3.03e) (PROF).
14. Demonstrate acquisition of medical knowledge necessary to provide acute and chronic care of behavioral & mental health conditions to adult patients presenting to the behavioral medicine setting. (B3.03a, B3.03b, B3.03e) (MK)

Note: Each course learning outcome aligns with one or more ARC-PA defined competency domains, including: MK - Medical Knowledge, ICS - Interpersonal and Communication Skills, CRPS - Clinical Reasoning and Problem Solving, CTS - Clinical and Technical Skills, PROF – Professionalism



Instructional Objectives

Upon completion of this course, students will be able to:

Instructional Objectives	Expected learning outcome
1. Elicit a history from a patient, or those involved in their care, by asking clear questions in a logical sequence, in the behavioral medicine setting. 2. Evaluate the need for utilization of other resources (e.g. past medical records, language translation services) to aid in obtaining patient history, in the behavioral medicine setting. 3. Identify the key elements of a psychiatric and behavioral health history, including chief complaint, history of present illness, past psychiatric history, substance use history, family psychiatric history, medical history, and social history, in the behavioral medicine setting. 4. Compose a structured psychiatric interview that explores mood, thought processes, perception, cognition, and behavior while ensuring patient comfort, in the behavioral medicine setting. 5. Utilize interview techniques for patients with communication barriers, cognitive impairments, or psychiatric conditions affecting insight and reliability, in the behavioral medicine setting.	Formulate a patient-centered history and problem-focused history for adults with acute and chronic conditions in the behavioral medicine setting.
1. Relate patient's history and presenting symptoms to rank differential diagnoses, in the behavioral medicine setting. 2. Differentiate between functional and organic causes of psychiatric symptoms, in the behavioral medicine setting. 3. Analyze findings from diagnostic studies to refine differential diagnoses, in the behavioral medicine setting. 4. Recognize how acute psychiatric presentations differ from chronic mental health conditions, in the behavioral medicine setting. 5. Relate the ways in which age, comorbidities, and social determinants of health influence the differential diagnosis for a given clinical presentation, in the behavioral medicine setting.	Develop differential diagnoses for adult patients with acute and chronic conditions in a behavioral medicine setting.



1. Utilize current evidence-based guidelines to recommend age- and risk-appropriate screening studies, in the behavioral medicine setting. 2. Demonstrate the ability to choose appropriate diagnostic studies tailored to a patient's presenting symptoms, medical history, and clinical context in the behavioral medicine setting. 3. Identify medical conditions (e.g., thyroid disorders, infections, vitamin deficiencies, neurological conditions) that can contribute to psychiatric symptoms and require diagnostic testing, in the behavioral medicine setting. 4. Select diagnostic studies that respect the patient's cultural, financial, and personal preferences while maintaining evidence-based standards of care, in the behavioral medicine setting.	Choose appropriate diagnostic tests for adult patients in a behavioral medicine setting.
1. Analyze results of diagnostic screenings to identify normal findings, abnormalities, and indications for further evaluation, in the behavioral medicine setting. 2. Interpret serum drug levels for medications to ensure therapeutic dosing and detect toxicity or subtherapeutic levels, in the behavioral medicine setting. 3. Analyze results from validated cognitive assessments and psychiatric screening tools to guide diagnosis and treatment planning, in the behavioral medicine setting. 4. Recognize abnormal diagnostic findings that require emergent action and referral, in the behavioral medicine setting.	Evaluate results of diagnostic tests for evaluation of acute and chronic behavioral & mental health conditions in adult patients in a behavioral medicine setting.
1. Integrate patient history and diagnostic test results to formulate accurate and evidence-based diagnoses, in the behavioral medicine setting. 2. Consider patient-specific risk factors (e.g., age, comorbidities, family history, ACEs) to refine and prioritize potential diagnoses, in the behavioral medicine setting. 3. Identify when initial diagnoses need to be adjusted based on new information or patient response to treatment, in the behavioral medicine setting.	Formulate an appropriate diagnosis based on clinical case information, in the behavioral medicine setting.



1. Use the core principles of motivational interviewing, in the behavioral medicine setting. 2. Identify the stages of change (precontemplation, contemplation, preparation, action, maintenance, relapse) and tailor motivational interviewing techniques accordingly, in the behavioral medicine setting. 3. Use open-ended questions, affirmations, reflective listening, and summarization to guide patient conversations, in the behavioral medicine setting. 4. Use motivational interviewing with the patient to set realistic, achievable goals based on their values, priorities, and stage of change, in the behavioral medicine setting. 5. Compose motivational interviewing approaches based on the patient's cultural background, communication style, health literacy, and specific concerns, in the behavioral medicine setting.	Demonstrate motivational interviewing to encourage patient's adherence with recommended treatment plans, in the behavioral medicine setting.
1. Demonstrate knowledge of both pharmacologic and non-pharmacologic treatments, commonly used in the behavioral medicine setting. 2. Apply validated screening instruments (e.g., PHQ-9, GAD-7, AUDIT, MOCA) to guide diagnosis and treatment planning, in the behavioral medicine setting. 3. Differentiate for immediate safety concerns, including suicidal ideation, homicidal ideation, and acute psychosis, and determine the need for urgent intervention, in the behavioral medicine setting. 4. Determine the appropriate plan of care using clinical guidelines, in the behavioral medicine setting. 5. Develop a treatment plan including appropriate prescriptions, referrals, and follow up instructions, in the behavioral medicine setting. 6. Develop a patient-centered treatment plan by discussing options with behavioral medicine patients, considering their preferences, and addressing any concerns or barriers to care.	Develop appropriate acute and chronic treatment plans for adult patients presenting to a behavioral medicine setting.



7. Recognize cultural beliefs, stigma, and personal preferences that may influence mental health treatment-seeking behavior.	
1. Distinguish the scope and limitations of providers and members of the healthcare team within the behavioral medicine setting. 2. Identify the capabilities of specialists and facilities as they relate to the diagnosis and management of behavioral health conditions. 3. Deliver succinct, organized, and clear oral case presentations to preceptors and other members of the behavioral medicine health care team. 4. Request consultation with specialists when clinically appropriate, in the behavioral medicine setting.	Engage in person-centered communication with members of the behavioral health care team.
1. Incorporate the required elements of the history of present illness, past medical history, medical decision making, assessment and plan into the behavioral medicine patient's medical record. 2. Produce thorough and defensible medical documentation supported by the current standards of care in behavioral medicine.	Produce accurate, organized, and comprehensive medical documentation, in the behavioral medicine setting.
1. Demonstrate appropriate utilization of clinical decision-making tools validated for use in behavioral medicine practice. 2. Recall resources available for referencing up-to-date clinical practice guidelines, in the behavioral medicine setting. 3. Incorporate principles of evidence-based practice into patient education and shared decision making, when appropriate, in the behavioral medicine setting.	Apply principles of evidence-based medicine to the practice of behavioral medicine.
1. Recognize communication barriers and appropriately utilize trained language interpreters, as needed, in the behavioral medicine setting. 2. Choose communication style and terminology to suit the developmental and cognitive level of the patient, in the behavioral medicine setting. 3. Model cultural humility with approach to history-taking, respecting patients' beliefs and values	Exhibit empathy, respect, cultural humility, and ethical integrity in all interactions with patients and those involved in their care, in the behavioral health setting.



related to their health, in the behavioral medicine setting. 4. Describe diagnosis, results, plan of care, and education to behavioral medicine patients and their families in a manner that is clear, empathetic, professional, respectful, and compassionate. 5. Engage in effective shared decision making with patients and those involved in their care, when appropriate, in the behavioral medicine setting.	
1. Implement actionable steps for clinical improvement in areas such as patient assessment and documentation based on feedback received during behavioral medicine mid-rotation preceptor evaluation. 2. Complete a structured self-reflection exercise at the conclusion of the rotation, identifying at least one behavioral medicine patient encounter from the rotation with room for improvement and proposing a strategy for professional growth or clinical development.	Demonstrate ability to use feedback to make performance improvements, in the behavioral medicine setting.
1. Recognize the scope of practice, responsibilities, and contributions of a PA in the behavioral medicine setting and on interdisciplinary teams. 2. Recognize when to seek additional resources, consult team members, or refer patients to ensure high-quality, evidence-based patient care, in the behavioral medicine setting.	Understand the PA scope of practice in the behavioral health setting
1. Identify and describe the pathophysiology, clinical presentation, and management of preventative, acute, and chronic conditions as described on the PAEA EOR Behavioral Medicine topic list. 2. Demonstrate knowledge of all content categories and task categories described in the NCCPA PANCE content blueprint applicable to the practice of behavioral medicine.	Demonstrate acquisition of medical knowledge necessary to provide acute and chronic care of behavioral & mental health conditions to adult patients presenting to the behavioral medicine setting.