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POSTDOCTORAL PROGRAM IN CLINICAL NEUROPSYCHOLOGY

Clement J. Zablocki VA Medical Center
Milwaukee, Wisconsin

Table of Contents

Accreditation Status.....	1
Neuropsychology at the Milwaukee VAMC	1
The Neuropsychology Fellowship Program	2
General Program Features:	2
Rotations	3
Program Requirements and Options:	3
Clinical Experiences	4
Primary Rotations.....	4
The Polytrauma Program:.....	5
Neurology Outpatient Clinics:.....	5
Physical Medicine & Rehabilitation Clinics:.....	5
Clinics at the Medical College of Wisconsin:.....	6
Secondary VA Rotations.....	6
Assessment Skills	7
Supervision	8
Didactics: Required	8
VENUE: Milwaukee VA.....	8
VENUE: Medical College of Wisconsin.....	9
Didactics: Optional	9
VENUE: Milwaukee VAMC	9
VENUE: Medical College of Wisconsin.....	9
VENUE: Other.....	10
Training Staff.....	11
Core Neuropsychology Faculty:.....	11
Geropsychology and Clinical Psychology Faculty:.....	12
Medical College of Wisconsin’s Neuropsychology Clinic Staff.....	13
Application & Selection Procedures	14
Post-doctoral Residency Program Tables	15

POSTDOCTORAL PROGRAM IN CLINICAL NEUROPSYCHOLOGY

Clement J. Zablocki VA Medical Center, Milwaukee, Wisconsin

Our two-year fellowship program is a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN), is compliant with the Houston Conference training guidelines, and meets necessary requirements for ABPP/ABCN board certification in Clinical Neuropsychology. Eric R. Larson, PhD., ABPP-CN serves as the Clinical Neuropsychology Fellowship Director.

Accreditation Status

The neuropsychology postdoctoral fellowship program at the Milwaukee VA Medical Center is fully accredited by the Commission on Accreditation of the American Psychological Association.

Office of Program Consultation and Accreditation

American Psychological Association
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Washington, DC 20002-4242
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Neuropsychology at the Milwaukee VAMC

The Neuropsychology service provides inpatient and outpatient services to the patients at the VAMC in Milwaukee and its Community Based Outpatient Clinics (CBOCs) in rural areas of Wisconsin. There are currently four clinical neuropsychologists on our staff, three of whom are board-certified.

Consultations for neuropsychological services are received from inpatient services, including the Intensive Care Unit, all medical-surgical units, mental health, geriatric medicine units, the nursing home, spinal cord injury, transitional care, palliative care, and rehabilitation. Outpatient referrals are received from all primary care clinics, mental health programs, and specialty programs (Geriatric Medicine, Emergency Department, Vocational Rehabilitation, the Milwaukee Vet Center, Vets Place Central, Domiciliary, and the Compensation and Pension Board), and specialty clinics (Neurology, Neurosurgery, Orthopedics, Dentistry, Nephrology, Cardiology, Oncology, Transplant Services, Spinal Cord Injury, and Physical Medicine & Rehabilitation).

In addition to general neurobehavioral diagnostic assessments, dispositional planning and recommendations for rehabilitative services, neuropsychology plays an integral role on the Polytrauma Support Clinic Team, a program for assessment of home-bound veterans, and in the deep brain stimulation, and the normal pressure hydrocephalus programs for which pre- and post-operative evaluations are conducted for diagnostic, baseline and outcome investigations, and in a chronic stroke program. Neuropsychology staff have a routine presence in neurology clinics such as the memory disorders clinic, and serve as consultative support for the multiple sclerosis clinic and in the multidisciplinary geropsychiatry/geropsychology clinic and chronic stroke clinic. Such involvement allows frequent contact with a number of disciplines and also provides a didactic venue to teach medical staff about neurocognitive, psychiatric, and behavioral disorders.



The Neuropsychology Fellowship Program

Our VA-based fellowship is partnered with the neuropsychology fellowship at the Medical College of Wisconsin and provides intensively supervised experiences in clinical assessment, consultation, and intervention with patients representing a broad range of neurobehavioral disorders and pathologies. The training program aims to provide fellows with the knowledge and skills necessary for independent practice in the specialty area of clinical neuropsychology.

Core competencies have been defined in the following areas:

Ethical and Legal Standards, Professional Values and Attitudes, Communication and Interpersonal Skills, Individual and Cultural Diversity, Assessment, Intervention, Consultation, Clinical Supervision/Teaching, and Research/Program Evaluation.

Within this framework, training emphasis is placed on timely and efficient neuropsychological assessment and consultation services. It is anticipated that the fellow will spend 50-75% of their time gaining clinical experiences. The remaining time is devoted to didactics, research, and elective educational opportunities targeted to complete the individual's education and training needs.

The two neuropsychology fellows are among ten psychology fellows in our APA-accredited programs. The other eight fellowship positions have the following areas of emphasis: geropsychology, palliative care, post-deployment mental health, residential rehabilitation, primary care, LGBT health care,

and women's health.

General Program Features:

The fellow will have the opportunity to observe, interview, and study individuals presenting with focal and diffuse brain disease, resolving and degenerative conditions, neuro-developmental injury and abnormality, and episodic and chronic conditions. The fellow will also learn the fundamentals of the neurological exam, neuroimaging, and other neurodiagnostic techniques with the goals of evaluating the affective and personality changes that commonly occur with neurological conditions and those that mimic neurological conditions and integrating relevant data to develop an integrated formulation of the individual's neurobehavioral condition and likely course.

The neuropsychology fellow will learn to develop practical recommendations based on case formulations, provide a range of interventions that are derived from knowledge gathered in the neurobehavioral interview and neuropsychological testing, and learn how

neuropsychological knowledge can be used in primary care settings to facilitate problem-focused evaluation and triage for timely service coordination and delivery.

Rotations

Primary education and training experiences are provided through the General Neuropsychology Consultation Service that receives referrals for inpatients and outpatients across the medical campus. Additional elective rotations are available through Polytrauma Support Services, the Home Based Primary Care (HBPC) program, the Geriatric Evaluation and Management (GEM) Unit, the Geropsychiatry Clinic, and Spinal Cord Injury Unit (see below for additional information on these rotations).

Additional educational and training experiences take place through a cooperative training arrangement with the Neuropsychology Postdoctoral Training Program at the Medical College of Wisconsin (see below for more detailed description of the primary and elective rotations). Each of the elective rotations has a different primary supervisor, which serves to broaden the scope of training. Four of the rotations at MCW involve working with multidisciplinary teams for service delivery and will provide the fellow with experience in developing relevant professional relationships for effective service delivery. These rotations can be supplemented by experiences in various MCW Neurology clinics including Cognitive Disorders, Epilepsy, Brain Tumor, Multiple Sclerosis and Movement Disorder Clinics. In those clinics, trainees will learn to administer relatively brief batteries and teach medical staff about cognitive and emotional functioning.

Program Requirements and Options:

Program Evaluation/Research Project:

In addition to gaining clinical experience, fellows will be expected to demonstrate

competence by completing a program development, research, or program evaluation project. Activities that have been accepted as satisfying this requirement have included the publication of a paper, book chapter, or case report, the presentation of a paper at meetings of professional organizations, or the preparation of a literature review. Fellows are also asked to complete multiple didactic presentations and to regularly participate in journal club, case conference, and off-site presentations.

Training in Supervision:

The postdoctoral fellow will also be provided with the opportunity to develop skills as a clinical supervisor. They will be assigned at least one practicum student during each training year and will receive tiered experience in providing supervision.

Didactics:

Mandatory VA didactics include a weekly Neuropsychology Case Conference, Professional Issues Meeting, Journal Club, and group supervision with all postdoctoral fellows at the Milwaukee VAMC. There is also monthly Diversity Teleconference. The fellow attends weekly Neuropsychology Didactics offered to fellows in the Neuropsychology Fellowship Program at MCW. Additional optional didactics are available through MCW Neuropsychology including Journal Club, Case Conference, and various team conferences (e.g., tumor board, neuroanatomy review series, brain cuttings). See below for a list of additional optional didactic experiences available to the fellow.

Research:

Although the program primarily emphasizes clinical experiences, research opportunities are available including opportunities for collaborative studies with neuropsychology faculty or other medical school faculty. Opportunities with the Neuropsychology faculty currently include investigations on the natural recovery from mild traumatic brain injury, use of functional neuroimaging techniques to better

understand the effects of traumatic brain injury and other clinical pathological conditions, investigations on the relationships between migraine, photophobia and TBI, understanding the profile of attentional disturbances in various neurological and psychiatric conditions (e.g., ADHD, PTSD), outcome prediction from somatoform symptoms, evaluation of efficacy of treatment strategies for ADHD, and the evaluation of a novel VA chronic stroke clinic. The neuropsychology fellow also has the option of participating in ongoing research projects with the neuropsychology faculty at MCW.

Teaching:

The Neuropsychology Service trains 2-4 practicum students annually from regional universities, one of whom is assigned to the fellow for supervision. The fellow can also participate in training and supervising of any clinical psychology intern who wishes to complete a rotation in neuropsychology. The fellow is provided a variety of didactic teaching options, including making a presentation to interns in the weekly didactic series, presenting cases at Neuropsychology Case Conference, making presentations as a part of the MCW Neuropsychology Seminar or Journal Club, providing guest lectures to psychology graduate students at Marquette University or the University of Wisconsin at Milwaukee, teaching MCW medical students about the interview techniques used in mental status examinations, and/or presentations in VA Grand Rounds or local training conferences.

Clinical Experiences

The fellow is expected to evaluate approximately three patients per week spanning all rotational assignments. The number may be adjusted up or down depending on degree of complexity and length of examination required to address the clinical issues at hand.

Primary Rotations

General Neuropsychology Consultation:

Over 1200 Veterans are evaluated by the Neuropsychology Service annually. Common referral questions include requests for differential diagnoses of psychiatric and neurobehavioral syndromes, determination of psychogenic contributions to clinical presentation, determination of functional competence and capacity for medical decision-making, vocational and academic programming, assistance with disposition planning, and completion of Compensation & Pension evaluations.

The fellow is provided the first selection of interesting educational cases who are referred to the Clinic. Assistance from psychometricians is available for about 50% of the fellow's cases. The fellow will receive experience in the General Neuropsychology Consultation Service throughout the full two-years of the fellowship, though the time devoted to this area will vary depending on the other clinical rotations. The fellow will participate in at least one of the VA Neurology clinics for a 6-month period. Fellows typically spend 12-18 months at MCW participating in various clinical rotations.

Inpatient Neuropsychology Coverage:

The fellow takes a lead role in coverage of inpatient referrals under the direct supervision of one of the faculty. Case load varies from 2 to 6 inpatient consults per week. Inpatient coverage rotates between fellows on a bi-weekly basis, with each fellow covering consults every other week. Consults are usually requested for medical decisionality, general functional competency or guardianship, disposition at discharge, and/or differential diagnosis. Test batteries tend to be brief and often are done at bedside. Testing help by technicians in the Neuropsychology Clinic is sometimes available.

The Polytrauma Program:

This service aims to provide timely evaluations and treatment to veterans who served in combat theatres (OEF/OIF) and who have injuries to multiple organ systems. The Polytrauma Support Clinical Team is staffed by Physical Medicine & Rehabilitation physicians, social worker, clinical psychologist, speech therapist, occupational therapist, physical therapist, and a neuropsychologist.

The program has four blocks of clinical time per week that serve the purpose of providing an in depth interview and assessment of multiple system injuries and lingering needs. A weekly interdisciplinary case conference enables planning for coordinated care and periodic re-evaluation of progress and obstacles. The focus in the clinic is one of multi-disciplinary triage and immediate planning of further evaluation and treatment in order to optimize re-integration of the Veteran into the community.

In the past year, over 250 Veterans were evaluated in this clinic, all of whom were seen by a neuropsychologist who serves as the primary diagnostician for traumatic brain injury and residuals from brain trauma. The clinical psychologist in the Polytrauma program provides psychoeducational and psychotherapy services to polytrauma patients.

Neurology Outpatient Clinics:

The Neurology Clinic hosts a number of specialty clinics that welcome involvement from the Neuropsychology service. These include clinics for movement disorders, memory disorders, multiple sclerosis, and ALS. Pre- and post deep brain stimulation surgery patients and patients selected for assessment of normal pressure hydrocephalus are evaluated.

By participating in the neurology clinics, the fellow observes the neurology exam, conducts mental status exams, makes appropriate referrals for more extensive neuropsychological testing or mental health treatment, provides consultation to the neurologist and residents in the clinic, and assists in brief patient and family counseling.

Physical Medicine & Rehabilitation Clinics:

The neuropsychology service, PM&R, physical therapy, and occupational therapy participate in Chronic Stroke Clinic. This clinic serves to help patients transition from a rehabilitation setting to independent or supported living and to help those patients with their ongoing medical, cognitive, functional, and mental health needs. This rotation is interdisciplinary and gives fellows an opportunity to evaluate patients who have focal brain injuries at various stages of recovery. The fellow also helps to compile data related to these evaluations into a database that is available for various projects.



Clinics at the Medical College of Wisconsin:

Through a cooperative arrangement with the postdoctoral training program at MCW, the fellow has the opportunity to obtain additional neuropsychology training at MCW where there are 9 neuropsychologists, 6 of whom are board certified. Likewise, residents from MCW are given the opportunity to gain clinical experiences through the Milwaukee VA postdoctoral program, thereby enriching the educational and training experiences of both postdoctoral programs. MCW offers a number of experiences that our fellows have found valuable. One such rotation is the Comprehensive Epilepsy Program where pre- and post-operative neuropsychological evaluations, functional imaging, and Wada exams are considered integral to the program. The neuropsychologist in this program works with a team of epileptologists, neurosurgeons, social workers, clinical nurses, and researchers.

Another rotation is the Mild Traumatic Brain Injury Clinic that aims to provide transitional triage services for acutely injured patients until they are able to resume pre-injury work/academic and social lifestyles. Rehabilitation specialists and neuropsychologists operate this service and provide for the multidisciplinary diagnostic and treatment services. Also available at MCW is a comprehensive neuro-oncology service with an active research program investigating issues of neuro-cognitive outcome after various treatments for primary brain tumors and chemotherapy for peripheral organ cancer (e.g., breast cancer). Opportunities to participate in medicolegal evaluations and the movement disorders DBS program at MCW are also available.

Secondary VA Rotations

Home Based Primary Care (HBPC):

This program offers a range of primary care

services to homebound Veterans with chronic medical illness. The team generally serves geriatric patients, but younger Veterans are admitted as well. The program provides services (including cognitive testing) to patients in their homes; both rural and urban veterans are served. Typical diagnoses include dementia, diabetes, multiple sclerosis, congestive heart failure, and chronic obstructive pulmonary disease. The majority of patients have psychiatric co-morbidities, such as depression, anxiety, bipolar disorder, substance use disorders, and personality disorders.

HBPC is an interdisciplinary team that includes primary care providers (nurse practitioners), nurses, social workers, a dietitian, a pharmacist, physical therapists, a geriatric neuropsychologist, and a physician Medical Director. Neuropsychological testing is frequently requested to provide information regarding the scope and severity of cognitive deficits, diagnostic clarification, and to determine a veteran's capacity to make independent health care decisions and/or to live independently.

Geriatric Evaluation and Management (GEM) Unit:

The GEM is a 10-bed inter-disciplinary assessment and short-term rehabilitation unit for Veterans over age 65 with complex medical and psychosocial histories. The primary objective is to promote maximum function for each patient within the least restrictive environment based upon a comprehensive, interdisciplinary assessment. Psychological and/or neuropsychological evaluations are completed on all patients admitted to GEM. Each patient is reviewed at an interdisciplinary team conference at least weekly.

The team includes senior staff and fellows in geriatric medicine, medical residents in geriatrics, medical students, and staff and trainees from Psychology, Social Work, Nursing, Physical Therapy, and Dietetics. The GEM team

and the geropsychologist also work in close collaboration with the Consultation/Liaison Psychiatrists. Representatives from the team often meet with the patient and family members near the end of the patient's hospital stay to provide feedback and to facilitate discharge planning.

Compensation and Pension Examinations:

The fellow can participate in disability evaluations that involve neurocognitive claims from neurological or psychiatric conditions. Common neurological conditions include TBI, stroke, and incidental neurodegenerative conditions. The fellow will learn the protocol for interview, record review, neurocognitive evaluation and report of functional status, limitations and restrictions.

Spinal Cord Injury Unit and Clinics:

The fellow has the opportunity to follow rehab patients over several months of recovery, consult with other disciplines, observe physical, occupational and speech therapy, attend a weekly multidisciplinary case conference, provide cognitive rehabilitation, and provide neuropsychological assessment of post acute brain injury.

Geropsychiatry/Geropsychology Outpatient Clinic:

This interdisciplinary clinic allows fellows to work with a number of psychiatry residents and attendings on each clinic day. The clinic consists of psychiatry attendings, psychiatry residents, a pharmacist, a social worker, psychologists, and neuropsychologists. One of the functions of the neuropsychologist in this setting is to detect and diagnose neurological dysfunction in geriatric patients with comorbid psychiatric disorders.

The fellow is involved in teaching neuropsychology to psychiatry residents and helping them improve their ability to detect early signs of dementia and other neurocognitive disorders. Psychiatry residents typically administer a screening measure

of cognition and then consult with the neuropsychologist and fellow about differential diagnosis and whether additional testing would be helpful in designing a treatment plan for the patient. The fellow or practicum student administers a one hour neuropsychological battery and the fellow provides feedback to the psychiatry resident and attending prior to the patient's next scheduled psychiatry appointment.

The fellow also participates in multidisciplinary treatment meetings where diagnostic issues are discussed and treatment plans are refined. Geriatric psychotherapy and participation in outcome studies are also options in this rotation.

Assessment Skills

Interview:

Throughout the two year experience fellows will improve their medical knowledge about various neuropsychological conditions and add depth to their clinical interviews. Interview skills will also be refined through individual supervision, group supervision, and case conferences.

Report writing:

Fellows will improve their report writing skills by receiving timely and specific feedback from supervisors about positive aspects of their reports and areas that can be improved. Fellows will learn to write succinct reports that are tailored to various audiences including medical specialists, treatment teams, and primary care providers. Emphasis is placed on producing reports with conclusions that are easily understood by medical providers and families.

Feedback and Interventions:

A core component of neuropsychological intervention is providing educational feedback to the Veteran, his/her family, and medical personnel about the nature of identified neurocognitive deficits. Such feedback often involves making decisions regarding differential diagnosis, treatment planning, career choice,

educational options, learning obstacles and compensations, and social and community integration.

The fellow will learn to provide feedback that is easily understood by the veteran and his/her relatives and optimizes clinical outcomes and psychosocial adjustment. Opportunities for training in cognitive rehabilitation techniques are available with our speech pathology department to develop meaningful interventions for creating effective study skill habits and strategies of memory compensation. The clinical psychologist on the Polytrauma team can provide training in interventions with TBI patients for psychotherapy and psycho-educational needs. Providing timely and appropriate psycho-educational information to patients with mild TBI has been the strongest evidence-based practice linked to positive outcome after mild TBI. Symptom-directed treatment to address problem areas such as sleep, depression, and anxiety/PTSD in TBI patients can include experience in empirically

supported treatments with CBT and prolonged-exposure. The Milwaukee VA employs over 75 psychologists who specialize in many types of psychotherapy, so the fellow is able to tailor their recommendations to specific treatment programs.

Supervision

At the Milwaukee VA, the core neuropsychology supervisors have all completed postdoctoral residencies in neuropsychology. The fellow will receive supervision from each of these supervisors. Three additional staff members with postdoctoral training in geropsychology or rehabilitation psychology also have expertise in neuropsychological assessment of geriatric and spinal cord injury patients and can provide supervised experience in these areas. In addition to individual supervision within neuropsychology, the neuropsychology fellow and the other eight psychology fellows meet weekly for discussion of professional issues with the Director of the Psychology Training Program.

Didactics: Required

VENUE: Milwaukee VA

- **VA Neuropsychology Case Conference:** Weekly case conference devoted to review of neuropsychological cases in a format that is similar to ABPP/ABCN board exams.
- **VA Neuropsychology Journal Club:** Monthly discussion that is attended by neuropsychology faculty, interns, practicum students, and fellows. Discussant selects an article for review which rotates among faculty and fellows.
- **VA Professional Issues Meeting:** Weekly lunch meeting where neuropsychologists and residents discuss a variety of training and clinical issues.
- **VA Diversity Teleconference:** This teleconference is held across 11 VAMCs on a monthly basis and is comprised of a presentation and discussion related to aspects of multiculturally competent assessment and treatment.
- **VA Group supervision:** The weekly group supervision sessions often focus on professional development issues, discussion of the required postdoctoral projects, discussion of the fellow's supervision of practicum students, and discussion of organization, management and administrative issues. These sessions also provide the opportunity for fellows to raise clinical issues, ethical issues, and other concerns.

VENUE: Medical College of Wisconsin

- **MCW Neuropsychology Didactic**
Series: Tuesdays, 12-1:00 p.m. Taught by neuropsychology faculty and fellows at MCW. This series reviews common neurobehavioral

syndromes, neuropathology, neuroanatomy, and other topics relevant to board certification in neuropsychology and the practice of professional psychology.

Didactics: Optional

VENUE: Milwaukee VAMC

- **VA Psychology Training Committee**
Meeting: Residents attend the first half (30 minutes) of this monthly meeting where issues relevant to interns and residents are discussed.
- **VA Psychology Intern Seminar Series:** Two lectures per week with varying topics of psychological interest. A Neuropsychology Lecture series is embedded in this sequence and residents typically teach at least one lecture.
- **VA Grand Rounds:** A hospital-wide conference offered monthly and geared for primary care and residency level education. Varying topics, occasionally of interest to neuropsychologists.
- **VHA National Educational Series:** A monthly electronic presentation prepared for national distribution with invited national experts on various issues associated with both physical and psychological trauma.
- **VA Geropsychiatry Case Conference:** Case discussions presented by PGY 2 psychiatry residents. Cases are chosen that have emphasis on either pharmacological treatment or psychotherapy/psychosocial treatment. Results of neuropsychological assessment are discussed in the context of the patient's comprehensive mental health treatment plan. Other participants in the series are from psychology, social work, and nursing.

- **General Psychology Fellowship Seminar:** This is a peer-led seminar attended only by fellows and includes case-presentations, review of journal articles, and lecture topics presented to other residents (general psychology residents are required to complete all 3 types of presentations in this seminar).

VENUE: Medical College of Wisconsin

- **MCW Neuropsychology Journal Club:** Thursdays, 12:00-1:00 p.m. Led by neuropsychology faculty and fellows at MCW. Discussant selects an article for review and rotates among faculty and fellows.
- **MCW Neuropsychology Case Conference:** One hour case presentation that takes place on Fridays, 12:00-1:00 p.m.
- **MCW Neurology Grand Rounds:** Fridays, 8:00-9:00 a.m.
- **MCW Psychiatry Grand Rounds:** Wednesdays, 8:00-9:00 a.m.
- **MCW Weekly Brain Tumor Board:** Multidisciplinary brain tumor case conference, Wednesdays, 7:30-9:00 a.m.
- **MCW Epilepsy Multidisciplinary Case Conference:** Tuesdays, 8:00-9:00 a.m.
- **MCW Brain Cutting:** Opportunities to participate in pathological studies of brains. Fellows are periodically notified when pathology studies occur in the morgue at Froedtert Hospital.



■ **MCW Neuroanatomy Lectures for Neurosurgery**

Residents: Wednesdays, 7:30-9:00 a.m., the week after Labor Day through spring; Led by Dr. William Cullinan, PhD from Marquette University.

■ **Monthly Clinical Lectures for Geropsychiatry**

Residents: Lecture series on select Wednesday mornings by geropsychiatrists, geropsychologists, and neuropsychologists for PGY 2 geropsychiatry residents. Examples of topics covered include: decisional capacity and guardianship, neuropsychology and psychotherapy with elderly patients, depression in elderly patients, differential diagnosis of dementia, etc.

VENUE: Other

- **Marquette University Neuroanatomical Dissection:** Human Brain and Spinal Cord Annual three-day-long neuroanatomy and neurochemistry course with brain dissection lab taught by Dr. William Cullinan, a neuroscientist at Marquette University. For more information, visit: <http://www.marquette.edu/health-sciences/continuing-ed-neuroanatomical.shtml>



Training Staff

Core Neuropsychology Faculty:



Angela Gleason, Ph.D., ABPP-CN (University of Houston, 2004). Dr. Gleason is a staff neuropsychologist who serves as a core supervisor within the Outpatient Geropsychiatry, Multiple Sclerosis and Cognitive Disorders Clinics. After

completing a predoctoral internship at the University of Oklahoma Health Sciences Center, she completed a postdoctoral fellowship in clinical neuropsychology at the at the Medical College of Wisconsin. Prior to joining our staff, she worked for 10 years at Nebraska Medicine in Omaha. Dr. Gleason's primary interests are in memory disorders, movement disorders, oncology, multi-disciplinary assessment, and communication of results to patients and caregivers.



Eric R. Larson, Ph.D., ABPP-CN (University of Cincinnati, 2002). Dr. Larson is the Director of the Fellowship Program in Clinical Neuropsychology and one of its core supervisors. Dr. Larson completed a predoctoral internship at the Cincinnati VA

Medical Center and a postdoctoral fellowship in clinical neuropsychology at the Medical College of Wisconsin. Prior to joining our staff, he was an Assistant Professor in the Department of Psychiatry at the University of Chicago, where he served as the attending neuropsychologist for the Memory Center and provided general neuropsychological services for the University of Chicago Hospital. He is currently an Associate Professor of Psychiatry and Behavioral Medicine at the Medical College of Wisconsin. Dr. Larson's primary clinical interests include the cognitive sequelae of dementia, Parkinson's disease, traumatic brain injury, and psychiatric

disorders. His primary research interests include anosognosia (insight) and neuropsychiatric disorders, cognitive social neuroscience, and ADHD.



Kathleen M. Patterson, Ph.D., ABPP-CN (University of Wisconsin-Milwaukee, 1993). Dr. Patterson is a staff neuropsychologist who serves as one of the core supervisors. Dr. Patterson completed a predoctoral internship at the

Milwaukee VA Medical Center and a postdoctoral fellowship in clinical neuropsychology at the Medical College of Wisconsin. Dr. Patterson's primary clinical and research interests include Geriatrics, Demyelinating Diseases, TBI, ADHD/LD, and CABG. She is an Associate Professor of Psychiatry and Behavioral Medicine and Neurology at MCW.



Leia Vos, Ph.D. (Wayne State University, 2016). Dr. Vos completed her internship training at the John D. Dingell VA Medical Center in Detroit, MI, and her clinical neuropsychology fellowship at TIRR Memorial Hermann/Baylor

College of Medicine in Houston, TX. Dr. Vos is the attending neuropsychologist in the Polytrauma Clinic and her primary clinical interest relates to acquired brain injury, rehabilitation neuropsychology, and incorporating assessment and intervention in an interdisciplinary team environment. Her research interests include the relationships between neuropsychological assessment, personality, and psychopathology, including predictors of outcome following traumatic brain injury and the identification of modifiable factors for intervention.

Geropsychology and Clinical Psychology Faculty:

Peter Graskamp, Ph.D. (Marquette University, 2006). Dr. Graskamp is a clinical psychologist on the polytrauma team and also provides psychotherapy to patients in the ALERT program. He is available to supervise the fellow in providing psychotherapy and psycho-educational services. Dr. Graskamp's clinical focus is on the impact of concurrent medical and psychological concerns, traumatic brain injury/ concussion, multi-disciplinary team treatment, and symptom-focused psychological interventions. His current research interests include a study of the relationship between cognitive-behavioral stress management and the activity of implanted cardiac devices.

Kristen Payne, Ph.D. (University of Alabama, 2010). Dr. Payne is a psychologist on the Home Based Primary Care team, providing psychological assessment, psychotherapy, and caregiver support. She will supervise the fellow's experience on this team.

Heather M. Smith, Ph.D., ABPP-CG (Ohio State University, 2002). In addition to serving as the Medical Center's Lead Psychologist, Dr. Smith is the geropsychologist on the Geriatric Evaluation and Management Unit and Associate Professor in the Department of Psychiatry and Behavioral Medicine at the Medical College of Wisconsin. She offers an elective rotation on the GEM

unit. Her primary clinical and research interests include dementia, geriatric neuropsychological assessment, caregiver self-care, interdisciplinary team communication, and psychology training and supervision.

Roger D. Williams, Ph.D. (Indiana State University, 1993). Dr. Williams serves as a staff psychologist for the VA Spinal Cord Injury Service and Associate Professor of Psychiatry and Behavioral Medicine at the Medical College of Wisconsin. He completed his internship and fellowship with specialization in neuropsychology and geropsychology at Central Arkansas Veterans Health Care System (CAVHS) in Little Rock, Arkansas. Following fellowship, he was Assistant Professor of Geriatrics and Director of Neuropsychology services at the University of Arkansas for Medical Sciences. Prior to his current VA position, he was the Director of Postdoctoral Training at the Central Arkansas VA. His primary clinical and research interests include neuropsychological assessment, dementia and related disorders, rehabilitation, multi-disciplinary training, clinical supervision, movement disorders, spinal cord injury as well as chronically debilitating medical and psychiatric disorders.

Medical College of Wisconsin's Neuropsychology Clinic Staff

The primary supervisors of "off-site" clinical rotations at MCW neuropsychology clinic include:

Sara J. Swanson, Ph.D., ABPP-CN (Washington State University, 1989). Dr. Swanson is a Professor of Neurology. She completed a predoctoral internship at the University of Washington School of Medicine and a postdoctoral fellowship in Clinical Neuropsychology at MCW. She is board certified in Clinical Neuropsychology and specializes in the clinical evaluation of adults with neurobehavioral disorders, epilepsy, hydrocephalus, and head trauma and conducts intracarotid sodium amobarbital testing. Her research interests involve predictors of neurobehavioral outcome after temporal lobectomy and functional MRI of language and memory in epilepsy surgery.

Julie A. Bobholz, Ph.D., ABPP-CN (Rosalind Franklin University, 1998). Dr. Bobholz is an Associate Professor of Neurology. She completed a predoctoral internship at the University of Florida, Gainesville and a postdoctoral fellowship in Clinical Neuropsychology at MCW. She is board certified in Clinical Neuropsychology and specializes in the evaluation and treatment of adults with movement disorders and other neurologic/neurobehavioral disorders, including head injury, multiple sclerosis, brain tumors, and memory disorders. She participates in the Deep Brain Stimulation program at MCW.

David S. Sabsevitz, Ph.D., ABPP-CN (Rosalind Franklin University, 2003). Dr. Sabsevitz is an Associate Professor of Neurology and Director of Postdoctoral Education. He completed a predoctoral internship at the Long Island Jewish Medical Center and a postdoctoral fellowship in

Clinical Neuropsychology at MCW. He specializes in the evaluation and treatment of adults with neurological, behavioral, and developmental disorders. He is Director of the Neuro-Oncology Cognitive Clinic. His current research involves examining the structural and functional effects of cancer treatments on the brain, and examining the clinical utility of fMRI in the presurgical evaluation of epilepsy patients.

Laura Umfleet, Psy.D. (Roosevelt University, Chicago, 2012). Dr. Umfleet is an Assistant Professor of Neurology who completed an internship at University of Florida in Gainesville and a postdoctoral fellowship in Clinical Neuropsychology at MCW. She specializes in neurocognitive test sensitivity and specificity in detecting temporal lobe epilepsy, dementia, and malingering.

Michael McCrea, Ph.D., ABPP-CN (University of Wisconsin – Milwaukee, 1994). Dr. McCrea is a Professor of Neurosurgery who completed an internship at Vanderbilt University Medical School and a postdoctoral fellowship in Clinical Neuropsychology at Northwestern University Medical School in Chicago in 1996. He specializes in traumatic brain injury and is a nationally recognized author and investigator on mild traumatic brain injury and sports and military-related concussion. Dr. McCrea has a joint affiliation with the Zablocki VAMC.

The fellowship is scheduled to begin on August 19, 2019.

Application & Selection Procedures

A candidate for a fellowship must be a U.S. citizen who, by the beginning of the fellowship year, will have completed an APA-approved doctoral program in clinical or counseling psychology and an APA-approved pre-doctoral internship program. In reviewing applicants to the program, we look for candidates with solid backgrounds in both assessment and intervention. Relevant research experience is a factor in selection, though relevant clinical experience is typically weighed more heavily.

This VA Medical Center in its commitment to Equal Opportunity Employment and Affirmative Action encourages applications by minorities, women and handicapped persons.

The following application material is required:

1. A vita which describes the nature and extent of your previous clinical, academic, and research experience.
2. A cover letter describing your major interests and career objectives, including any particular areas you would wish to emphasize during the fellowship year.
3. Two examples of clinical reports.
4. At least three letters of recommendation from people familiar with your clinical work. One must be from one of your pre-doctoral internship supervisors.
5. A letter of support from your Internship Training Director indicating that you are in good standing to complete your internship and indicating the expected completion date. If you have already completed the internship you can send a copy of your internship certificate.
6. A graduate transcript.
7. If your transcript does not show the granting of the doctorate, a letter from the graduate program will be indicating

your current status in the program and the timeline for completing the remaining program requirements. This letter should attest that all degree requirements are expected to be completed prior to the fellowship start date.

Application material should be submitted through the APPIC online application system for postdoctoral programs (APPA CAS). The applicant portal can be accessed with the following link: <https://appicpostdoc.liaisoncas.com/applicant-ux/#/login>

For further information, contact:

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Deadlines: Application materials are to be received by *December 17, 2019*.

Interviews: Interviews for the neuropsychology position will be conducted at the International Neuropsychological Society Annual Meeting in February. Interviews at our medical center can also be arranged. If you are unable to visit, a telephone or video interview can be arranged. These interviews will be conducted prior to the INS meeting.

Selection:

The neuropsychology position will be filled through the APPCN computer match process.

Post-doctoral Residency Program Tables

Date Program Tables were updated: 6/1/2018

Postdoctoral Program Admissions
Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program.
The program operates within a scholar-practitioner model. There are two positions in clinical neuropsychology which are two year appointments. We look for candidates with solid backgrounds in neuropsychological assessment, research, and psychotherapy. Relevant research experience is a factor in selection, though relevant clinical experience is typically weighed more heavily.
Describe any other required minimum criteria used to screen applicants:
N/A

Financial and Other Benefit Support for Upcoming Training Year	
Annual Stipend/Salary for Full-time Residents	\$48,008
Annual Stipend/Salary for Half-time Residents	N/A
Program provides access to medical insurance for resident?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If access to medical insurance is provided	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Trainee contribution to cost required?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Coverage of family member(s) available?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Coverage of legally married partner available?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Coverage of domestic partner available?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	104
Hours of Annual Paid Sick Leave	104
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other Benefits:	
Ten paid federal holidays; authorized absence for attendance at workshops, seminars, conventions; Licensing Exam Release Time	

Initial Post-Residency Positions		
	2014-18	
Total # of residents	5	
Total # of residents who remain in training in the residency program	2	
	Postdoctoral Residency Position	Employed Position
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs Medical Center	2	1
Military health center	0	0
Academic health center	0	1
Other medical center or hospital	0	1
Psychiatric hospital	0	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	0	0
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0



