

CLINICAL PSYCHOLOGY INTERNSHIP

ADULT CLINICAL ROTATIONS

Diagnostic Evaluation Center (DEC)

- Supervision: Melissa Stepek, MS; various faculty supervisors
- *The DEC is the portal to the various clinical services offered at WPIC. Psychiatric emergency patients of all ages and types are seen in the Diagnostic Emergency Center (DEC), where they are evaluated and dispositions are made under the direct supervision of attending faculty. Patients and professionals calling with crises or requests for Outpatient, Direct Admission, or Mobile Crisis services are served by the WPIC Call Center. Both the DEC and the Call Center are open 24-hours a day, seven days a week. The rotation at the DEC offers valuable experience in psychiatric phenomenology, diagnostic dilemmas, and principles of care management in an emergency room setting.*

UPMC Center for Eating Disorders (COPE)

- Supervision: Alexis, Fertig, MD and Joshua Hefferen, LCSW
- *The Center for Overcoming Problem Eating (COPE) assesses and treats adolescents and adults with anorexia nervosa, bulimia nervosa, and other eating disorders. The COPE care continuum includes an inpatient unit, a partial hospital program, and intensive outpatient services at multiple locations throughout the hospital setting. Treatment modalities include cognitive behavioral therapy, family therapy, and pharmacotherapy. Training opportunities are available at every level of care with children, adolescents, and adults. Three- or six-month rotations will be developed in collaboration with the supervisors to accommodate the intern's interest and training.*

Psycho-Oncology Clinical Service and Biobehavioral Medicine in Oncology Program, UPMC Cancer Centers

- Supervision: Andrea Croom, PhD; Rob Ferguson, PhD; Ellen Ormond, PhD; Kevin Patterson, MD; Allison Pavlov, CRNP; Donna Posluszny, PhD; and Susan Stollings, PhD
- *Services provided include psychological/psychiatric assessment and intervention for cancer patients and their families in both inpatient and outpatient settings. Treatment can vary from short-term consultation for emotional distress and specific cancer-related symptoms to long-term psychological support and end-of-life care. For the intern, this means active engagement in mental health care as part of a multidisciplinary health care team. Interns will begin their training by shadowing senior psychologists working in both inpatient and outpatient medical settings. Under supervision, interns will be assigned their own patients to improve their skills in both assessment and intervention strategies, as well as skills related to communicating with other health care professionals. Interns will attend case conferences and seminars as scheduling allows and will be assigned directed readings to enhance understanding of medical aspects of cancer and its treatment. Interns who decide to complete a six-month rotation with the service will have the opportunity to participate in at least two specialized rotations (e.g. behavioral sleep medicine in cancer care, assessing and treating cognitive deficits caused by cancer and/or its treatment, and palliative care psychology) where interns will be exposed to a wide variety of medical conditions. Interns also have the option of obtaining training with stem cell transplantation evaluations and psychopharmacology.*

Behavioral Sleep Medicine

- Supervision: Brant Hasler, PhD and Daniel J. Buysse, MD
- *This rotation primarily occurs at the WPIC Sleep and Chronobiology Center and the UPMC Sleep Medicine Center and exposes interns to common adult sleep disorders seen in clinical practice. Interns learn to perform basic clinical assessments of patients presenting with sleep symptoms and the principles and basic techniques of behavioral treatment for sleep disorders, focusing on insomnia. Interns will first shadow an experienced sleep clinician to gain familiarity with evaluation procedures and later will conduct their own evaluations on an assigned patient case load under the supervision of faculty clinicians. Interns have the opportunity to conduct behavioral interventions and short-term follow-up with their patients. For motivated interns whose schedules permit, the rotation provides an introduction to the basics of polysomnography (PSG) in the assessment of sleep disorder patients. Weekly guided reading sessions help to establish familiarity with physiological assessment of sleep patients.*

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Psychotic Disorders Inpatient Care

- Supervision: Gretchen L. Haas, PhD and Charles Kahn, MD
- *Interns receive intensive training in the assessment and treatment of individuals with psychotic disorders through their rotation in the Transitional Recovery Unit, Acute Care Unit, and the Comprehensive Rehabilitation Unit. Interns may select from a mix of acute care and longer-term recovery-oriented inpatient services, with an emphasis on tailoring the training experience to their specific needs and interests. Daily inpatient rounds familiarize the intern with a broad range of patients with schizophrenia and schizoaffective disorders, psychotic mood disorders, delusional disorders, and, in addition, psychoses that are secondary to drug use. The intern serves as the primary clinician for a caseload of three inpatients and works closely with a psychiatric resident, attending faculty psychiatrist, and other members of the treatment team. Weekly supervision is provided by a licensed clinical psychologist (Dr. Haas), with additional supervisory sessions as needed from the physician faculty member who leads the treatment team, as well as the physician on the team. Individual supervision with Dr. Haas focuses on the selective application of cognitive, behavioral, psychoeducational, and supportive intervention strategies and techniques for work with the seriously ill psychotic patient. Under the supervision of a physician, the intern will gain experience in multimodal treatment strategies including pharmacotherapy; group, family and individual therapeutic modalities; and in psychoeducation with patient and family members. As a primary clinician, the intern may have the opportunity to work with one of the individuals who is receiving treatment for a first episode of a psychotic disorder; including those who participate in clinical neuroimaging and neurobehavioral research protocols affiliated with the Conte Center for Neuroscience of Mental Disorders.*

Dual Diagnosis Inpatient Services

- Supervision: Antoine Douaihy, MD and Jeff Geibel, PhD
- *The Dual Recovery Unit of Addiction Medicine Services provides a range of opportunities in the assessment, diagnosis, and delivery of evidenced-based psychosocial treatments integrated with pharmacological interventions for patients with substance use disorders and co-occurring psychiatric disorders. Interns will participate in daily rounding (usually Monday – Thursday from 8:30am to 12:00pm) with a multidisciplinary treatment team, including medical students, psychiatry residents, pharmacists, social workers, and addiction psychiatry fellows. During rounds, the intern will receive in-vivo modeling and coaching in Motivational Interviewing. Interns will be assigned an individual therapy caseload of one to two patients using the motivational interviewing approach to treatment, integrated with other psychosocial interventions such as Cognitive- Behavioral Therapy. Didactics on a broad range of relevant topics are offered.*

WPIC 10th Floor Inpatient Unit

- Supervision: Jeff Geibel, PhD; Antoine Douaihy, MD; and Hader Mansour, MD
- *The WPIC 10th Floor Inpatient Unit provides interns with a broad range of opportunities in the areas of assessment, diagnosis, and delivery of evidenced-based psychosocial treatments integrated with pharmacological interventions for patients with substance use disorders and co-occurring psychiatric disorders. These opportunities include training in conducting psychological evaluations and providing individual and group counseling as well as psychotherapy. Interns also have the opportunity to lead or co-lead group-evidence-based treatments including motivational interviewing groups, dual diagnosis and relapse prevention groups, and cognitive behavioral therapy group sessions. All activities are supervised on a 1:1 basis and in group supervision with the Dr. Jeff Geibel. In addition, the intern will attend multi-disciplinary team meetings and have the ability to work within that team of social workers, nurses, and psychiatrists.*

Center for Advanced Psychotherapy (CAP)

- Supervision: Lauren Bylsma, PhD; Dana Rofey, PhD; Holly Swartz, MD; and Jay Fournier, PhD
- *This outpatient clinic specializes in delivering evidence-based treatments for patients with unipolar depression, bipolar disorder, anxiety disorders, and mixed depressed and anxious presentations. Additional opportunities exist for interns seeking experience in behavioral medicine and care of gender and sexual minority youth. Supervision is provided in evidence-based therapies including interpersonal psychotherapy, interpersonal and social rhythm therapy, Cognitive Behavioral Therapy, and Motivational Interviewing for the treatment of mental health issues. Practicum opportunities include training in the theory and implementation of evidence-based psychotherapies, in combination with pharmacotherapy as needed. Interns will be expected to participate in individual supervision, group supervision, and carry a small caseload of adult or child outpatients.*

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Center for Treatment of Obsessive-Compulsive Disorder

- Supervision: David Rizzo, LCSW and Rebecca Price, PhD
- *The Center provides intensive treatment sessions. Exposure with Response Prevention (ERP) is the primary treatment. Group therapy is the primary modality, supplemented by individual exposure sessions. Family psychoeducation and medication treatments are standard interventions. Interns may elect three- or six-month, half-time rotations. Involvement may include two or three days of the program. Supervision in assessment, treatment formulation, and ERP through weekly meetings is provided. The treatment population is adults with diagnosis of Obsessive Compulsive Disorders (OCD) or Obsessive Compulsive spectrum disorders (e.g., body dysmorphic disorder, trichotillomania, skin picking) and a broad range of comorbid diagnoses.*

Adult Services Acute Ambulatory Programs

- Supervision: Sheri Hertzog, MSW, LCSW and Tiffany Painter, LCSW
- *The Adult Services Acute Ambulatory Programs provide short term stabilization for adults with acute mood and/or anxiety symptoms. There are several specialty tracks across 14 programs located in the Oakland section of Pittsburgh. Each program meets three days per week for three hours each session with an average length of stay six to eight weeks. The track for women with self-harm offers exposure to Dialectical Behavior Therapy skills training. The track for bipolar patients offers exposure to Interpersonal and Social Rhythms therapy as modified for Intensive Outpatient level of care. Interns function as an active part of the treatment team which includes a psychiatrist, group therapist, and individual/family therapist. Interns co-lead groups, and depending on learning interests, have a small individual caseload, and attend treatment team meetings for collaborative treatment planning. Interns have often worked on a short project during the rotation in an area of interest that also enhances program quality.*

Adult, Child, & Adolescent Inpatient Bipolar (ACABS)

- Supervision: Melissa Nossal, PsyD; Rasim Diler, MD; Timothy Denko, MD; and Patrick Driscoll, MD
- *ACABS is a 23-bed inpatient unit comprised of two separate programs: the Inpatient Child & Adolescent Pediatric Bipolar Services Program (In-CABS) and the Adult Bipolar Program. During this rotation interns may choose to work with one program or both. The multi-award winning In-CABS Program facilitates early identification and treatment of bipolar disorder in adolescents between the ages of 13 and 18. Interns will gain experience in neurocognitive diagnostic assessment and treatment of inpatients that includes Dialectical Behavioral Therapy, actigraphy, electronic mood/energy charting, light therapy, sleep scheduling, diet/exercise/medication education, individual therapy, and family and group therapy. The inpatient Adult Bipolar Program utilizes specialized chronotherapeutic interventions to treat patients. The triple chronotherapy program utilizes sleep deprivation, sleep phase advancement, and light therapy to accelerate antidepressant response in patients currently in a bipolar depressive episode. Dark therapy and blue light blocking technology is offered as a supplemental treatment for patients currently presenting in a manic or rapid cycling state. Patients in this program are first assessed with the Structured Clinical Interview for DSM-5. Milieu group therapy programming primarily consists of Dialectical Behavioral Therapy and Interpersonal Social Rhythm Therapy.*

Outpatient Pain Psychology Service, UPMC Division of Chronic Pain

- Supervision: Susan Jarquin, PhD
- *This service, provides outpatient psychological assessment and intervention to adults living with chronic pain. Interns will perform initial evaluations for individual therapy, brief evaluations designed to assess fit for interdisciplinary, group-based pain programming, and evaluations to determine suitability for implantable pain therapies, including spinal cord stimulators. They will also have the opportunity to deliver individual and group-based therapy. Goals of this rotation are to familiarize interns with the difficulties patients living with chronic pain commonly face and prepare them to help patients cope with them; to train interns to deliver individual and group therapy in an outpatient medical setting; and to introduce interns to the process of assessing suitability for implantable pain therapies. Interns will begin their training experience by observing the supervisor perform the various assessments and interventions. Once deemed ready by the supervisor, interns will be able to conduct the assessments and interventions independently. Individual supervision time will be scheduled and supervision will also be provided as needed. Interns will receive instruction in the use of motivational interviewing interventions as well as cognitive-behavioral and acceptance and commitment therapy techniques. Formal and informal opportunities for interdisciplinary collaboration are available. This is a part-time rotation and interns will derive the most benefit from this training experience if they commit to it for at least six months.*

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Center for Interventional Psychiatry (Electroconvulsive Therapy)

- Supervision: Lalith Solai, MD
- *The Center for Interventional Psychiatry provides treatment options including Electroconvulsive Therapy (ECT) for neuropsychiatric disorders that require specialized treatment, and for conditions that are known as "difficult-to-treat." ECT is an FDA-approved treatment that requires general anesthesia and delivers electric currents through paddles to the brain in order to trigger a brief seizure. This is an elective rotation with a duration of three months consisting of one full-day a week, or two half-days. During this rotation, interns will learn about ECT and be part of a multidisciplinary treatment team. They will participate in team meetings, observe consultation sessions on inpatient units, work with patients individually or in small groups, and receive weekly supervision. Interns will primarily conduct assessments, standard testing and provide behavioral interventions (e.g. psychoeducation, teach coping skills).*

Department of Neurosurgery Outpatient Clinic

- Supervision: Luke Henry, PhD
- *This rotation provides interns with experience in the use of pre- and post-surgical neuropsychological assessments. During this rotation, interns will: 1) gain exposure to a broad spectrum of neuropathologies requiring surgical intervention (e.g., brain tumor, epilepsy, movement disorders); 2) understand the principles and techniques of neuropsychological battery construction; 3) learn general and specific neuropsychological assessment tools; and 4) gain experience formulating case conceptualizations and corresponding treatment recommendations. Interns selecting this rotation will first shadow an experienced neuropsychologist to gain familiarity with interview and assessment procedures. They will then be assigned their own pre- and post-surgical patients, supervised by the faculty clinician. Interns will have the opportunity to conduct clinical interviews, plan and administer assessment batteries, and write brief assessment reports to be used by the neurosurgical team in surgical planning and follow-up care. The opportunity to observe brain surgery is also offered. For interested interns, research opportunities are available.*

Visceral Inflammation and Pain Center- Division of Gastroenterology

- Supervision: Eva Szigethy, MD, PhD
- *Interns will learn how behavioral assessment and treatments are integrated into medical care for patients in gastroenterology. The clinic population are adolescents and adults with GI conditions such as irritable bowel syndrome, inflammatory bowel disease, cyclic vomiting, chronic pancreatitis. Most prevalent diagnoses of our patients are mood and anxiety disorders, stress disorders, chronic pain syndromes and somatization syndromes. Behavioral interventions used are cognitive behavioral therapy, mindfulness techniques, and medical hypnosis. Services are integrated into medical care and for a subset of patients with inflammatory bowel disease, offered as part of a subspecialty medical home care model. Behavioral services are integrated with pharmacological management as indicated and provided either face-to-face and by videotherapy/telemedicine.*

Psychotherapy Training Clinic

- Supervision: Various License PhD-level Supervisors
- *Each intern is expected to follow a minimum of two outpatients in individual psychotherapy during the year through the WPIC Psychotherapy Training Clinic. Weekly supervision is offered by individual faculty members with expertise in a variety of empirically-supported treatments (including, for example, cognitive-behavioral therapy, interpersonal psychotherapy, and dialectical behavior therapy). Careful case conceptualization is encouraged. Interns develop case presentations for group feedback and discussion during Friday morning group supervision meetings.*