POSTDOCTORAL RESIDENCY PROGRAM IN CLINICAL NEUROPSYCHOLOGY  
BARROW NEUROLOGICAL INSTITUTE  
ST. JOSEPH’S HOSPITAL AND MEDICAL CENTER  
PHOENIX, ARIZONA

Philosophy of the Residency Program
After completing doctoral studies in clinical psychology and/or clinical neuropsychology, extended clinical and research experience is expected for those wishing to pursue a career in clinical neuropsychology. At the Barrow Neurological Institute, St. Joseph’s Hospital and Medical Center, individuals have the opportunity to be exposed to an exceptional variety of patients with neurological conditions. In 2011 U.S. News & World Report ranked St. Joseph’s Hospital and Medical Center in the top 10 best hospitals in the United States for Neurology and Neurosurgery, for the ninth consecutive year. Barrow Neurological Institute, the neurological division at St. Joseph’s, has long been recognized for providing state-of-the-art care for people with brain and spine disease, disorders, and injuries. There are over 20 neurosurgeons on site as well as a large neurology department. Barrow performs more neurosurgeries than any other hospital worldwide. In addition, St. Joseph’s Hospital and Medical Center is a Level 1 Trauma Center and provides care to more stroke patients than any other center in the southwestern United States. Barrow is home to the Muhammad Ali Parkinson’s Center and is one of the busiest brain tumor treatment centers in the U.S. There are active residency programs in neurosurgery, neurology and neuroradiology, in addition to the postdoctoral training program that we offer for advanced clinical work and studies in human neuropsychology.

Our setting is primarily dedicated to patient care, with heavy clinical demands placed on the resident. However, there is strong interest and support for research and education. We believe this provides an excellent training setting. In return for the clinical services provided by the residents, the staff neuropsychologists in the Section of Clinical Neuropsychology provide clinical supervision, teaching seminars, and research opportunities.

Structure of the Residency Program
Barrow’s Postdoctoral Residency Program in Clinical Neuropsychology is a two-year program during which clinical, teaching, and research activities typically require a 50-hour work week. Residents in clinical neuropsychology are involved in direct patient care in several settings that may include:

- Inpatient Neurorehabilitation Unit
- Outpatient Neuropsychological Consultation Service
- Epilepsy Monitoring Unit
- Muhammad Ali Parkinson’s Center
- Center for Transitional NeuroRehabilitation
- Inpatient Neuropsychological Consultation Service
- Children’s Center for Neuropsychological Rehabilitation

In addition, Barrow offers a growing number of clinic services within the hospital, including those pertaining to Movement Disorders, Normal Pressure Hydrocephalus, and Hypothalamic Hamartoma. The Section of Clinical Neuropsychology also participates in a number of ongoing clinical research trials.
Rotations

Outpatient Neuropsychological Consultation Service: Most patients on the Outpatient Neuropsychological Consultation Service are referred by neurologists and neurosurgeons. Both adults and children are seen. A wide variety of neurologic conditions are seen including, but not limited to, traumatic brain injury, cerebrovascular accident, dementing illnesses, multiple sclerosis, tumor, epilepsy, movement disorders, normal pressure hydrocephalus, aneurysms, and those undergoing presurgical evaluation for procedures such as deep brain stimulation and epilepsy surgery. The Section of Clinical Neuropsychology is also involved in various clinical research drug and outcome studies. Additional opportunities within the outpatient rotation may include:

Acute Inpatient Consultation Service: This is not a stand-alone rotation; rather it is a general neuropsychology service provided in the hospital across a variety of inpatient departments including medical, cardiac, pediatric, and neuroscience ICUs. Short evaluations to assist with differential diagnosis or transfer/discharge planning, including those that may go to inpatient rehabilitation, are the main goal of these consultations.

Muhammad Ali Parkinson’s Center: The Movement Disorders neuropsychology rotation offers the resident the opportunity to participate in the care of patients with a variety of movement and neurodegenerative conditions, including Parkinson’s disease, essential tremor, atypical parkinsonism, psychogenic movement disorders, dystonia, Tourette syndrome and Huntington’s disease. A strong emphasis of the rotation includes evaluation for candidacy and outcome after deep brain stimulation surgery and the evaluation of mild cognitive impairment and dementia. An opportunity exists for the resident to attend multidisciplinary case conference, to participate in community outreach activities (e.g., lectures on coping and neurobehavioral dysfunction on movement disorders), and to observe surgery. The majority of patients are seen in consultation at the request of physicians at the Muhammad Ali Parkinson’s Center and the Center for Neuromodulation, but patients are referred from across the state and country. Opportunity exists for a resident to become involved in research in a defined role and to prepare publishable literature reviews.

Inpatient Neurorehabilitation Unit: The 52-bed CARF-accredited inpatient neurorehabilitation unit at St. Joseph’s Hospital and Medical Center includes patients with spinal cord injury, brain injury, stroke, brain tumor, and a variety of CNS injuries and illnesses. The unit primarily serves adults, but some adolescents (ages 15 and up) are also seen. Residents serve in a consultant role to the unit as part of a large interdisciplinary team that includes physicians, nurses, physical therapists, occupational therapists, speech pathologists, recreation therapists, and case managers. Residents spend a major rotation providing neuropsychological assessment, psychoeducation, and psychotherapeutic care to patients on the unit with acute neurological conditions. Opportunities for behavioral management of patients with disruptive behaviors are also available.

Epilepsy Monitoring Unit: The EMU is a 10-bed inpatient unit devoted to 24-hour continuous EEG monitoring of patients with seizure disorders. Residents participate in evaluating adult patients undergoing monitoring for differential diagnosis or presurgical evaluations. We perform approximately one Wada (intracarotid amytal procedure) every one to two weeks. Residents on
this rotation have the opportunity to administer the Wada. Weekly interdisciplinary meetings with neurology, neurosurgery, and neuroradiology provide residents the opportunity to interact closely with members of the Comprehensive Epilepsy Program and to present neuropsychological findings. This rotation also includes monthly meetings in neurophysiology conferences and epilepsy research.

Children’s Center for Neuropsychological Rehabilitation: The CCNR is a new service developed within the Department of Clinical Neuropsychology. The CCNR is designed as an outpatient comprehensive assessment and treatment program for children and adolescents with known or suspected brain disorders. Services within the CCNR are being designed to improve children’s academic, emotional, behavioral, and social functioning, as well as reducing the distress of parents and teachers related to management of the child. Planned services to be provided through the CCNR include: 1) Neuropsychological assessment, 2) Cognitive rehabilitation, 3) School tutoring, 4) Friendship (social skills) training, 5) Individual and family psychotherapy/behavior modification and 6) Summer day treatment program.

Center for Transitional NeuroRehabilitation: CTN offers intensive, day-long treatment for older adolescents and adults with brain injuries. The program features a holistic approach for the treatment of cognitive, language, physical, emotional, neuropsychological, and vocational needs. CTN focuses on independence in the home and community and on productivity when patients return to work or school. Family members receive emotional support and learn about the patient's strengths and limitations and how to assist the patient in functioning in the home. CTN offers four rehabilitation-oriented programs:
- Home Independence Program
- Work Re-Entry Program
- School Re-Entry Program
- Transitional Program

Neuropsychology residents serve as part of the treatment team along with speech and language pathology, physical therapy, occupational therapy, psychiatry, nutrition, and recreational therapy. Responsibilities include providing individual and group psychotherapy, cognitive remediation training, and participation in the program milieu.

Tracks
Barrow offers two tracks of training within the Postdoctoral Residency Program in Clinical Neuropsychology:
- General clinical neuropsychology
- Neurorehabilitation with a specialty in neuropsychological rehabilitation
Residents must specify which track (or both) they are applying to.

Track 1: General Clinical Neuropsychology
Individuals who seek training in general clinical neuropsychology obtain extensive clinical supervision in the neuropsychological evaluation of a wide range of patients at different age ranges. This track includes supervised training in appropriate record review, clinical interviewing, administration of neuropsychological tests, and report writing. Residents also receive training in providing feedback to the patient regarding their findings in a manner that is clinically sensitive and helpful to patients and their families.
Within the context of this track, individuals spend the majority of their training time on the Inpatient Neurorehabilitation Unit, the Epilepsy Monitoring Unit, and the Outpatient Neuropsychological Consultation Service. The Movement Disorders rotation is also available for residents on this track. A key component to training programs is supervision by multiple clinical neuropsychologists who have varying degrees of experience with different patient populations. The goal is to expose the resident to a wide variety of neurological and neurosurgical disorders and to familiarize them with the most meaningful way of assessing these patients. In doing so, the resident learns to convert that assessment information into practical healthcare decisions for the patient. This track also involves training in communicating with physicians in a manner that clarifies our neuropsychological understanding of the patient.

As a part of this training program, residents may receive supervision in individual psychotherapy for selected patients. Residents in this track are given opportunities to participate in a wide variety of clinical research projects.

**Track 2: Neurorehabilitation with a specialty in Neuropsychological Rehabilitation**

The second track of training focuses on neurorehabilitation with a specialty in neuropsychological rehabilitation. Individuals who seek this training path frequently plan a career in the field of brain injury rehabilitation. They receive extensive training in the assessment of cognitive and personality disorders of brain-dysfunctional patients who are in acute and post-acute rehabilitation programs. Their primary focus is on learning methods of neuropsychological rehabilitation intervention to help patients become independent and return to a productive lifestyle.

This track helps train clinical neuropsychologists to work within the context of an interdisciplinary team and to develop a positive working alliance with family members as well as the patient. Individuals who seek this track receive extensive training at the Center for Transitional Neurorehabilitation and the Inpatient Neurorehabilitation Unit. They also obtain some experience in cases of differential diagnosis through the Outpatient Consultation Service. In addition, residents participate in research projects related to neurorehabilitation.

**Training Objectives**

Trainees will demonstrate that they can carry out the necessary assessment activities in order to qualify for various clinical neuropsychology job positions. Core to the work of clinical neuropsychology is the ability to conduct neuropsychological assessments of a wide variety of patients (e.g., those with TBI, CVA, epilepsy, dementia, Parkinson’s disease, multiple sclerosis, malignant and non-malignant brain tumors). Successful completion of either track offered at Barrow would meet this training objective.

Psychologists who finish residency programs typically seek state licensure and hospital privileges. Those agencies request from the Director of the Postdoctoral Residency Program a statement about whether or not the individual is competent to carry out various services in order to obtain privileges.

Residents who successfully complete either track are encouraged to seek board certification (ABPP) in clinical neuropsychology.

**Didactics**
All residents participate in four major teaching activities within the Section of Clinical Neuropsychology.

- Residents’ Seminar
- Neuroanatomy/Neuroimaging Seminar
- General Neurology and Neurosurgical Grand Rounds Conference
- Fact Finding Seminar

In addition, residents will participate in a journal club and in a series of talks on professional development. Other available teaching conferences will be negotiated with each resident (e.g., EMU Conference, Neurophysiology Conference, Brain Cutting, Neurovascular Conference, and Tumor Board).

**Research**

Each resident is expected to produce one scholarly paper or poster for each year of his or her residency. The paper may be either theoretical or empirical, depending on the background and interest of the resident. This work may be related to the clinical work settings listed above. In addition, residents can participate in a variety of research neuroimaging activities within the Human Brain Imaging Laboratory. Many of the attending faculty are involved in ongoing research projects and are open to student involvement in those projects. Opportunities for the development of other research projects are also present. Previous residents have submitted grant proposals and presented at national conferences related to their work within the residency program.

**Faculty Members in the Section of Clinical Neuropsychology**

George P. Prigatano, Ph.D., ABPP-Cn, Newsome Chair of the Department of Clinical Neuropsychology, Director of the Postdoctoral Residency program, Outpatient Consultation Service, Children’s Center for Neuropsychological Rehabilitation

Leslie Baxter, Ph.D., Human Brain Imaging Laboratory

Heather Caples, Ph.D., Assistant Director of the Postdoctoral Residency program; Inpatient Neurorehabilitation Unit

Kristi Husk, Psy.D., Center for Transitional Neurorehabilitation

Pamela Klonoff, Ph.D., ABPP-Cn, Director, Center for Transitional Neurorehabilitation

Stephen Myles, D.Clin.Psy., Center for Transitional Neurorehabilitation

Caleb Pearson, Psy.D., Epilepsy Monitoring Unit, Outpatient Consultation Service

Kavitha Perumparaichallai, Ph.D., Center for Transitional Neurorehabilitation

Susan Rumble, Psy.D., Center for Transitional Neurorehabilitation

Wil Schultz, Ph.D., Outpatient Consultation Service, Epilepsy Monitoring Unit

Ioan Stroescu, Ph.D., Outpatient Consultation Service
Alexander Tröster, Ph.D., ABPP-Cn, Co-Director of the Postdoctoral Residency program; Director of Neuropsychology Research, Barrow Center for Neuromodulation

Jay Uomoto, Ph.D., Inpatient Neurorehabilitation Unit, Children’s Center for Neuropsychological Rehabilitation

**Application Process**
Individuals who are considered appropriate candidates for this residency program must have obtained a doctorate degree in clinical psychology, counseling psychology, and/or clinical neuropsychology from an APA-approved program, as well as an APA-approved clinical internship. Individuals who do not meet the standards of the American Psychological Association training at the doctoral level and the internship level will not be reviewed for their potential candidacy for this training program.

Please send a letter outlining your interests and track(s) you are applying to, background experience, training goals and the opportunities you seek during your postdoctoral residency (along with a current curriculum vitae) to the Director of the Postdoctoral Residency Program by January 4th, 2013. Two letters of recommendation should be submitted. Candidate finalists will be contacted for interviews and formal documentation of graduate training requested.

Applicants will be notified by January 14th if they will be invited to be interviewed. It is highly desirable to interview applicants face to face and such interviews typically occur during the INS or National Academy of Neuropsychology meetings. We will also be offering onsite interviews on Monday January 28th or Tuesday January 29th. In rare circumstances a detailed telephone interview may be arranged. For the Neuropsychological Rehabilitation Track an onsite interview is **required** even though candidates may be interviewed at NAN or INS.

Residents selected for training will be notified by February 28 of the training year (or at the time designated by the Association for Postdoctoral Programs in Clinical Neuropsychology). We participate in the National Matching Service system. **Applicants are required to have completed their Ph.D. prior to the start of the residency program.** Please note that if information were to come to light after the match that would have precluded us from selecting you as a candidate, we reserve the right to withdraw our offer.

**Employment Information**
All residents are employees of St. Joseph’s Hospital and Medical Center, Phoenix, Arizona and affiliated with the Barrow Neurological Institute. The first year salary is competitive, compared to other residency programs. In addition, as hospital employees, residents are eligible for a comprehensive benefits package.

**Certificate of Completion**
After successfully completing a two-year residency program, the individual will receive a Certificate of Completion recognizing their accomplishments as a resident in Clinical Neuropsychology at the Barrow Neurological Institute.

**Standards and Accreditation for the Residency**
Presently the American Psychological Association (APA) and the Association for Postdoctoral
Programs in Clinical Neuropsychology (APPCN) have provided guidelines for appropriate training for postdoctoral residents in clinical neuropsychology. Our residency program has developed policies and procedures to meet the requirements of those guidelines. We are also a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Our residency program is officially recognized as meeting all standards of the APPCN. This residency site agrees to abide by the APPCN policy that no person at this facility will solicit, accept, or use any ranking-related information from any residency applicant.

For further information or questions, please direct inquiries to:

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    Director of Postdoctoral Residency Program  
    Barrow Neurological Institute  
    St. Joseph’s Hospital and Medical Center  
    222 W. Thomas Road, Suite 315  
    Phoenix, AZ  85013

You may also call Mary Henry, Administrative Assistant at 602-406-3671 or e-mail her at mary.henry@chw.edu