University of Texas Health Science Center at San Antonio

Neuropsychology Postdoctoral Fellowship

Program Brochure

Updated October 2020

UTHSA Neuropsych Postdoc Program Brochure

I. Institution & Program Description

1a. Institutional Mission
The University of Texas Health Science Center at San Antonio (aka, UT Health San Antonio; UTHSA) postdoctoral fellowship in clinical neuropsychology is housed within the Department of Neurology and the Glenn Biggs Institute for Alzheimer's and Neurodegenerative Diseases.

Our institution's mission, which our program shares, is, "to make lives better through excellence in education, research, health care and community engagement. Strategies for achieving this mission are: Educating a diverse student body to become excellent health care providers and scientists. Engaging in research to understand health and disease. Commercializing discoveries, as appropriate, to benefit the public. Providing compassionate and culturally proficient health care. Engaging our community to improve health. Influencing thoughtful advances in health policy."

1b. Program Mission & Goals
Our specific program mission is to advance the formation of neuropsychology's future generations. We accomplish this mission through five goals:
i) Provide supervised clinical experience across a range of neurologic disorders and diversity of demographics
ii) Educate our trainees by leveraging multidisciplinary collaboration and scholarship
iii) Support research literacy and productivity to advance knowledge
iv) Engage with the public and profession to expand the reach of neuropsychology
v) Accomplish the above goals in a way that prepares our trainees for board certification in clinical neuropsychology

1c. Program Administrative Structure
The UTHSA Neuropsychology Fellowship is uniquely embedded across the Department of Neurology, chaired by Robin Brey, M.D., and the Biggs Institute for Alzheimer's and Neurodegenerative Diseases, directed by Sudha Seshadri, M.D. The joint program offers clinical, service, and research opportunities across a broad range of neurological populations such as epilepsy, multiple sclerosis, and Parkinson's disease, in conjunction with in-depth training in differential dementia diagnosis. The UTHSA Neuropsychology Fellowship is directed by David Gonzalez, PhD, ABPP, and the training committee, comprised of the faculty members listed below. Fellowship coordination staff include Monica Perryman.

1d. Program Setting & Facilities
We are housed within an academic medical center, primarily working alongside neurologists in an outpatient setting. The majority of time is spent with Neurology and Biggs Institute patients

seen at the Medical Arts & Research Center (MARC) in a joint clinical space on the 8th floor. The MARC is located within the Greehey Campus of UTHSA. Also within the Greehey Campus is the McDermott Building, which houses many Biggs Institute offices and research faculty. Most didactics will also be held at the MARC and McDermott buildings.

Some didactic and clinical experiences (e.g., epilepsy surgery conference) are held in the Academic Learning & Teaching Center (ALTC), which is located on UTHSA's main Long Campus. The Long Campus is a ~5 minute drive (or ~18 minute walk) from the Greehey Campus. Adjacent to the Long Campus is University Hospital, which houses several clinical experiences (e.g., epilepsy monitoring unit, Wadas, multidisciplinary Parkinson's clinic) and is UTHSA's primary teaching hospital. Although integrated with UTHSA (both physically and ideologically), it is owned-operated by Bexar County's University Health System (UHS).

Additional didactic and training experiences are held with neuropsychology trainees and staff at UT Austin's Dell Medical School, via a remote weekly conference. Intermittent trainings are held with trainees and staff at the Audie L. Murphy VA Hospital (part of the South Texas Veterans Healthcare System). The VA is connected to UHS via a sky bridge. Computers and devices for clinical care are available in every room at the MARC and there is a reserved workroom with several computers and scoring software. Clinic space is reserved depending on scheduled patients. The library is physically located on the Long Campus, and trainees can access many of their resources remotely.

1e. Population Served

The vast majority of our neuropsychology referrals come directly from the cadre of neurology specialists we work alongside: behavioral neurology, epileptology, movement disorders neurology, neuroimmunology, neuromuscular neurology, and general neurology. Other regular referral sources include primary care and geriatric medicine. As such, we primarily work with: Alzheimer disease, vascular cognitive impairment, other neurodegenerative disease (e.g., frontotemporal dementia, Lewy Bodies), epilepsy, Parkinson disease, multiple sclerosis, amyotrophic lateral sclerosis, Please refer to specific training opportunities in Section III.

Given that we are the largest civilian academic medical center in South Texas and partner with the county health system, we see a highly diverse patient demographic. The NIMHD-recognized disparity groups we work with include: ethnoracial and linguistic minorities (most predominantly Latinx and Spanish-speaking individuals), individuals of low socioeconomic status, and individuals from rural regions. We have one English/Spanish bilingual neuropsychologist (David Gonzalez), 2 bilingual psychometrists, and fellows fluent in Spanish can have the opportunity to conduct Spanish language neuropsychological evaluations. On occasion, there may be opportunity to work with patients fluent in other languages (i.e. Farsi, Cantonese), alongside interpreters

1f. Faculty & Supervisors

Mitzi M. Gonzales, Ph.D., ABPP

Dr. Gonzales is an Assistant Professor in the Glenn Biggs Institute for Alzheimer's and Neurodegenerative Diseases and the Department of Neurology at UT Health San Antonio. She is a board-certified clinical neuropsychologist. She earned her Ph.D. in Clinical Psychology from the University of Texas at Austin. She completed her pre-doctoral internship at the University of Illinois at Chicago and postdoctoral fellowship in Clinical Neuropsychology (clinical research track) at the VA Northern California Health Care system. Her research broadly focuses on identifying mechanisms and biomarkers of advanced age-related cognitive decline and dementia in effort to aid timely diagnosis, prevent progression, and advance treatment discovery. Her research leverages clinical neuropsychology, structural and functional neuroimaging, and geroscience approaches. A primary aim is to understand the underlying mechanisms linking biological aging with increased dementia incidence and develop interventions that slow the rate of cognitive decline.

David A. González, Ph.D., ABPP

Dr. González completed his neuropsychology internship and fellowship at the South Texas Veterans Health Care System and his doctorate from the University of North Texas. He is clinical faculty at UT Health San Antonio and works with the surgical teams for epilepsy and movement disorders, conducting outpatient neuropsychological and Wada evaluations. He also works with the Biggs Institute and MIND clinics and sees the other myriad conditions that come through our department. Research interests primarily involve (1), refining how we measure cognition, mental health, and functioning, and (2), elucidating how cultural and linguistic factors impact cognition, mental health, and functioning and its measurement. He advocates for the profession and serves on various professional committees, including ones within AACN and NAN. David hopes to keep his day job, as he is mediocre at his hobbies in cycling, hiking, photography, guitar noodling, and reading fiction.

Johanna M. Messerly, Psy.D.

Dr. Messerly hails from the frozen tundra of northern Wisconsin but has found a home in San Antonio, Texas both professionally and personally. She was delighted to join clinical faculty at the UT Health San Antonio, Department of Neurology, in 2019 following completion of her fellowship in clinical neuropsychology at the South Texas Veterans Health Care. Prior clinical and academic training includes completion of a neuropsychology focused internship at the Central Arkansas Veterans Health Care System and a Doctor of Psychology degree from Nova Southeastern University. Her professional interests predominantly focus on clinical care and service both towards the UT Health infrastructure and community at large. Her clinical interests are broad and include interfacing with the movement disorders team for pre/post-surgical DBS evaluations and conducting brief cognitive screening assessments for individuals with multiple sclerosis as well as working with the older adult, neurodegenerative, epilepsy, stroke, traumatic brain injury and autoimmune populations. She is passionate about connecting patients to ancillary clinical services for optimization of mental health and quality of life as well as using neuropsychological evaluations as a stepping stone for intervention.

A. Campbell Sullivan, Psy.D., ABPP

Dr. Sullivan is an Assistant Professor in the Glenn Biggs Institute for Alzheimer's and Neurodegenerative Diseases and the Department of Neurology at UT Health San Antonio. Dr. Sullivan earned her Psy.D. in Clinical Psychology from the PGSP-Stanford Consortium. As a graduate student, she developed an interest in young-onset dementia syndromes and structured her pre-doctoral internship at the University of Maryland-Baltimore VA Consortium and postdoctoral fellowship at Johns Hopkins School of Medicine to focus on the cognitive assessment of rare neurodegenerative diseases. Dr. Sullivan manages the

MIND and ALS clinics, and she works closely with the Aphasia Lab at UT-Austin. Dr. Sullivan's research endeavors include translational research targeting tauopathies and developing cognitive biomarkers for patients with prostate cancer. Outside of work, Dr. Sullivan enjoys spending time with her family.

1g. Benefits

The UTHSA Neuropsychology stipend is informed by the NIH postdoctoral payscale, and is currently set to $52,704 annually.

Other benefits include vacation days (15 paid days annually), sick leave (10 paid days annually), family leave (12 unpaid weeks), insurance, child wellness, and mental health support. These are all provided in accordance with the policies of our Gradual Medical Education (GME) office.

1e. APPCN Statement.

We are a member of the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN). As such we abide by its rules and procedures and share its mission to, "offer the highest quality competency-based residency training in clinical neuropsychology with an emphasis on preparation for future specialty board certification through the American Board of Professional Psychology/American Board of Clinical Neuropsychology (ABPP/ABCN)."

II. Application & Selection Procedures

Applications materials include:

- Cover letter expressing interest and fit with our program
- CV
- 3 letters of recommendation
- 2 de-identified work samples
- Doctoral transcript; if degree has not yet been conferred, the APPCN verification form is also required.

Applicant requirements include:
-General coursework and training in Clinical Psychology or a related field
-Successful completion of coursework in Clinical Neuropsychology
-Successful completion of independent research.
-Training in clinical neuropsychology under the supervision of a clinical neuropsychologist. Preference may be given to supervision completed by clinical neuropsychologists with board certification through ABPP/ABCN.
-Supervised experiences in clinical neuropsychology during internship.

Submission:
Application materials should be submitted via e-mail to David Gonzalez (GonzalezD15@uthscsa.edu) and Monica Perryman (PerrymanM@uthscsa.edu).

Interviews:
We aim to conduct interviews at INS's annual meeting. However, we allow for flexibility and will prioritize video interviews given pandemic-related restrictions.

Selection:
We participate in the APPCN match and abide by its rules and procedures. Our APPCN NMS Program Match Number is: # 8141.

III. Training Activities

3a. Specific training activities
Trainees will primarily be involved in outpatient neuropsychological assessment and interdisciplinary coordination of patient care. New consults are typically placed into blocks or clinics that are reserved for the specialties and typical referrals of our neurologists. To a lesser extent, there are also behavioral intervention opportunities. This is all provided through various, 6-month, asynchronous, speciality experiences:

MIND Clinic
A multidisciplinary clinic consisting of visits with a neuropsychologist, behavioral neurologist, and social worker for those with suspected neurodegenerative conditions. Involves time-limited interviews with patient and collateral and cognitive testing, and rapid verbal communication of test results, differential, and recommendations to the team. These cases may be brought to a multidisciplinary consensus conference for final diagnoses.

ALS Clinic
Part of the ALS Association Certified Treatment Center. It is a multidisciplinary clinic with neuropsychology, neuromuscular neurology, occupational therapy, physical therapy, speech pathology, and social work. During a pre-clinic multidisciplinary meeting, suspicion for neurocognitive change is ascertained, and time during the clinic is reserved for a brief, ALS-tailored evaluation. Results are communicated to the team and family to improve treatment.

South Texas Comprehensive Epilepsy Center
The STCEC, in collaboration with UHS, is accredited as a Level 4 center by the National Association of Epilepsy Centers. Involves outpatient pre-surgical neuropsychological evaluations, Wada evaluations, and participation on the weekly surgical conference. Team consists of neuropsychology, epileptology, neurosurgery, radiology, and nursing. Involves discussion of cognitive, mental health, and environmental concerns to the team and aiding discussion on risk-benefit ratio for different surgical options. To a lesser extent, non-surgical outpatient evaluations and brief inpatient interventions for those found to have PNES during monitoring are a part of this experience.

Deep Brain Stimulation (DBS) Block
Involves outpatient evaluation of patients with movement disorders being considered for DBS and participation in monthly multidisciplinary conferences with neuropsychology, movement disorders

neurology, neurosurgery, and nursing. Team discussions involve cognitive and behavioral concerns that may impact decisions such as proceeding with surgery or lead placement. Part of the movement disorders program which partners with the American Parkinson's Disease Association.

MS Screening Block
A brief evaluation centered on MS-typical cognitive and mental health symptoms in a way that reduces fatigue and helps monitor disease state and inform treatment. Part of the National Multiple Sclerosis Society Partner-in-Care group.

Older Adult Block
A routine outpatient evaluation for elders with suspected neurodegenerative conditions from myriad referral sources. Set in somewhat briefer blocks to limit fatigue.

General Neuro Block
A prototypical outpatient block for miscellaneous referrals that do not fit in the above blocks or clinics.

Experiences in development (delayed by COVID-19)
Brain Health and Cognitive Remediation Group Intervention for aMCI

Epilepsy Screening Block

Polytrauma Rehabilitation Center Rotation (post-acute TBI) at the South Texas VA

Multidisciplinary Parkinson's Clinic

Didactics
Required didactics

UTHSA Neuropsychology Case Conference, Journal Club, Board Preparation, and Group Supervision, in collaboration with Dell Medical School at UT Austin (weekly, Wednesdays 3pm-5pm)

Encouraged rounds & didactics

Neuroscience Grand Rounds (weekly, Fridays 8am-9:30am)

Biggs Grand Rounds (quarterly)

Biggs Dementia Consensus Conference (bi-monthly)

VA Neuropsychology Grand Rounds (monthly)

Clinicopathological Case Conference (monthly)

Optional opportunities
Psychiatry Grand Rounds - https://lsom.uthscsa.edu/psychiatry/grand-rounds/

Parkinson's Disease Center of Excellence Seminar Series (monthly) - https://iims.uthscsa.edu/ParkinsonsCOE

Dialogues on Dementia (quarterly community talks)

Biggs Clinical Research Chalk Talks

Mind Brain Behavior Course

Fundamentals of Neuroscience Course

Taquitos de Sesos, via Baylor College of Medicine

3b. Clinical Service Requirements
Trainees are expected to dedicate 60%-80% of time to clinical services. At a minimum, this entails 1,800 clinical hours annually.

In practice, trainees are expected to have ~3 new consults a week their first year, and ~4 new consults a week their second year. The exact number may vary depending on the intensity of the consult (e.g., lengthy pre-surgical evaluation vs. screening case).

3c. Research Requirements
Trainees are expected to produce two, first-author, accepted presentations. They are also expected to have submitted a manuscript for peer-reviewed publication by the end of their second year. The presentations can reflect preliminary work for the manuscript. A grant submission may also meet this requirement.

There are a variety of research opportunities including multi-disciplinary collaboration within the Department of Neurology and Biggs Institute for innovative and independent research goals. UTHSA Neuropsychology also offers the use of an archival database from previous clinical evaluations. Some opportunities are found here: https://biggsinstitute.org/research/

3d. Miscellaneous Requirements & Opportunities
-We ask that trainees have applied for licensure in the State of Texas and be a provisionally licensed psychologist by the end of their first year. This requires passing the EPPP and a take-home jurisprudence exam. More information is found here: http://www.tsbep.texas.gov/how-to-become-licensed

-To gain experience as an independent professional, a trainee may choose to undertake an administrative project which addresses an unmet (or inefficiently met) need that the trainee identifies in the program or department.

-Several of our core and associated faculty are involved with professional organizations within neuropsychology and related specialties. If interested, a trainee is encouraged to pursue service involvement with mentorship to improve effectiveness of that involvement.

3e. Supervision Structure
Each trainee will have 2 hours of individual supervision weekly, which are done with the primary supervisor(s) for each experience.

There are then at least 2 weekly hours of group didactics and supervision.

3f. Individual Experience Opportunities
As suggested in the experiences noted above, a trainee may elect greater depth in each of the clinical and research opportunities . Personal interests will be elicited every year as a part of the training. The trainee will collaboratively develop a training plan with the UTHSA Neuropsychology supervisors and includes training goals and clinical rotation schedules for each of the 4, 6-month rotations. This is also reviewed at the end of the first year.

3g. Ethics & Diversity
There are multiple opportunities to address ethics and diversity in our program. It is a core belief of our faculty that these are not fringe topics, but instead are central to the field. We have made steps to include the AACN Relevance 2050 presentation guidelines that integrate consideration of diversity across topics. We also have relevant discussion of ethics throughout supervision, and have dedicated didactics for these topics.

IV. Evaluation & Grievance

Residents are formally evaluated 4 times annually (in the middle and end of each 6-month experience). These evaluations are centered around achieving APPCN exit criteria of:

-Advanced skill in the neuropsychological evaluation, treatment, and consultation to patients and professionals sufficient to practice on an independent basis.
-Advanced understanding of brain-behavior relationships.
-Scholarly activity, as reflected by submission of a study or literature review for publication or presentation or submission of a grant proposal or outcome assessment.
-Eligibility for state or provincial licensure or certification for the independent practice of psychology.
-Eligibility for board certification in clinical neuropsychology by the American Board of Professional Psychology.

-The resident is formally evaluated to be a competent practitioner in the areas designated in the Houston Conference Policy Statement. These areas include both pertinent knowledge and requisite skills.

We also follow UTHSA's GME Office policies for due process & grievances.Concerns with the fellow may arise from not meeting rotation requirements set at the beginning of the rotation or behaviors that are in violation of the APA Code of Ethics or UTHSA Code of Ethics or Standards of Conduct. If documented concerns are not addressed, a formal remediation plan will be put in place to allow for structured improvement in trainee performance.

If the trainee has concerns with training environment, there are several avenues to report concerns, including the training director, a non-neuropsychology faculty consultant (Alicia Parker), a non-department ombudsperson, and a non-institutional neuropsychologist consultant (Karin J.M. McCoy).

V. Quality of Life

Training and professional development are but one aspect of life. Nestled at the edge of the Texas Hill Country, San Antonio is a city steeped in heritage and cultural diversity, as well as innovation and advancement. We celebrated our 300th anniversary in 2018 and carry the distinction of housing an UNESCO World Heritage site. We are also one of the fastest growing cities in America, boasting seasonal events and festivals, and spectacular greenspaces and parks, with an extensive system of greenways for those interested in outdoor pursuits. Beyond the world-famous SA Riverwalk, the city has a range of recognized restaurants, cultural institutions, sporting events, and fun for the whole family.

For a short visit or menu of offerings, here is a smattering of unaffiliated websites:
https://www.visitsanantonio.com/
https://nyti.ms/2nFUC91
https://gardenandgun.com/feature/city-portrait-san-antonio-texas/
https://do210.com/

For considering lifestyle and housing, it can be helpful to divvy San Antonio by regional centers. Some popular areas include: Central area, ranging from the midtown areas around the Pearl Brewery and N. St. Mary's strip, to downtown and "classic" Riverwalk area, to the southtown areas of Blue Star, King William, and SoFlo. There is also the UTSA area around the academic campus, La Cantera, and Rim. And the Medical Center around the med school campus and Huebner Oaks. More information on these, and other, regional centers along with planned development can be obtained from SA Tomorrow: https://sacompplan.com/regional-centers/
And information on city trails can be found here:
https://www.sanantonio.gov/ParksAndRec/Parks-Facilities/Trails/Greenway-Trails