eSynapse
December 2014

Editor’s Comments

James Flax, MD, MPH, DFAPA

“THANK YOU” to all those who have contributed to this issue of eSynapse! Please scroll through everything that follows, as there are many items you will find interesting and useful throughout.

You will find below a synopsis of our meeting so all readers will have an idea of district branch business. But, it’s only a synopsis. You have got to come to a meeting to appreciate the rich discussions.

We had a presentation on Mental Health Association services at our last Executive Council meeting on 12/12. Please see the synopsis in a future issue and read Dr. Tobe’s summary in his column. If you are wondering about the available services in Rockland you can check out this website: http://rocklandgov.com/departments/mental-health/provider-agency-links/.

We are hoping to have information that reviews the services in Orange, Sullivan and Delaware in future editions of eSynapse.

It is with great pleasure that I learned the APA Board has approved 3 of our members as Fellows of the APA. This is a distinction that recognizes multiple levels of participation in our field. These individuals deserve to be proud of their accomplishments in psychiatry.

Louis Belzie M.D.
Laura N Antar, MD, PhD
Russell Hardin Tobe, MD

Dr. Abdullah has again sent us a new, poetic, article in his long line of erudite essays. And there is an anonymous poem that captures one aspect of psychotherapy. There are ads that may interest you, including a detailed statement by one candidate for President.
Elect of the APA. Please scroll all the way to the end to see it all. And, if you are not receiving the MSSNY eNews, here’s a link where you can read about issues of interest to all of medicine in New York State: http://www.mssny.org.

**WEB SITE** Your district branch is still in the process of improving it’s website. If you have expertise or ideas about web page design, please chime in. You can see the existing “under construction” site at WestHudsonPsych.org. I recently created a website for my private practice. JamesFlaxPsychiatry.com. I learned a great deal in preparing a concise presentation of what I do professionally. If anyone wants advice on how one can create their own (simple) website, I’m happy to discuss it. 845-362-2557 or DrFlax@aol.com.

**PRIVATE PRACTICE: FEES** Here is a link to a legal public site where you can look up fees for a given zipcode. http://www.fairhealthconsumer.org/

**PRIOR AUTHORIZATIONS** If you are frequently bothered with cumbersome and seemingly unnecessary requests for prior authorizations, the APA is eager to hear from you: Ellen Jaffe, Director, Practice Management HelpLine/Medicare Specialist, Office of Healthcare Systems and Financing, American Psychiatric Association, (703) 907-8591 ejaffe@psych.org. Practice Management HelpLine (800-343-4671) - email at hsf@psych.org. Also, one of our members posted to an international list-serv with regard to any denial of benefit, so I quote Dr. John Fogelman:

> The URL below will direct you to a database for the regional CMS (Centers for Medicare and Medicaid Services) headquarters. The names of the regional Medical Directors are listed. When you call, hang in through all the options, and at the end type in the name of the medical director. You will get either the real live doc, an assistant, leave a message, or the name of someone to call for an emergency. It usually works.

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharesavingsprogram/Regional_Contacts.html

My experience has been that the higher you go in any organization (hospital, government, insurance companies), the closer you are to the decision maker, and the decision makers do not have to stay on the unvarying mindless script. They do not instruct you to have a good day, apologize for your inconvenience, thank you profusely and hear how they know how valuable your time is. They usually listen, and if you do not scream at them, a favorable result often follows.

**PLEASE MAKE EVERY EFFORT TO RETURN PHONE CALLS. EVEN IF YOU HAVE NO ROOM IN YOUR SCHEDULE FOR NEW PATIENTS**

We have frequently heard complaints about patients leaving voice mails with private offices and never getting a return phone call. If true, this reflects very poorly on our profession. Yes, I know how many people leave voice mail messages that I can’t understand, even after playing it back 6 times with the volume turned up full. Even so, the number of complaints seems to exceed the number of complaints that could be excused due to poor communication. I screen callers with my greeting message that gives enough detail about my practice so many callers know immediately not to bother leaving a message because I don’t take their insurance. This saves valuable time for all.

**IT’S A FREE LUNCH!**

Next Executive Council Meeting
Il Fresco Restaurant, Orangeburg, NY
Journal Club (15 minutes) PROMPTLY at 12 Noon
Followed immediately by Business Agenda
Friday, February 6th @ 12 Noon at Il Fresco in Orangeburg, NY.

Please contact Dr. Russell Tobe, MD (rtobe@NKI.RFMH.org) (845) 398-6556 if you are planning to attend.

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PRESIDENT’S COLUMN

Russell Tobe MD (russell.tobe@gmail.com)

Dear West Hudson Psychiatric Society (WHPS) membership, colleagues, and friends:

As I mentioned in the prior Synapse, we have started an initiative to better understand changes within the services landscape. Dr. William Greenberg from the Mental Health Association attended our recent Executive Council Meeting. For those of you who joined for both Dr. K two meetings ago and Dr. Greenberg this last meeting, there are some common themes. Concrete review of scope of services for the respective organizations is outlined in this and the last Synapse publications. What is less clearly represented in these reviews but overtly apparent during the meeting are the parallel processes of these organizations and their respective medical directors. First, both medical directors care about quality service delivery and are working to optimize this within the context of numerous constraints. Second, both medical directors are greatly challenged in appropriate referral options on program completion and facilitating seamless transition.

Though Dr. Greenberg reviewed many programs at the Mental Health Association (Assertive Community Treatment, Coordinated Behavioral Health Services, Recovery Services/Project Rainbow, Care Management, and specialized children and family services), his review of Program for Self Discovery (PROS) highlighted nicely several challenges within our community. This is probably the largest program at the Mental Health Association. As many of you know, two PROS programs exist within Rockland County (at the Mental Health Association and at Jawonio). These programs are supported by Medicaid and to more variable degrees by Medicare, private insurance, and self pay, when applicable. Dr. Greenberg represented only the Mental Health Association PROS program, which is recovery-oriented and compels the patient (or member) to personalize their treatment by selecting from a menu of options, much like an individual registering for courses. These are time-limited, generally group oriented programs with focus on recovery. While intensive, the degree of intensity is contingent upon member goals and engagement in individual classes/services. With several hundred individuals split between the Jawonio and Mental Health Association programs, the need within our community for services is quite apparent. However, these are not clinics and visualization of the exact destiny for program completers within our community seems opaque. Program completers are, without doubt, each unique and with different strengths. Nonetheless, it seems likely that a significant number of PROS graduates will require more intensive medication management and psychotherapeutic services in addition to supportive care management and vocational services. It also seems likely that many will require practitioners willing to accept Medicaid, Medicare, and/or private insurance. So it begs the question, who will those practitioners be even if organizations such as the Mental Health Association continue to provide case management services? Few private practitioners take insurance (particularly Medicaid and
Medicare) for a variety of reasons, which continue to amass (most recently EMR requirements). The ones who do manage these obstacles are often decreasing the numbers of panels they accept and/or are inundated with referrals. So where are the clinics? I was sad to learn that the Mental Health Association is not one of them. With our county mental health on life support and a single hospital-based outpatient clinic in Rockland County, it seems we may be up against the ropes.

Of course, we are only discussing one aspect of PROS. We have not addressed that PROS programs, while intensive, may not benefit all patients, particularly those recently discharged from hospital settings with severe persistent mental illness. It is convenient to consider PROS as a new label for intensive outpatient treatment. However, this assertion is probably a simplified and flawed impression. If fact, while I am certain both PROS programs do their best to help all members within the constraints of the program bounds, those who are more acutely ill including individuals unable to plan their curricula and individuals unable to relate or participate in group settings may not benefit from PROS. Of course the question becomes, where do these individuals go? Sadly, within Rockland County, the answers do not seem so clear at this point for this more acute patient group. We have yet to learn about services in Orange, Sullivan and Delaware counties.

We will continue to investigate and learn about community programs and care options in the coming months towards the goal of relaying information that may help us continue to advance the health and well-being of our community. But, I must confess, it is hard to be optimistic. For those of you who are aware of services and programs we are not, please let us know. For those of you who run programs, please speak up and update us. We are, more than ever in recent history, at a cross-roads within our community. Systems have been eroded and new growth seems to be taking root. I would argue, it is our job collectively, to inform this growth and consider the ways in which we as psychiatrists can insure our community continues to receive the care it deserves.

Finally, a quick reminder that Dr. Summergrad will be speaking at our next educational forum. If you have not yet done so, please mark your calendars for May 1, 2015. RSVPs will be going out soon. As always, please stay connected and relay feedback about or ideas for branch activities to me.

Wishing you all a Happy Holiday Season and New Year.

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Summary from Executive Council Meeting
Friday, December 12, 2014


Journal Club: Dr. Dom Ferro presented a study comparing transference focused psychotherapy (TFP), DBT and supportive psychotherapy. All three were effective in reducing depression and anxiety, and in improving global functioning and social adjustment. TFP and DBT reduced suicidality. Only TFP reduced irritability and assault.

Guest Attendee: Dr. William Greenberg, the Medical Director of the Mental Health
Association in Rockland County was our guest at this meeting. He gave an overview of the programs and services offered through the MHA including PROS (Program for Self Discovery), ACT (Assertive Community Treatment) and Recovery Services.

**Spring 2015 Educational Meeting** – Dr. Paul Summergrad will be the speaker at our Spring 2015 Educational Dinner Meeting. It is scheduled for Friday, May 1, 2015 at 6pm. The topic and location to be determined.

**Women’s Group** – the next Women’s Group meeting will take place at Alex Berger’s office on January 30 at 12:30pm.

**Mental Health Coalition Update** – Dr. Lois Kroplick is looking for a recommendation for an expert on the topic of ADHD as the speaker for the next Public Forum.

**Miscellaneous Items:**
- We would like to invite the NYSPA President to our March Executive Council meeting, date TBD.

**Next Executive Council Meeting** - Friday, February 6, 2015 at 12 noon at Il Fresco, Orangeburg, NY. Dr. Lois Kroplick and her husband, Dr. Bruce Levitt will do the Journal Club presentation on Integrated Healthcare.

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**Journal Club**

William M. Greenberg, MD


We may simultaneously bemoan the lack of controlled studies of the dynamic psychotherapies, while recognizing the challenges in doing them well: e.g., the difficulties in standardizing treatments and accounting for differences in therapist relatedness and conduct, identifying an adequate control condition, blinding of the patients and raters, evaluating outcomes over a reasonable period of time, and raising enough money to conduct such studies (funding does not come from the ample coffers of the pharmaceutical industry, which usually enrolls hundreds of patients in clinical trials). Even when such studies are reported, in recent years we are unlikely to find them published in the principal psychiatric journals that we commonly read.

It was therefore notable to find in the pages of the *American Journal of Psychiatry* this controlled study, comparing the outcomes of 90 outpatients with borderline personality disorder randomly assigned to be treated for 1 year with either dialectical behavior therapy (DBT), transference-focused psychotherapy (TFT), or dynamic supportive therapy (ST), by experienced therapists in private offices, who were supervised and monitored with videotaped sessions. The study was sponsored by the Borderline Personality Disorder Research Foundation, associated with the Weill Medical College of Cornell University. The treatments were manualized, raters were blinded to the treatment condition, and therapists were blinded to the baseline variables. Exclusions included those diagnosed with bipolar I disorder, psychotic disorders, or active
substance dependence (past dependence was accepted). Supportive treatment was less intense, involving sessions weekly instead of twice weekly for the other treatments.

Primary outcomes domains were chosen to be suicidality, aggression and impulsivity; secondary outcome domains were anxiety, depression and social adjustment. These were derived from seven rating scales, and were assessed at baseline and four month intervals to one year. The discussion section refers to 12 variables, which included factors of some of the measured scales.

The primary analysis only included those study participants with 3 data points, and fitted a linear curve to each of the 12 variables (hierarchical linear modeling), statistically comparing the slopes, as opposed to looking at effect sizes based directly on changes in the scale scores. Of the 90 randomized among the three treatment conditions, those with 3 data points included 23 TFT patients, 17 DBT patients, and 22 ST patients (i.e., at total of 62 patients). Most patients were receiving medications as well; these were adjusted per a guideline (more of those receiving DBT were treated with medications, although severity was reported the same among the three groups). Treatments appeared to be efficacious, with significant improvement claimed for 10 of the 12 variables for TFT, 5 for DBT and 6 of 12 for ST. Both TFT and DBT were associated with significant improvement in suicidality, and both TFT and ST were associated with significantly improvement in anger. Improvements in impulsivity varied by the factors of the scale used. Multiple other post hoc analyses were also done.

On the one hand, this was a well-controlled and carefully conducted study of the differential effects of three psychotherapies in an important category of challenging, high risk patients, and it is laudable that this work was done. The good news is that these psychotherapies appeared generally successful, with effect sizes mainly in the moderate range. To borrow a quotation that Jerome Frank took from Lewis Carroll in his seminal book, *Persuasion and Healing*, regarding the different therapies “all have won and all must have prizes.” There is a suggestion that TFT might have been more widely effective in some areas.

On the other hand, I am not clear whether all the details of the statistical analyses on the primary variables were pre-specified; in any case these were very small groups of patients to draw firm conclusions from. Moreover, there were many variables separately analyzed, and I did not see mention of any correction for the many multiple comparisons, so the strength of the conclusions must be modest at best. This would be a good pilot study arguing for something larger with similar methodology to test these findings. We can only hope that time and money could be made available to support this.

EDITOR’S NOTE: At our November meeting, Dr. K informed us of services now available at Nyack Hospital. Following is his summary of the program that has been providing inpatient, ER and CL services (longstanding) for the past 6 months on a 7 day/24 hr basis. In addition, he told us the ER and the hospital have been full since opening and remain exceptionally busy. This was apparent during Dr. K’s presentation as he was repeatedly interrupted by phone calls from the hospital. The average length of stay is 5 days. They can do IV’s and do provide medical specialty care on the unit. There is no clinic and no day program. ECT is being done at Dobbs Ferry Hospital.

The Behavioral Health Center at Nyack Hospital is an adult acute care psychiatric unit that offers a full spectrum of psychiatric services and medical care. Open since April 22 of 2014.

Current Psychiatrists:
Vahan S. Kouyoumdjian, MD, Chief of dept of psychiatry.
Iqbal Sheikh, MD, full time staff psychiatrist.
Michael Levy, MD, Part time staff psychiatrist.
Biba Singh, MD, has admitting privileges.  
Scott Wiener, MD, has admitting privileges.  
Psychiatric Nurse Practitioner position, still open.  

Services Provided: emergency psychiatric evaluations at The Judith H. Trust  
Assessment and Referral Center in the Emergency Department (4 bed ER pod section)  
- Evaluations are done after medical clearance by the ER team, by an LCSW supervised by the psychiatrist in the hospital.  
- Population served: no age limit.  
- CL Psychiatry covered by the Department psychiatrists.  
- Population served: 18-65+  
- 25 bed inpatient psychiatric unit, average lent of stay target 5-7 days. Integrated w/ medical specialties that provide 24hr consultation/care. Also with the Rehab dept for dual diagnosis and effective coordination of resources.  
- Outpatient services currently not provided by the hospital, referrals through the ER staff.  
- ECT services availability pending.  

Most commonly utilized outpatient mental health referral services:  
- MHA of Rockland County and ACT  
- Juwanio  
- Frawley Clinic GSH  
- Nyack Consultation and Orangeburg Clinic of RPC  
- RCDMH Pomona Clinic  
- Private psychiatrists as needed.  

For long term psychiatric hospitalization referral to RPC based on special arrangement from the inpatient unit.  

For evaluation and referrals call the ER LCSW: 845-348-6709 or 6710.  

For the psychiatrist call the hospital: 845-348-2000.  

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CORRESPONDENCE  

(Editors note: I vowed when I started this publication to publish anything sent to me. Please send me announcements, news, notices, rumor, recipes, innuendo, ads etc).
The Journey Of The Droplet

Syed Abdullah, MD

I started my existence as a quintessence of a microscopic drop with a load of information inside me from the ocean of mercy and wisdom. I was oblivious of the destination of my journey propelled by the microprogramming that was built in me. I was a restless soul, thrashing and moving forward into the vast unknown into which I was launched. As I sailed in the darkness and silence that surrounded me, I became aware, momentarily, that there were millions of other droplets all around me racing in the same direction! Despite this crowd, I had a faint awareness that I was inwardly incomplete, perhaps the restlessness was in search of becoming complete. I therefore continued my perilous journey toward an undefined destination, along with all my fellow travelers.

Finally I perceived a tiny glow of light to which I was uncontrollably attracted. Then there was this collision that resulted in my being absorbed in a vortex of energy and activity. In that fateful nanosecond I lost my identity, even my physical boundaries merged with this new tactile reality. It seemed that I had come to the end of my frenzied search. It was like a homecoming and beginning of a new voyage with a pristine individuality. Perhaps I was becoming complete.

I Believe You

Cat & cat the rat

“I believe you” is what he said
and his words went tumbling through my head.
like a key unlocking Pandora’s box and it wasn’t all that bad.
It made me very happy to hear them, and just a touch sad.

It was like he opened a pathway to my heartless heart
that had been closed a long time, due to devil’s art
and I felt a freedom that took my wings to flight
and I no longer felt the urge to constantly battle and fight.

That there was someone I could tell my troubles to
And even believed me, how impossibly true.
My whole life I’ve been waiting for someone to say
“I believe you”, got your back, I’m here to stay.

Editor’s note: The following is an unsolicited statement from one of the candidates running for President Elect of the APA. No other candidates have provided us with any information about themselves.
Maria A. Oquendo, M.D.

Candidate for President-Elect
www.oquendoforapa.com

This is an exciting time to practice psychiatry. As our knowledge base grows exponentially, we still have the privilege of forming close therapeutic alliances with patients and families. Having practiced psychiatry for 27 years, I am devoted to caring for severely ill, often suicidal patients. As Vice Chair for Education and Residency Training Director, I have extensive leadership experience. My NIMH funded research focuses on treatment and neurobiology of mood disorders, suicide and global mental health. An active, loyal APA member, I am APA Secretary, chaired the Workgroup on Minority and Under-Represented Caucuses and the Conflict of Interest Committee and work on other workgroups and components. I am Vice-President of the Board of the American Foundation for Suicide Prevention, President Elect of the International Academy for Suicide Research, past president of the American Society of Hispanic Psychiatry, and serve on both the American College of Neuropsychopharmacology’s Council and the National Institute of Mental Health’s Advisory Council. As an accessible President-elect and then President, I would be honored to serve the entire APA membership, yet harness my dedication to teaching and mentoring to engage Resident Fellow Members and Early Career Psychiatrists. They are the future of our profession. Please visit www.OquendoforAPA.com

PRIORITIES
• Secure a key role for psychiatrists as health care reform is implemented while ensuring high quality care for all, particularly persons with the most severe mental illnesses
• Pursue equitable reimbursement and true parity for psychiatric care
• Secure robust federal funding for education and research, coordinating efforts with advocacy groups
• Strengthen collaboration with psychiatric subspecialties and primary care
• Pursue active communication with all members
• Ensure effective representation of psychiatry to the public and government
• Boost APA’s value to engage and retain members
• Enhance APA diversity including representation from women, ethnic minority psychiatrists, international medical graduates, LGBT and other minority groups

Candidate Bio
APA Secretary (2013-2015)
Residency Training Director, New York State Psychiatric Institute and Columbia University (2008-)
Professor (2003-) and Vice Chair for Education (2007-), Psychiatry Department, Columbia University
Associate Editor, American Journal of Psychiatry, (2006-2013)
Chair, APA Minority Fellowship Selection Committee (2008-2011)

Professional Activities
30%-Teaching/Education/Mentoring (Vice Chair for Education and Residency Training Director)
45%-Professor of Psychiatry (Research and Private Practice)
25%-Administration (Vice Chair for Education and Residency Training Director)

**Professional Income**
35%-New York State Psychiatric Institute
50%-Columbia University
15%-Forensics, Royalties, Lectures

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**Psychiatry: Integrating Body and Mind, Heart and Soul**
Join your colleagues from across the U.S. and over 50 other countries for the psychiatry event of the year! Attend APA’s Annual Meeting in Toronto, May 16-20, 2015. With its world-class cultural attractions, restaurants, and entertainment, Toronto has been named one of the best cities to visit in 2015. The scientific program will feature a variety of innovative sessions and inspiring courses with a special focus on integrating body and mind, heart and soul. Get ready now:

- **Register** for the meeting and **courses** and **reserve your hotel**.
- Take advantage of the lowest registration fees offered by APA.
- See the Annual Meeting **Information Guide** for more information.
- Prepare your schedule in advance. Take a look at the Annual Meeting **Schedule at a Glance**.
- Please review **international travel requirements** for Canadian entry and re-entry to the U.S. Passports are required.

**Special Offer for Secure Office Payments**
APA’s member benefit for payment processing is provided by TransFirst. With more than 19 years of experience, TransFirst offers PCI-compliant point-of-sale and terminal products; wired,
wireless, mobile, and Internet-based payment solutions; 24/7, U.S.-based merchant support; security and data-protection technologies; and pricing structures for businesses of every size. If you act before **December 31**, you can also save on TransFirst's online payment gateway, Transaction Express. Call (800) 613-0148 for details and be sure to mention promo code APA1214EN. Call for a free savings analysis or visit [TransFirst's](#) for more information.

**Moving to an Integrated Medical and Psychiatric Payment Platform**

Moving to an Integrated Medical and Psychiatric Payment Platform

[http://psychnews.psychiatryonline.org/doi/full/10.1176/appi.pn.2014.12a22](http://psychnews.psychiatryonline.org/doi/full/10.1176/appi.pn.2014.12a22) In this month's column, Roger Kathol, M.D., and David Leader, M.D. tackle one of the biggest challenges in integrated care: payment. They make the case for integrating payment by rolling behavioral health benefits into medical benefits, and they present the example of one organization that is taking important steps toward integrating both services and payment. Read [more](#).

**Integrated Care Column: A "Wake-Up Call" for Psychiatrists**

Integrated Care Column: A "Wake-Up Call" for Psychiatrists

Smoking kills half of psychiatrists' patients, note the authors of this column, which they label "a wake-up call for psychiatrists." The authors outline what psychiatrists should—and can—do to help patients quit. Read [more](#).

**Meet CME Requirements with APA Online Programs**

Meet CME Requirements with APA Online Programs

Do you need to report your CME by December 31? APA has dozens of online CME activities at [www.apaeducation.org](http://www.apaeducation.org) and many are free for APA members. Courses include Practice Guidelines; DSM-5; Performance in Practice modules; eFOCUS clinical vignettes; Buprenorphine training; Addiction Psychiatry webinar series; and much more. Enter self-reported credit on your transcript.

**Job Hunting Made Easy: Here’s Help**

Job Hunting Made Easy: Here’s Help

Check out [http://jobs.psychiatry.org/](http://jobs.psychiatry.org/) current job opportunities from the job board at [APA Job Central](http://jobs.psychiatry.org/). In addition to searching the site for available positions, APA members may post their resume, set up email job alerts, and access a "job seeker" account.

**Legal Information and Consultation Available to APA Members**

Legal Information and Consultation Available to APA Members

Enroll Early! Members who enroll by January 1, 2015, may deduct $25 from their fee.

As one of your member benefits, APA has an agreement with Anne Marie "Nancy" Wheeler, J.D., to offer confidential triage consultation on practice-related issues to APA members at a preferred rate. She will also provide names of local counsel when your issue requires representation or an opinion based on your state's law. All plan options include a quarterly eNewsletter that covers legal issues related to the practice of psychiatry and includes a FAQ section. (This plan is not available to members residing in North Carolina.) For more information, click [here](#).

**Have You Reviewed Your Sunshine Act Data for 2013? Act Now!**

Have You Reviewed Your Sunshine Act Data for 2013? Act Now!

Physicians have until **December 31** to initiate disputes about 2013 data reported on them under the Physician Payment Sunshine Act. After **January 1**, they are still able to initiate disputes concerning these data, but it may take the Centers for Medicare and Medicaid Services six to 12 months before updating the public database.

The Physician Payment Sunshine Act requires manufacturers of drugs, medical devices, and biologicals that participate in U.S. federal health care programs (e.g., Medicare, Medicaid) to
report certain payments and items of value above $10 given to physicians and teaching hospitals. Only medical residents are excluded. The initial round of reported information from 2013 was made public on September 30. To review and dispute data, physicians must be registered on the Open Payments Systems. Those who are already registered are encouraged to review data reported about them; those who are not registered should visit APA's dedicated webpage and follow the step-by-step instructions to register today.

**APA Awards**

**Foundation Announces Application for 2015 Awards for Advancing Minority Mental Health**
The American Psychiatric Foundation is accepting applications for its 2015 Awards for Advancing Minority Mental Health program. This annual award recognizes mental health professionals, programs, and organizations that have undertaken innovative efforts to raise awareness of mental illness in underserved minority communities, increase access to mental health care for underserved minorities, and/or improve the quality of care for underserved minorities. The application deadline is January 20.

**Applications Sought for Improved 2015 Spurlock Congressional Fellowship**
The deadline for the APA Jeanne Spurlock Congressional Fellowship has been extended to Friday, December 19. This fellowship provides an opportunity for residents, fellows, and early career psychiatrists to represent the profession of psychiatry on Capitol Hill and work with federal policymakers to shape public policy.

More information and details on how to apply for the fellowship are available here.
“The Art and Science of Adolescent Psychiatry and Psychotherapy”

Registration is now open for the joint meeting of the American Society for Adolescent Psychiatry and the International Society for Adolescent Psychiatry and Psychology in New York March 26-29, 2015 at the New York Marriott East Side Hotel, 525 Lexington Avenue. You may register for the meeting on line at http://adolescent-psychiatry.org or complete and return the attached registration form. To reserve a room at the hotel go to (http://www.marriott.com/hotels/travel/nycea-new-york-marriott-east-side/) or call: 800-242-8684 and ask for the ASAP/ISAPP room block. There is a block of rooms at the rate of $299 per night. We are anticipating that this block will sell out quickly so you should make reservations soon.

The meeting theme is “The Art and Science of Adolescent Psychiatry and Psychotherapy.” You won’t want to miss this exceptional meeting, which will offer 3 ½ days of a diverse, multi-disciplinary in-depth scientific conference. There will be over 100 presenters, with about half coming from other countries, including Canada, Europe, Asia, and Latin America, with many nationally and internationally known speakers. The Certification Examination in Adolescent Psychiatry is being resumed and will be held on Thursday, March 26. Information and an application for the examination may be obtained from Frances Bell at the Central Office, adpsych@aol.com, or via the website: http://adolescent-psychiatry.org

Thursday morning will feature an institute on critical issues in Psychopharmacological Treatment of Adolescents, including lectures on “Treating Adolescent Depression: Thinking Outside the Black Box,” and “Are Antipsychotics an Option in Adolescent Depression?”

Another institute will be held on Sunday on Adolescent Addictions, organized by Gregory Bunt, MD. This institute will feature a lecture on “New Psychopharmacological Developments in Adolescent Substance Use Disorders.”

Efrain Bleiberg will present the William A. Schonfeld Award Lecture, “The Mentalizing Model of Emerging Borderline Personality Disorder in Adolescence: The State of the Art.”

Some of the other featured speakers will be:

- William Pollack, “Hearing Young Males Voices: Healing Their Pain: Empathic Listening and ‘Male-Friendly’ Psychotherapy for Male Adolescents with Covert Depression”
- Jack and Kerry Kelly Novick and Enrico DeVito, “Loneliness in Adolescence”
- Lynn Ponton, “Issues & Strategies of Therapeutic Engagement with Emerging Adults Using a Developmental Frame”
- Annette Streek-Fischer, “Shame and Narcissism in Adolescence”
- Stevan Weine, “Protecting Adolescents against Radicalization and Recruitment to Violence”

The meeting will feature screenings of two award-winning short documentary films, for which David Baron served as Executive Producer. There will also be posters, including New Research Posters, on Friday and Saturday.

The registration fee is all-inclusive and includes admission to the two institutes, all workshops and courses, and lunch on Thursday, Friday and Saturday.

For more information, contact Frances Bell at adpsych@aol.com

Conference co-chairs
Gregory Barclay, MD, ASAP President-Elect
Lois Flaherty, MD, ISAPP President-Elect
ASAP AND ISAPP JOINT MEETING
Registration Form
March 26-29, 2015

Name: ___________________________ Degree: ___________________________

Address: ___________________________________________________________

City/State/Zip _________________________________________________________

Phone: _____________________________

Email: _______________________________

For Continuing Education Accreditation, check one:
___ MD  ___ Social Work  ___ Psychology  ___ LMFT  ___ LPC  ___ Other

If Resident/Student, name of Institution/School:

Conference Registration Fees:

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___ A check is enclosed payable to ASAP (A $35.00 fee will be assessed for returned checks)

Bill my credit card: ___ Visa  ___ MasterCard

Account #: __________________________

Expires: ____________________________

Signature: __________________________

No refunds after January 31, 2015
Mail checks to: ASAP, PO Box 570218, Dallas, TX 75357-0218
Email: adpsych@aol.com
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Orange Regional Medical Center  Department of Psychiatry is seeking a Child & Adolescent Psychiatrist, Full Time for our growing outpatient division. Above average pay and excellent benefits. Call Carlos Rueda, MD at 845-333-2240.

Crystal Run Healthcare has openings for BE/BC Psychiatrists to join 3 others and a full ancillary staff including psychiatric RN's and LCSW's in a busy out-patient behavioral health setting. Crystal Run Healthcare is a physician owned multi-specialty group practice in Hudson Valley NY 60 miles northwest of NYC. With over 300 providers, over 40 specialties and 18 locations, Crystal Run Healthcare is one of the largest practices in the Northeast. Responsibilities include integrated care, consultations, initial evaluations, and follow-ups. Telephone shared back-up call, electronic medical records utilized. Crystal Run has also just recently partnered with Mt. Sinai Health System to form the Mount Sinai-Crystal Run Alliance for Healthcare Transformation. Contact Nicholas Batson,M.D. nbatson@crystalrunhealthcare.com for more information.

Psychiatry/Psychotherapy Office for Rent
Saturday all day, Sunday after 10:30
Route 45, Pomona
Shared Waiting Room, Wheelchair Accessible, Wall-to-Wall Windows, Private Bath, Full Sound Insulation, Separate Entrance/Exit
Call Lorraine Schorr, MSW 354-5040

Depression Support Group
Depression support group meets 2 times a month in Pomona, NY. We are inviting new members at this time. We are moderated by a clinical social worker. This is not a therapy group but social support for people fighting depression. Call Kathy for more information (914) 714-2837.

Rockland County Depression and Bipolar Support Alliance
peer-to-peer run support group for people with depression, bipolar disorder, anxiety disorder or any related mood disorder & their friends & family. The support group meets every Thursday night from 6:30 - 8:30 at St. John's Episcopal Church, located at 365 Strawtown Road in New City. Reservations are not required. There is no fee for attending the support group meetings. This is a very warm and welcoming group run by people who have been there and can help. Any questions please call Leslie or Leonard at 845-837-1182.