

## **NEUROPSYCHOLOGY TRACK**

**COORDINATORS: Dr. Andrea Downie & Dr. Lynn Rennison**

**One (1) Resident Position is available.**

*NMS Code Number: 181516*

Number of applications in 2021: 14

The Neuropsychology Track provides training for residents primarily interested in pursuing a career as an Adult Clinical Neuropsychologist. The Track respects the spirit of the guidelines outlined at the Houston Conference on Specialty Education and Training in Neuropsychology in which specialty knowledge and skills are acquired throughout one's graduate school training, residency year, and post-doctoral experiences by means of a scientist-practitioner model. The primary goal of the Neuropsychology Track is to prepare residents for practice in providing neuropsychological assessment and consultation in a variety of post-doctoral settings. In order to achieve this goal, the neuropsychology residents are provided with:

- Experiences to advance their theoretical knowledge in neuropsychology and general clinical psychology, and;
- Training in assessment, diagnosis, and consultation with respect to neuropsychological and psychological disorders.

The general structure of the Neuropsychology Track includes the following experiences:

- A seminar series required of the residents in all Tracks,
- Neuropsychology Rounds, as well as additional medical/hospital rounds,
- Two Major Rotations within the Neuropsychology Track, and,
- One Minor Rotation outside of the Neuropsychology Track

A strength of the program is the opportunity to work with several different neuropsychologists who offer a variety of perspectives due to their different training backgrounds. The resident is exposed to fixed and flexible batteries of tests, as well as specialized assessment techniques/test batteries to address specific questions or populations on certain services (e.g., pre-operative assessments for deep brain stimulation or localization of function).

Most Neuropsychology Major Rotations share a common set of clinical experiences. The primary focus of these rotations is to address the referral question using neuropsychological assessment techniques. More specifically, residents will acquire skills in reviewing health records (paper-based and electronic) and neurodiagnostic test results; interviewing; test administration, scoring, interpretation; report writing; and providing feedback to patients and families. Feedback (oral communication of results and recommendations) may be provided to referring physicians, health professionals, patients, and families. Clinical assessments typically include evaluation of mood and personality. On some services, residents have the opportunity to work with psychometrists and/or practicum students.

Across the Consortium, opportunities are available to work with patients across the age spectrum, ranging from very young children to the elderly. Referred patients may present with a wide variety of neurological, medical, and psychiatric disorders. Neuropsychology Track residents are exposed to a wide variety of inpatient and outpatient populations, including individuals with very rare disorders. Opportunities also exist for working with individuals from different cultural backgrounds or those with specific disabilities. In addition to these shared experiences, each Neuropsychology Major

Rotation offers some unique experiences as outlined in the Rotation descriptions.

Residents in the **Neuropsychology Track** complete their two Major Rotations in settings that emphasize provision of neuropsychological services to adult populations. Specifically, the resident participates in the two following Major Rotations:

- LHSC: Victoria Hospital – Neuropsychology Consultation Liaison Service
- LHSC: University Hospital – Clinical Neurological Sciences

Due to CPA requirements of training in more than one institution over the year, Neuropsychology Track residents must choose a Minor rotation outside of London Health Sciences Centre (i.e., at St. Joseph's Health Care-London or CPRI).

### ***Seminars, Rounds, and Other Training Experiences***

Residents in the Neuropsychology Track participate in Neuropsychology Rounds approximately once a month on Wednesday mornings. These meetings encourage and provide the opportunity for discussion of the relevant neuropsychological literature pertaining to assessment issues and particular disorders within the context of case presentations or specific journal articles. The resident can expect to present once at Neuropsychology Rounds during the course of the year. Attendance at these rounds is required of all residents in the Neuropsychology Track.

Residents in the Neuropsychology Track are expected to develop expertise in working with other health care professionals as independent consultants. Medical teaching rounds are conducted on an ongoing basis by various departments. Attendance at some teaching rounds/team meetings is required for virtually all of the Neuropsychology Major Rotations and varies depending on the specific rotation (e.g., Epilepsy Teaching Rounds are required of residents on the Adult Epilepsy Service in the LHSC: University Hospital Major Rotation). Examples of the numerous teaching rounds occurring on a regular basis include CNS Grand Rounds, Movement Disorders Rounds, Neuroradiology Rounds, and Epilepsy Teaching Rounds and Team Meetings.

### ***Special Requirements for Applicants for the Neuropsychology Track***

Because of the specialized nature of the Neuropsychology Track position, academic preparation and practicum experience within the area of neuropsychology are necessary. We strongly prefer that resident applicants meet the guidelines put forth at the Houston Conference on Specialty Education and Training in Clinical Neuropsychology. Specific requirements for applicants to this track are listed below.

***PLEASE NOTE FOR APPLICANTS IN 2022:*** *As stated above, there are standard requirements and credentials for the Neuropsychology Track at LCPRC, which are set in order to ensure a successful training experience. In previous years, many applicants well exceed these criteria. Due to the unusual circumstances associated with the COVID-19 pandemic, we recognize that some applicants may have had interruptions in or modifications to their planned practicum training opportunities beginning in March 2020. If pandemic circumstances negatively affected your ability to meet your pre-residency training trajectory, please explain in detail in your cover letter and have your Director of Clinical Training verify the disruption, as well as any modifications, et cetera. We will take this information into consideration in reviewing your application. However, we must ensure that the residents with whom we match have enough clinical and neuropsychological experience and background at entry to benefit from and succeed in meeting the residency competencies and outcome expectations by the end of the residency year in order to continue to the next steps of professional registration. **Therefore, preference will be given to applicants whose backgrounds best match the recommendations listed below.***

*In addition to the core minimum requirements on pages 23-24, it is recommended that applicants for the **Neuropsychology Track** have the following credentials at the time of application:*

- 600 hours of formal neuropsychological practicum experience (with a minimum of 200 hours (300 hours preferred) spent in face-to-face neuropsychological activities) with adults;
- At least 8 comprehensive adult neuropsychological assessment reports completed in neuropsychology practica;
- Demonstrated proficiency in English as evidenced by writing reports or research articles, or pertinent coursework, and;
- Completion of a graduate-level course (or other equivalent documented formal didactic training) in neuropsychological theory or neuropsychological assessment.

***\*NOTE\* To facilitate our review of your application, please specifically list each of the following separately in your cover letter:***

- Number of adult and paediatric comprehensive neuropsychological assessment reports written, in neuropsychology practica, for cases in which you conducted the interview and testing, integrated the test results, and provided a case formulation/interpretation and recommendations;
- Number of hours completed in neuropsychological practica, and;
- Number of hours of face-to-face neuropsychological activity (such as conducting interviews, administering tests, providing feedback, providing neuropsychological interventions) completed in practica; please provide hours involving adults and children separately.

### **Major Rotations:**

#### ***London Health Sciences Centre: Victoria Hospital - Neuropsychology Consultation Liaison Service***

The Neuropsychology Consultation Liaison Service conducts neuropsychology assessments with patients with a variety of medical and/or psychiatric presentations, such as dementia, metabolic disorders, endocrine disorders, cancers, schizophrenia, mood disorders and anxiety disorders. Evaluations are typically conducted to gauge cognitive strengths and limitations, provide a better understanding of the neurological underpinnings of behaviour to enhance patient care, assist with discharge planning and current medical management, or provide diagnostic assistance. The aim of this Major Rotation is to prepare residents for professional practice in a hospital-based general neuropsychology service.

While primarily an inpatient service, outpatient assessments are also conducted and the rotation can be tailored to the resident's preference for inpatient or outpatient experience. Inpatient units across LHSC hospital sites are served, but most of the work is completed at Victoria Hospital. Outpatient evaluations are completed at Victoria Hospital.

Strengthening the resident's knowledge of the cognitive, emotional, and behavioural manifestations of different disorders that impact the brain is a goal of the rotation. Residents will enhance their medical chart review and interview skills, ability to administer, score, and interpret neuropsychological tests and write clinically meaningful reports. Learning to work within the parameters of the patient's tolerance given the acuity of their medical or psychiatric circumstances is key. Case conceptualization occurs with the patient's background and current status in mind. Also

integral to the rotation is learning succinct and effective communication skills with physicians, nurses and allied health professionals, as well as learning in-depth communication skills tailored to patients and family members.

For residents wanting to obtain more comprehensive inpatient experience, the first six-month (four day per week) rotation is recommended, as inpatient experience during the second six-month (three day per week) rotation will be limited by the ability to meet timelines required for urgent inpatient referrals. Residents have the opportunity to work closely with a psychometrist on this rotation.

Supervisor: Dr. Lynn Rennison

### ***London Health Sciences Centre: University Hospital - Clinical Neurological Sciences***

To promote breadth of experience, residents who choose this rotation in the first six months (4 days per week) typically spend time on two available services, namely the Adult Neurology/Neurosurgery service and the Adult Epilepsy service. In the second six months (3 days per week) residents may choose to spend time on both services, or may concentrate their time on one of the two services. The Track Coordinator and rotation supervisors create a personalized training program for each resident based on the resident's particular background and interests, as well as supervisors' availability.

The **Adult Neurology/Neurosurgery** Service provides consultation to numerous neurologists and neurosurgeons in the Department of Clinical Neurological Sciences at University Hospital. Experiences within this primarily outpatient service will provide residents with exposure to a wide variety of adult age ranges and a wide variety of syndromes with unique behavioural disturbances. For example, patient populations include cerebrovascular disease (e.g., stroke, aneurysms), cortical and subcortical dementia (e.g., Alzheimer's disease, Parkinson's disease, Huntington's disease), multiple sclerosis, tumours, hydrocephalus, concussion (post-concussion syndrome), and patients seen for pre-operative assessments prior to deep brain stimulation surgery.

The major focus will be on neuropsychological assessment with the goal of diagnosis and/or description and documentation of neuropsychological functioning. More specifically, residents will acquire skills in interviewing, test administration, scoring, interpretation, report writing, and communication of results and recommendations to referring physicians, health professionals, and patients and their families. Opportunities are available to work with a psychometrist in the latter part of the rotation and opportunities to supervise a practicum student are also occasionally available.

Supervisors: Dr. Gloria Grace  
Dr. Michael Harnadek  
Dr. Ashley Miles

The **Adult Epilepsy** Service provides residents with experience in the neuropsychological assessment of adult and adolescent patients with intractable epilepsy. Most patients are surgical candidates or have had surgical treatment. Patients are seen on an outpatient basis or as inpatients admitted for continuous video EEG monitoring on the 11-bed epilepsy inpatient unit. The goals of a pre-surgical neuropsychological assessment typically include the identification of potential areas of cerebral dysfunction, assessment of hemispheric dominance for language, and communication to the team and the patient the results of the neuropsychological assessment including potential cognitive risks of a proposed resection. Post-surgical/follow-up issues are also addressed where relevant. Assessments include reviewing relevant medical information (including findings from neurological, EEG, and neuroimaging investigations), interviewing, neuropsychological testing, integration and interpretation of the findings, report preparation, communication of the results to the treatment team, and the provision of feedback to patients and families. In addition, the resident may gain experience in specialized test procedures and investigations, such as the etomidate Speech And Memory (eSAM) test, and/or have the opportunity to observe neurosurgical procedures and cortical mapping, as available. On this service, the resident will benefit from working on an interprofessional team (including neurology, neurosurgery, EEG, clinical psychology, social work and nursing) as well as have the opportunity to attend Epilepsy Teaching Rounds. Later in the rotation, opportunities will be provided to work with a psychometrist, if appropriate.

Supervisors:     Dr. Brent Hayman-Abello  
                      Dr. Susan Hayman-Abello  
                      Dr. Ashley Miles

<b>TRACK</b>	Neuropsychology (see p. 54)	
<b>ORGANIZATION</b>	London Health Sciences Centre	
<b>SITES</b>	University Hospital (see p. 57 58)	Victoria Hospital (see p. 56 57)
<b>MAJOR ROTATION/ SERVICE</b>  *See list of Minor Rotation options (p. 73-80)	- Adult Neurology / Neurosurgery  - Adult Epilepsy	- Neuropsychology Consultation Liaison Service

**Sample Combinations of Major and Minor Rotation Schedules**

Track	1st Six Months	2nd Six Months	
	Major – 4 days/week	Major – 3 days/week	Minor – 1 day/week
Neuropsychology	Adult Neurology/ Neurosurgery; Adult Epilepsy (2 days each service) (LHSC)	Neuropsychology Consultation Liaison Service (LHSC)	Concurrent Disorders Service (SJHC)