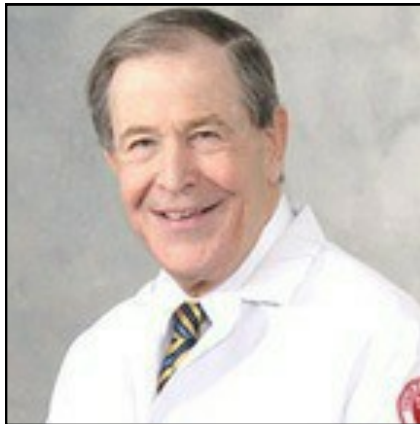
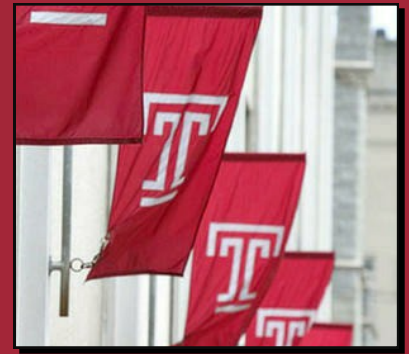


TEMPLE UNIVERSITY

DEPARTMENT OF PSYCHIATRY

NEWSLETTER SPRING 2021



LETTER FROM THE CHAIRMAN

The first Departmental newsletter was published in the Fall 2011. Since then, I have written 28 columns as Chair which highlighted the accomplishments of the faculty, residents, and the Department. It is with mixed feelings that this will be my last column for the newsletter. In January, I sent out a letter to the alumni and adjunct faculty that I will be retiring on June 30. I had decided five years ago that when I reached a certain age I was going to retire. Such decisions have multiple determinants and are made with ambivalent feelings.

As a member of the Temple faculty for over 20 years and as Chair for 11 years, it has been a wonderful journey. It has been an honor and a joy watching so many residents and faculty become outstanding clinicians, educators, and researchers. All of these wonderful relationships are part of the tapestry of my memory and will always remind me of my years at Temple. I am leaving a vibrant, energetic, and young faculty. Every faculty member in the Department has a special quality unique to them but taken together has enriched all aspects of our work together and will make the Department flourish for years to come. I cannot praise our residents enough. They are hardworking, innovative, and energetic. Part of the Department's success is because of their creativity in always suggesting ways to make the us stronger and their commitment to improving what we do. A characteristic that makes the entire faculty proud of our residents is the wonderful way in which they support each other and bond as a "family." They are residents, but they are also respected colleagues.

A hidden strength of the Department has been our committed adjunct faculty many of whom were former residents. Year after year they provide supervision or lectures to the residents. They bring different perspectives and insights that expand the residents' understanding of psychiatry and enhance their development as psychiatrists.

I am optimistic about the future of the Department. Many of the faculty members have demonstrated leadership qualities and have innovative ideas that will keep the Department strong and maintain its excellence for years to come. Finally, I would like to express my gratitude to everyone in the Department for their support for me while I was Chair.

Sayonara,

William Dubin, M.D.

Chair, Department of Psychiatry

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LETTER FROM THE PROGRAM DIRECTOR



As we look to the spring - to new growth, graduation, and a new class - I am struck by how much our program and our residents have accomplished so far this academic year. I am very proud of all that we have accomplished despite the unprecedented challenges posed by the global pandemic and crisis.

The physical, emotional, and financial stress of the covid pandemic, the 2020 presidential election, and continued racism in our country have led to greatly increased mental health needs in all segments of our population. Amidst this crisis our department and our residents have risen to the challenge. Under the leadership of Dr. Bizamcer, Dr. Walters, and administrator Colleen McAllister, the classes of 2021 and 2022 have successfully navigated both hybrid in person and full telepsychiatry models of care. With their combined efforts we have taken care of more patients in our outpatient clinic than ever before. We added a Child and Adolescent Psychiatrist, Dr. Jaclyn Dietzold, to our faculty and under her supervision our department has cared for more children than ever before.

Disruptions in care caused by the pandemic have disproportionately affected our patients with serious mental illness as well as those with substance use disorders. Placement of patients into all levels of care has been greatly slowed (and in some cases halted) by the pandemic. I am proud to say that our faculty and residents in the crisis center continue to care for this very sick portion of our population. Our residents are a key part of the crisis center team, and they have met these challenges with vigor, creativity, and resilience.

Within the residency, the transition to virtual recruitment could not have happened without the efforts of all of our residents, but most importantly the efforts of Janki Patel and Yuki Fukui. Drs. Patel and Fukui led efforts to revamp our webpage, create an online Instagram presence, and hold online residency fairs and mixers. Presenting applicants with an accurate picture of our department, including the personality of our team, and assessing their goodness of fit for the team, was an unprecedented challenge. We are happy to say that we matched an excellent class and are so excited to meet them all for orientation in June!

Finally, amidst these challenges, our residents have continued their rigorous academic growth and productivity. Residents on the psychodynamic psychotherapy track continue their classes at PCOP virtually, our residency leadership team continues to present virtually to the national audience of program directors, and our residents continue to publish articles and to present nationally as well. Under the leadership of Ruby Barghini, MD, and Meghan Musselman, MD, our Diversity and Inclusion Committee has built curricula, hosted movie and book clubs, and supported our recruitment efforts. Our Wellbeing Committee, led by Justin Faden, DO, and Morgan Lewis, DO, has spearheaded new initiatives including virtual Balint Group, call room revisions, and zoom bonding and trivia events.

The year has brought unprecedented challenges to health care and to our department. I am proud to say that during this time our residency has not only met these challenges but have used them for opportunities for growth.

Jessica Kovach, M.D.

Program Director of Residency Training

RETIREMENT LETTER FROM DR. STEINHOUSE



After more than 50 years as a contributing member of our Department of Psychiatry, I have decided to retire at the conclusion of this academic year.

It has been an honor and a privilege to have served the Department and the field of psychiatry for five decades. I look back upon my career at Temple with gratitude to all of the people who taught me. I am including not only my professors and peers but also all of the residents, students, and patients with whom I interacted on a regular basis. In the martial arts, one bows to his partner before sparring occurs, the reason being that your adversary is your teacher and is worthy of respect. In medicine, our teachers are all those with whom we work, play, teach, and struggle. I bow to all of you!

In my fifty years, I have seen many changes occur in our field – most for the better. However, in my opinion, I feel that we have turned over the art and practice of psychotherapy too often to others. I would urge all of our residents to do your best to master being a therapist. Medicines get patients back to baseline – therapy raises them above.

With the amount of time I have been at Temple, I have worked with and for many chair people. Some were excellent, some were good, and some were downright awful. I must extend kudos and thanks to our current chair, William Dubin. When Dr. Dubin became the leader and face of the Department, everything was in total disarray. The residency was about to go on probation, morale was low, our reputation in both the medical school and hospital had been greatly diminished, and multiple faculty were wanting to leave. Through Dr. Dubin's leadership and hands-on approach, all of the above has been corrected. The Department has grown in many ways as has our reputation locally and nationally. Thank you, Bill!

It is never easy to leave a place that you love. I love Temple; its mission, the people we serve, the friendships made, and the future to be had. I have always been a life-long learner, which won't cease after I don't have to get up for work at the crack of dawn.

Too often overlooked, our support staff is integral to the daily functioning of our Department. I give a giant "thank you" to all of them, past and present, for the assistance, guidance, good nature, and dedication they have afforded me. I must send a special thank you to Mrs. Juanita Sparrow, who worked for and with me for close to forty years. Though Nita retired two and a half years ago, our friendship continues and will remain life-long.

I am leaving Temple as a Professor Emeritus, a recognition that means so much to me. I hope to remain connected to both the medical school and our Department as time goes on. Hopefully, when the issues of COVID improve and we can once again meet in person, you just might see me at a Grand Rounds.

I wish all of you well. As the song says, "Thanks for the memories." If you stop by my office on July 1st, you will find a "Gone Fishin'" sign posted on the door. I hope they are biting!

Sincerely,

Roy Steinhouse, M.D., LFAPA, FCPP

Professor Emeritus

UNDERSTANDING PRACTICAL PSYCHIATRY: INSIGHTS



So many of the patients that come to us for help seem to have low self-esteem. They feel as if they are defective, have nothing to offer the world, and will never be able to form meaningful, loving relationships. How and why does this mindset happen to so many of us?

When any child is born, they face life with a still underdeveloped nervous system. Primitive reflexes are present, there is no executive function yet in the frontal lobes, and they themselves are not matured for two decades. So how do any of us know who and what we are? I would submit that all humans have the same basic drives. However, our view of the world is limited to the “microcosmic world,” beliefs, and behaviors of those who raise us. For many years, a child does not realize that there is a different “world” next door, across the street, and the like. Are we born with a conscience or are we taught right, wrong, folkways, and more from those with whom we live? If one then adds in religious teaching, culture, and early life experiences, can we yet know who we are or rather what we were “told” who we are? When we add in concepts of object relations theory, are we not

incorporating into our sense of self our beliefs and experiences with the “other”? At this point in life, do we have an accurate sense of self or do we function as “good students” who have incorporated the lessons we have learned – both good and bad –from all of the forces mentioned earlier?

In my clinical experience, so many of the patients with self-esteem issues carry that initial mindset into adulthood, never having questioned the origins of those beliefs, the accuracy of them, and the ways in which they continue to influence their current choices, behaviors, and feelings.

We have all seen patients whose life views of themselves seem so different from the truth. Intelligent folks who feel they are not; those who find great fault with their appearance when to the objective observer they are fine. We could all name many other “inaccuracies” we see in therapy that hinder the happiness and functioning of our patients. We all have seen that in therapy the “truth” about a patient’s life is irrelevant. It is their perception of the truth that dictates feelings and function.

How do we begin to assist those in their journey to self-discovery? I believe we have to explore how those initial self opinions formed. What memories of hurts, slights, and traumas does one patient remember? What aspects of talents, abilities, mistakes, and development were reinforced or tolerated, supported or used as “weapons” against our patients? Did they learn to imitate the “other” out of fear, love, security, or choice? Were both negative and positive affects allowed? Was “being different” something that was permitted as the child searched for his or her identity? I like to tell patients that they were taught that two and two equals five not four. With such a belief, little Johnny fails every math test, not because of stupidity, but because of faulty information. When a good teacher corrects the misconception, the F’s in math become A’s. Johnny didn’t get smarter, he was helped to discover the truth!

In therapy, we help our patient discover their truth. We assist them in overturning misconceptions and revisiting faulty conclusions all in an atmosphere of tolerance and acceptance. We help them work through their feelings of hurt, shame, anger, and betrayal. We allow for trial and error and experimentation so they can learn the real truth about themselves!

To paraphrase an ancient Chinese philosopher who said, “When you cease being who you think you are, you become free to discover who you truly are.”

Help your patients to find their true self.

Roy Steinhouse, M.D., LFAPA, FCPP

Professor Emeritus

FACULTY SPOTLIGHT: DR. JAHAIRA LOPEZ-PASTRANA



How has the adjustment to working for Temple Health been?

I worked at Temple University a couple of years ago as a post-doctorate research fellow, and it was a great experience. Now I'm back as a clinician because I share Temple's philosophy and mission of working with underserved communities. The adjustment has been somewhat smooth since I'm in a place that allows me to do everything I enjoy in my career. Since my previous experience was in a large university hospital, I'm learning how to navigate and make things work in a community-based hospital. I have found great support from my chairman and colleagues. I thought the most challenging part of the transition would be becoming an attending, but even this has been enjoyable. Working with residents and medical students is gratifying and keeps you updated.

What would you say makes Jeanes Campus an ideal place to practice consultation-liaison (CL) psychiatry?

It is the first Northeast academic center and even if it is a smaller hospital, I have been surprised about the need for psychiatric services. The patients seen are mostly from the Northeast and North Philadelphia areas. CL psychiatry has various subspecialties like transplant psychiatry, addictions, psycho-oncology, integrative psychiatry. The bone marrow transplant (BMT) unit provides plenty of psycho-oncology experience, and we are opening an outpatient service for the BMT patients in the Physician Office Building. I am involved in a research project focused on improving quality of life for patients after bone marrow transplant and hope to implement an integrative approach for managing mood dysregulation to cope with chronic or terminal illness. I can also provide treatment for patients with substance use disorder, especially in Philadelphia where we have an opioid crisis. I am fortunate to be in a place that allows me to move around these subspecialties. My goal is to establish a proactive community-based CL service.

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FACULTY SPOTLIGHT: DR. JAHAIRA LOPEZ-PASTRANA

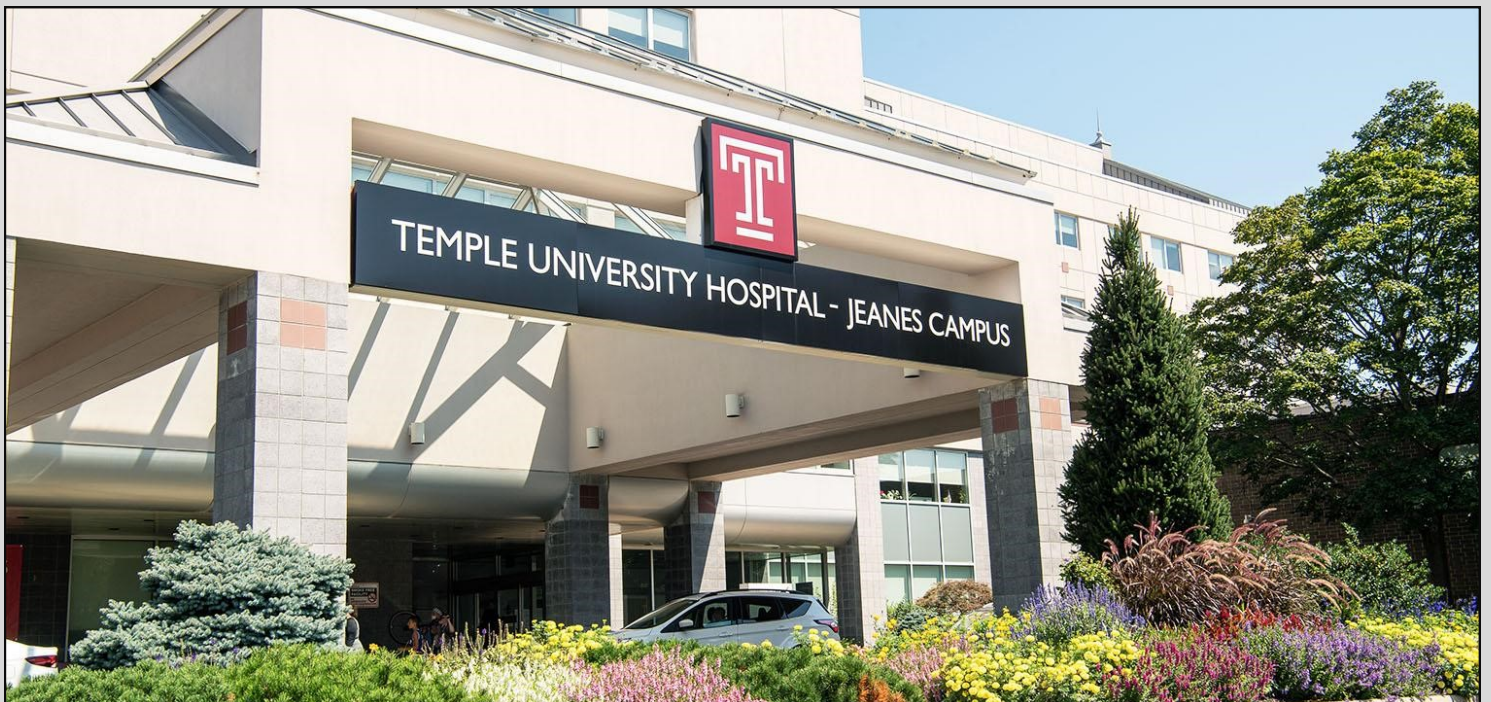
What additional projects are you working on?

At Jeanes Campus, I am involved in psychiatry grand rounds CME once a month to discuss the role of CL psychiatry and approaches in the general hospital setting, case discussions every other month, and a quality improvement project focused on improving the management of opioid use disorder in the hospital using adequate guidelines. Outside of Temple, I am working on my cognitive behavioral therapy recertification with the Beck Institute. I continue to work with my former mentor and PI at Cardiovascular Research Center and am a reviewer for the journal *Frontiers in Cardiovascular Medicine* and a grant reviewer for the American Heart Association. I am Chair of the Wellness Committee of the Society of Ibero Latin American Medical Professionals. Furthermore, I work a limited amount of time at Cognitive Behavioral Services in North Philadelphia, the community clinic I started at when I first came to Philadelphia.

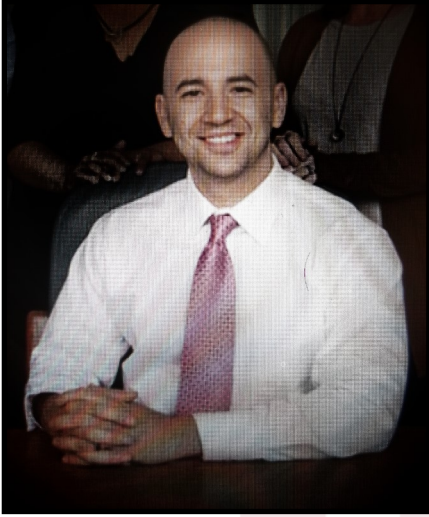
How have your professional goals changed over the years?

I have to be honest, and the answer is not much. I have always wanted to work in an academic institution, serve the community, and continue my research career. Temple has all of this. I am optimistic about achieving the goal of having a proactive community CL service at Jeanes Campus.

Interviewed by Jessica Wang DO



ALUMNI SPOTLIGHT: DR. IAN PETERS



What have you been up to since graduation from Temple's Psychiatry Residency?

I graduated residency in 2017, then I continued my training in Child and Adolescent fellowship at Drexel University. During my fellowship I also worked on the side in the Philadelphia adult prison system, and also some emergency psychiatry through HOPE health, which is basically sort of a "CRC on wheels." I was and am still passionate about the war on drugs and also the prison population! After completing fellowship, I took on my current outpatient job in Colorado Springs, Colorado just about a year and a half ago. I'm really enjoying the job so far; I currently work with a mix of immigrants, Hispanic communities, and many uninsured children.

What are your future professional goals?

Well, I really like working with kids so I think I will keep working with this population. But one thing I would give credit to Dr. Kovach and Dr. Steinhouse for is that they taught me not to become comfortable always prescribing the same medications in the same setting, so I would also consider working for a C&L service in a children's hospital.

How do you think that your experience at TUH has benefitted your career?

For one thing, I grew up privileged so working with the population at Temple really helped prepare me for working with the underserved. Also, rotating with Dr. Kovach, she really encouraged a strong academic foundation. I've tried to stay current and stay diligent about reading, even though now there's not as much oversight. It really becomes ingrained you throughout residency that keeping current is the way to practice medicine. Also, I personally have Dr. Bizamcer to thank for giving me a great third year outpatient experience, she's a big part of why I currently work in outpatient psychiatry.

What are some of the memorable moments from residency?

Aside from some of the wild crisis response center cases? When Dr. Kovach had taken over as PD during my residency, she made some wonderful changes. Some of the changes I remember include designing the different academic tracks, which I thought was really neat. I also reminisce the resident retreats in Atlantic City, where you could get away from the hospital with other residents and have an awesome time.

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ALUMNI SPOTLIGHT: DR. IAN PETERS

Do you have any advice to current Temple residents?

One thing that has really served me well is realizing the importance of academic grounding, to treat learning as a lifelong thing. I think going through medicine with that attitude is very important.

Do you have any fun facts you would like to share about yourself?

I grow crickets for sustenance! They're an excellent source of protein, and very sustainable in terms of carbon footprint, energy requirement, and the amount of water they require. Plus it makes all my vegan friends uncomfortable. I got the idea while I was in Oaxaca for some midwife training years ago. But speaking of food, I really miss all the food spots in Philadelphia, especially Choo Choo (Pho Xe Lua) in Chinatown which was my go-to spot, and also the place where I proposed to my wife.

Interviewed by Yunichel Joo MD



Dr. Peters outpatient practice is currently located in Colorado Springs, Colorado.

STAFF SPOTLIGHT: COLLEEN MCALLISTER



Colleen McAllister is the Senior Administrator of the Department of Psychiatry and Behavioral Science here at Temple University Hospital. In addition, she is also a Senior Administrator in the Department of Pathology and Laboratory Services and the Department of Medical Genetics. Colleen is originally from Virginia and attended Radford University for her undergraduate degree. Later she worked at the Bland Correctional Center helping prisoners integrate back with their family prior to release—all while studying for her Master’s degree in Criminal Psychology at the University of Virginia! She eventually began working for a homebuilder which brought her to New Jersey and from there to Long Beach Island where she worked for the local police department and met her husband. Following this, Colleen relocated to Philadelphia and had her own business for twelve years called Time Managers, which provided services to families and small businesses. Colleen transitioned to working with faculty at the University of Pennsylvania and was

promoted to a position in the Rheumatology Department. She joined the Temple family when one of the physicians she worked for at University of Pennsylvania transferred to Temple and has been with us for fourteen years. Within Temple she has had experience in various departments including Rheumatology, Nephrology, Endocrinology and Operations.

Colleen is at the Episcopal Campus every Tuesday, Friday, and Wednesday afternoons and devotes the rest of her time working either at the Department of Pathology or the Department of Medical Genetics. She describes her role here to include the “overall run of the practice” and she comments that organizations “only run as smoothly as the people working in it.” As a Senior Administrator, Colleen works on the yearly budget, maintains payroll, and oversees the financial operations of the departments. In our Psychiatry Department, she manages the outpatient clinic alongside faculty members, Dr. Bizamcer, Dr. Walters, and Dr. Dietzold.

The most challenging part about her job this past year has been adjusting to the perpetual changes brought on by the COVID-19 pandemic. This year has highlighted the importance of adaptation and Colleen has accepted the challenges and remained flexible in order to adjust to a continuously evolving work environment. She remains vigilant and prepares for future anticipated clinic changes always keeping patient welfare as her primary focus. As for the most rewarding part of her job, she states that “every day is rewarding,” because she truly enjoys all of her roles in each department. Colleen’s contributions to our psychiatry department have been tremendous, especially in the past year as she helped navigate our department through difficult transitions.

Colleen currently resides in Philadelphia with her husband of twenty-eight years. She is one of nine siblings and has a large family with children ranging in ages from eighteen to forty-seven. She has a fifteen year-old grandson and another grandchild on the way. If you don’t find Colleen at work, she is somewhere reading a book (hopefully at the beach) or baking some delicious treats.

Written by Janki Patel MD

RESEARCH SPOTLIGHT: DR. MORRISON

Dr. Morrison, Professor of Psychiatry and Vice Chair for Research, completed both an internal medicine and psychiatry residency at the University of Pennsylvania. She has been involved in and is currently leading several innovative research studies in the field of Psychiatry.



Currently, Dr. Morrison and colleagues are pioneering the development of a drug for cocaine use disorder. The disorder has one of the highest death by overdose incidences in the country, but there are no current medications to treat the illness. As a strong advocate of our patient population, Dr. Morrison discussed the many difficulties our patients encounter with this disorder and she noted the recent use of cocaine mixed with fentanyl derivatives has resulted in significant increases in mortality, particularly in Philadelphia. She explained the dire need for better treatment for our patients is what drives her interest in research and stated, “The great thing about research, it is new knowledge...and if you start digging into your patients’ issues, you realize there is not always as much to offer them as you would like, and there is a lot we don’t know...I like the idea of finding new knowledge...learning from different disciplines...and addressing these problems.”

Her study focuses on clavulanic acid’s potential to decrease cocaine-related responses after participants are exposed to neutral or cocaine-related stimuli. The study focuses on measuring glutamate levels before and after clavulanic acid administration, as well as between doses. High glutamate levels are linked to addictive responses in the brain; drugs that regulate glutamate uptake have also been associated with a decrease in cravings and relapse propensity. Preclinical studies previously showed a positive relationship between glutamate uptake in astrocytes, and clavulanic acid. Dr. Morrison explained that glutamate may be targeted by clavulanic acid, facilitating its excretion from the synapse and its return into glial cells. Clavulanic acid is a beta-lactamase inhibitor and a component of the antibiotic Augmentin, used to treat different bacterial infections and safe in pregnancy. Dr. Morrison is working alongside Dr. Khalid, a postdoctoral fellow in her lab, exploring the use of magnetic resonance spectroscopy (MRS) to study the brains of patients with cocaine use disorder taking clavulanic acid in order to assess its efficacy in diminishing cravings and aiding abstinence from cocaine. Thus far, their MRS imaging has pointed to resting state functional connectivity in the nucleus accumbens, which may be involved in the reward circuit that has been linked to cocaine addiction.

-CONTINUED ON PAGE 11-

RESEARCH SPOTLIGHT: DR. MORRISON

In addition to the extensive and ongoing research involving clavulanic acid, Dr. Morrison is also involved in an outpatient study, researching antipsychotics-associated weight gain in Schizophrenia and Bipolar disorder. Specifically, Dr. Morrison is working closely with Dr. Walters to study a drug called Miricorilant that works through a mechanism associated with the hypothalamus pituitary adrenal axis. Aside from being involved in ground breaking research, Dr. Morrison is also helping with several scholarly projects alongside our residents. Recently, she has been involved in a Transcranial Magnetic Stimulation (TMS) scholarly project with a number of residents.

Dr. Morrison is a firm believer that research generally offers many opportunities not only to our patient population but also to the residency program as a means for furthering our educational foundation. She states that with research, “Everyone will come out of this residency being more scholarly. Learning to take a research view point in whatever you do in your career is really important.”, and she urged residents “...don’t be afraid to test the research waters during residency.”

Written by Marianela Rosales MD



SPOTLIGHT: MEDICAL STUDENT EDUCATION DURING COVID-19

When the COVID-19 pandemic first started to take off last year, hospital operations were put into unprecedented situations across the country and likewise medical school education was disrupted. For the psychiatry department at Temple, some of its most pressing challenges included the protection of its patients, staff, and students as the world learned more about COVID-19. As the virus could be spread even when an individual was asymptomatic, the implications of routine clerkship interactions could have had unintended consequences for patients and students alike, especially during the initial stages when viral testing was limited across the country.

As we quickly learned that social distancing is one of the most effective strategies toward fighting this virus, Temple acted swiftly to implement distancing measures into routine practice. During the early stages of the pandemic in February and March, students on their third-year clerkships were moved toward a more virtual educational experience in order to assess how to safely allow student involvement without compromising patients at risk. It was important to protect student safety with measures such as securing adequate personal protective equipment (PPE) for all and minimizing exposure to higher risk settings where one may be exposed to patients with suspected COVID. Didactics and educator-driven experiences were quickly moved to virtual platforms such as Zoom and students were provided with various supplemental online module coursework. Recognizing the importance of authentic patient and clinical experiences, the department strove for as much medical student interaction as possible and we began to see more learners conduct psychiatric interviews virtually through telehealth mediums.

By May 2020 it became safer for students to return to more in-person clerkship education and gradually re-enter the clinical environment. There were multiple changes to continually encourage social distancing. For example, clinical duties or tasks such as note-writing could be performed virtually and thus once students were finished rounding on inpatient teams, they were dismissed to finish clinical responsibilities online. Students were encouraged to continue social distancing during meals and to minimize unnecessary time spent at nursing stations or other areas where social distancing would be more difficult. Afternoons often involved attending teaching for medical students and this was often done virtually. The department made it a priority to schedule frequent meetings to cultivate team building, clinical immersion, and to support social interconnectedness in order to ensure students did not experience a decrease in facetime with their residents and attending preceptors.

Over the course of this past year, Temple's Psychiatry Department responded to spikes in COVID-19 with greater experience and wisdom compared to the initial uncertainty of the pandemic. While there has been a greater return to pre-COVID clerkship education, especially as students began receiving vaccinations, mindful social distancing, use of essential PPE, and virtual learning activities remain integrated into the student experience. As we all strive for a return to normalcy, Temple's Psychiatry Department continues to adapt to ever-changing advancements in medical education while keeping the quality of the student experience in focus.

Written by Matthew Lu MD

TEMPLE PSYCHIATRY MATCH LIST: CLASS OF 2025



Sarah Hmada, MD
Lewis Katz School of
Medicine at Temple
University



Eric Lee, MD
McGovern Medical
School at the University
of Texas Health Science
Center at Houston



Nicholas Schmidt, MD
Drexel University College
of Medicine



**Kittaporn "Gift"
Jonglertjanya, DO**
Midwestern University
Arizona College of
Osteopathic Medicine



Pratheek Mangini, MD
Rutgers Robert Wood
Johnson Medical School-
Piscataway



Robert Simons, MD
Central Michigan Uni-
versity College of Medi-
cine



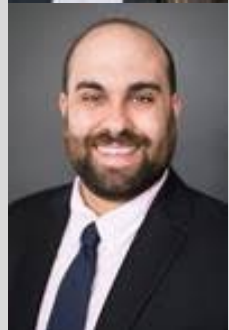
Priyanka Kolli, MD
Albany Medical College



Vanessa Martinez, MD
University of Texas Medi-
cal Branch School of
Medicine



Samuel Rosenblatt, MD
State University of New
York Upstate Medical
University



Kevin Kurack, MD
Virginia Commonwealth
University School of
Medicine



Elsa Stoff, MD
Cooper Medical School of
Rowan University



Qianyu Wang, MD
University of Oklahoma
College of Medicine at
Oklahoma City

FACULTY AND RESIDENT ACCOMPLISHMENTS

- ◇ **Dr. Faden** published an article in *Therapeutic Advances in Psychopharmacology*: “Intravenous brexanolone for postpartum depression: what it is, how well does it work, and will it be used?”
- ◇ **Dr. Kovach** published a book chapter in the *Handbook of Psychiatric Education, 2nd Ed*: “Residency Recruitment and Student Advising” and article in *Academic Psychiatry* “International Medical Graduate Resident Physicians in Psychiatry: Decreasing Numbers, Geographic Variation, Community Correlations, and Implications.”
- ◇ **Dr. Musselman** published an article in the *Journal of the American Academy of Psychiatry and the Law* titled “Feigned Incompetency and Sentence Enhancement.”
- ◇ **Alison Liss (PGY1)** published an article in *Transgender Health* titled “Comparing Electronic Health Record Domains’ Utility to Identify Transgender Patients.”
- ◇ **Ryan Serdenes (PGY-2)** and **Dr. Graham** published a paper in *Frontiers in Psychiatry* titled “Evaluating the Psychiatric Benefits of Formulating Acetaminophen With N-Acetylcysteine”
- ◇ **Ryan Serdenes (PGY-2), Jacob Weiss (PGY2), Uchechukwu Madtha (PGY4), Dr. Lopez-Pastrana, and Dr. Mary Morrison’s** research poster “Association Between COPD Symptom Severity, Exacerbation Risk, and Depression and Anxiety Symptoms in the SPIROMICS Cohort,” was accepted and will be presented at the APA.
- ◇ **Holly Betterly’s (PGY-2)** submission, “Improving Sexual Safety in Inpatient Psychiatric Facilities,” was selected as a session for the APA 2021 On Demand product and will be presented at the APA virtual annual meeting with a live question and answer session. She will be presenting along with **Divya Patel (PGY2), Jamie Karasin (PGY2), and Dr. Musselman.**
- ◇ A poster by **Dr. Faden** and **PGY-3’s Becky Anthony, Meera Chatterjee, Miyuki Fukui, and Shaun Plotnick** submitted to the Association for Academic Psychiatry regarding incorporating Choose Your Own Adventure into interactive resident didactics was chosen as a “Highlight Poster” for the conference.
- ◇ **Jessica Wang (PGY4)** published a paper “Stewart Paton: Mental hygienist and father of college psychiatry” in the *American Journal of Psychiatry Resident’s Journal* and also has a poster accepted to the American Psychiatric Association Annual Meeting Online titled “Exposure and response prevention therapy in the age of COVID-19. “



*Collected by
Rebecca Anthony, MD*

FELLOWSHIP PLACEMENTS

Kalvin Foo, MD – Addiction Psychiatry,
University of Pennsylvania



Michael Stein, DO – Child and Adolescent
Psychiatry, Mount Sinai



Thomas Knightly, MD – Interventional
Psychiatry, Stanford University



Uchechukwu Madtha, DO – Consultation-
Liaison Psychiatry, University of Pennsylvania



Sarah Miller, MD – Child and Adolescent
Psychiatry, DC Children's Hospital



Maureen Waweru, MD – Public Psychiatry,
University of Pennsylvania



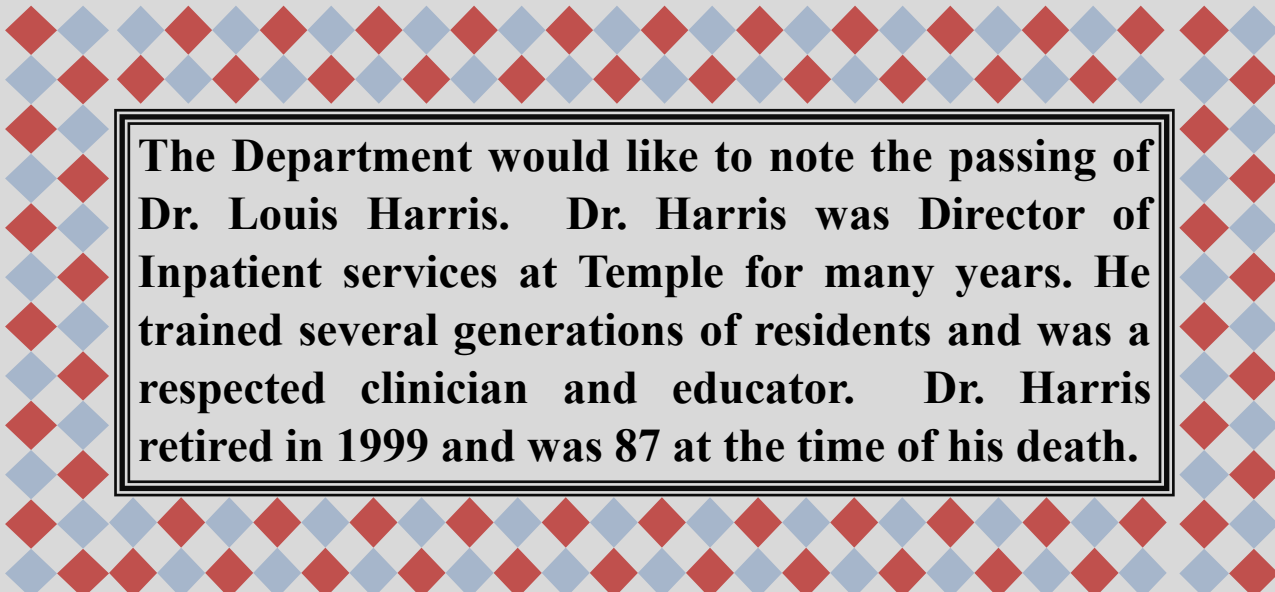
Michael Pelekanos, MD – Sleep Medicine,
Stanford University



RESIDENCY IN PHOTOGRAPHS



PASSING OF DR. LOUIS HARRIS



The Department would like to note the passing of Dr. Louis Harris. Dr. Harris was Director of Inpatient services at Temple for many years. He trained several generations of residents and was a respected clinician and educator. Dr. Harris retired in 1999 and was 87 at the time of his death.

NEWSLETTER STAFF 2020-2021

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