Postdoctoral Fellowship in Aging and Dementia

APA-accredited: YES ☒ NO ___

Site: Rhode Island Hospital

Supervisor(s): Geoffrey Tremont, PhD, ABPP-CN (Primary Supervisor)
Brian R. Ott, MD (Co-Primary Supervisor)
Jennifer Davis, PhD, ABPP-CN
Seth Margolis, PhD

Description of Site
Rhode Island Hospital (RIH) is a private, 719-bed, not-for-profit, acute care hospital and academic medical center founded in 1863. It is the largest of the state's general acute care hospitals, providing comprehensive health services, and serving as a primary teaching hospital for Brown Medical School. RIH is the largest trauma center in the region and has extensive neurology, neurosurgery, and psychiatry departments. The Alzheimer’s Disease and Memory Disorders Center (ADMDC) at Rhode Island Hospital is a tertiary referral center for southern New England that provides state-of-the-art diagnostic and treatment services as well as cutting edge research programs and facilities for people with Alzheimer’s disease and related cognitive disorders. The Center is interdisciplinary with clinical and research faculty from the Departments of Neurology and Psychiatry and Human Behavior. The ADMDC’s tri-fold mission in research is to 1) provide educational opportunities and training for future researchers in aging and dementia in both basic laboratory science and clinical neuroscience; 2) contribute to the advancement of translational research that will someday lead to effective therapies for prevention as well as management of Alzheimer’s disease and related disorders; and 3) provide our patients and the larger community of family members of people with Alzheimer’s disease with access to the latest and most promising experimental therapies available in clinical trials.

The RIH Neuropsychology Program includes a very active inpatient neuropsychological consultation service and a busy outpatient program. Inpatient referrals come from all medical and surgical specialties across the medical center, with referral questions including issues of competence, differential diagnosis, rehabilitation, and disposition. The outpatient program receives referrals predominantly from internists and neurologists, with questions of differential diagnosis and treatment planning for a wide range of patients, including those with dementia, stroke, TBI, multiple sclerosis, brain tumor, and neuropsychiatric disorders. A major focus of the evaluation process is the follow-up, feedback appointment, at which time the patient and family/caregivers are provided with both written and oral summaries of the examination, along with detailed recommendations.

This fellowship is a multidisciplinary, GME-approved fellowship at Rhode Island Hospital directed by Drs. Ott and Tremont. The fellowship allows for two trainees per year in neurology, geriatric medicine, or neuropsychology. Neuropsychology trainees will be coordinated through the Brown Clinical Psychology Training Consortium and will have the following training plan:
Fellowship Aims

1. To provide the fellow with broad post-doctoral training in hospital-based adult clinical neuropsychology.

2. To provide the fellow with post-doctoral training in the diagnosis and treatment of Alzheimer’s disease and related dementias.

3. To provide the fellow with a strong working knowledge of clinical trial design and management as well as translational research in aging and dementia.

4. To provide the fellow with opportunities for independent research and collaboration with basic science colleagues in preparation for a research career in dementia and aging

Fellowship Timeline
The duration of the fellowship is 2 years, contingent upon satisfactory progress. The anticipated start date is July-September. Consistent with Training Committee policy, the fellow and the mentor will notify each other in December about an offer for a second year.

Research Activity Plan
The fellow will spend 40% time conducting clinical research in aging and dementia. Activities will include:

- Clinical Trials activities (15% time):
  a. The fellow will be required to participate in weekly research meetings conducted at the ADMDC.
  b. The fellow will participate in participant recruitment and community outreach activities in the ADMDC, including presentations to community groups and agencies.
  c. The fellow will assist with IRB submissions and management of regulatory documents for ongoing clinical trials.

- Independent Research (25% time)
  o Review of Alzheimer’s disease and related disorders literature: The fellow will be provided with a series of readings in aging and dementia.
  o Translational Research: The fellow will collaborate with translational research programs based on his/her interests. The following opportunities will be available: 1) Epidemiology and Public Health; 2) Cognitive Neuroscience; 3) Neuropathology laboratory research in neurodegeneration.
  o Grant writing: The fellow will be encouraged to develop a grant idea and submit a grant proposal by the end of the fellowship term.
  o Manuscript preparation and submission: The fellow will be encouraged to collaborate on manuscript preparation and poster submissions at national conferences. Individually tailored goals will be established in this area.

Clinical Activity Plan (50%)
The fellow will be trained and prepared to function independently in clinical neuropsychology through exposure to a wide variety of commonly-encountered adult and geriatric clinical populations with neurological brain disorders and psychiatric conditions. Supervision will focus on ensuring that the fellow has achieved excellent skills in clinical interviewing, test administration, scoring and analysis of test data, integration of assessment results (including neuroimaging and other general medical work-up), differential diagnosis, report writing, treatment planning and intervention. There will be a focus on
developing professional skills in interacting with other disciplines and professionals and ensuring strong
general clinical skills. Training needs will vary depending on the clinical strengths and weaknesses the
trainee brings to the fellowship. Approximately 12 hours per week will be spent in direct clinical contact
with patients or clinical trial participants, while 8 hours will be spent working on report data analysis,
report writing, and related clinical skills.

In order to ensure that the fellow receives a high level of clinical training in the area of clinical
neuropsychology the following activities will be required during the fellowship:

- The fellow will regularly conduct outpatient neuropsychological evaluations.
- The fellow will conduct inpatient neuropsychological consultations throughout the medical center.
- The fellow will participate in neuropsychological feedback sessions, reviewing test results with
  patients and their families.
- The fellow will conduct assessments and clinical interview ratings of cognitive and/or functional
  status (e.g., Clinical Dementia Rating Scale) for ongoing clinical trials in the Rhode Island Hospital
  ADMDC.
- The fellow will be required to attend and regularly present at Alzheimer’s and Memory Disorders
  Center Consensus Conference
- The fellow will have the option to attend the Comprehensive Epilepsy Program Case Conference.
  There will also be opportunity to attend a Comprehensive Movement Disorders Case Conference.

Path toward licensure: YES

**Didactics (10%)**

Postdoctoral Seminars: The fellow will have the option of attending Academic Fridays. First year fellows
will participate in the following post-doctoral seminars through the Postdoctoral Fellowship Training
Program:

- Core Seminars (1 per month)
- Clinical Ethics – if intending to sit for licensure (1 per month)
- Brown Neuropsychology Track Seminars (1 per week) for fellows who were not Brown
  Residents

All fellows will attend:

- DPHB Academic Grand Rounds (1 per month)
- Brown Neuropsychology Rounds (1 per week)
- Aging and Dementia Research seminar (1 per month)
- Brown Neurology Grand Rounds (1 per week)

**Supervision and Evaluation**

Research supervision will be provided in the form of weekly individual supervision (Drs. Tremont and
Ott). Clinical supervision will be provided in the form of weekly individual supervision (Drs. Davis,
Margolis, and Tremont). At a minimum, a full time fellow will receive four hours of structured learning
activities per week. Every 6 months for the duration of the fellowship, the fellow and the supervisors will
provide formal evaluations, and evaluations of the program relative to the goals and learning objectives of
the fellowship.

**Resource Requirements**

Fellow will be provided with the following resources:

- Access to space to complete clinical and research responsibilities
- A computer and project specific software
- Internet access
- Telephone
- For CPP and CNSP fellows, individual office space is provided
- Travel funds of $1000 per year

**Reporting and approval**

This fellowship will be part of the Neuropsychology track. The position has been discussed and approved by the Neuropsychology track faculty in their monthly meeting of xx/xx/xx.

Director, Clinical Neuropsychology Specialty Program

Associate Director, Clinical Neuropsychology Specialty Program

Director, Postdoctoral Fellowship Training Program