

PRE-MEETING FOR THE 46TH ANNUAL MEETING OF
THE AMERICAN ASSOCIATION OF DIRECTORS OF PSYCHIATRIC RESIDENCY TRAINING



21ST
CENTURY | **LEARNERS**
TECHNOLOGY
NEUROSCIENCE

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The National Neuroscience Curriculum Initiative (NNCI) is an NIH-funded (R25 MH101076-02S1 and R25 MH086466-07S1) collaboration between educators and neuroscientists to create shared resources for effectively teaching neuroscience to psychiatry trainees and to provide faculty training on how to implement them. Funding for this conference was also made possible, in part, by additional grant support from the National Institute of Mental Health (R13 MH074298). The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention by trade names, commercial practices or organizations imply endorsement by the U.S. Government.

OVERVIEW

PRACTICE GAP

Over the past two decades, advances in neuroscience have dramatically enhanced our understanding of the brain and of the neurobiological basis of psychiatric illness. Yet teaching neuroscience remains fraught with challenges: the field is vast and constantly evolving; many programs lack access to faculty with content expertise; and the clinical relevance is not always clear. At the same time, the way we approach teaching and learning is itself experiencing a paradigm shift. New technological advances and insights from the literature on adult learning theory are ushering in a new era in education. Lecture halls are vacant, textbooks are passé, and Google is the go-to resource. Emerging data confirm what we instinctively understand: the fundamental way in which learners engage with content is also changing. The National Neuroscience Curriculum Initiative (NNCI) was established to help improve neuroscience teaching in psychiatry through the development and dissemination of resources that are based on principles of adult learning. In the past three years, we have introduced a range of teaching resources designed for self-study, classroom exercises, and clinical settings. The goal of this year's meeting will be to explore how we can build on previous approaches and leverage 21st century technology in order to engage modern learners with cutting edge neuroscience content.

EDUCATIONAL OBJECTIVES

As presented last year, this year's BRAIN Conference will continue to focus on strategies to teach neuroscience and incorporate a modern neuroscience perspective into clinical care. This conference will include a series of morning and afternoon workshops designed to:

1. Empower faculty with or without a neuroscience background to feel confident that they can teach neuroscience effectively;
2. Engage conference attendees to participate as both student and instructor using new and innovative teaching methods;
3. Provide programs with resources for how they might address, teach, and assess neuroscience-specific milestones (see Table 1).

Through large and small group activities, attendees will receive training in various new and creative approaches to teaching neuroscience through technology (both old and new), on-line resources, and "flipped classroom" exercises.

INTENDED AUDIENCE

Medical educators with little or no neuroscience background, neuroscientists engaged in medical education, students and residents.

WORKSHOPS

As in the past, the day will be structured around several small group workshops. Each workshop at the 2017 BRAIN Conference is intended to demonstrate potential activities and resources for teaching neuroscience. All of the teaching materials will be posted on the NNCI website (at www.NNCIonline.org).

Note that these workshops are not intended to represent a "model curriculum" but rather a prototype of potential teaching activities to engage residents in learning neuroscience. We have kept the size of each group relatively small with fewer than 30 participants and have limited most of them to 30-75 minutes in order to approximate the experience of doing these modules with a cohort of residents during scheduled class time. We have deliberately focused each workshop on a different neuroscience topic in order to demonstrate the broad applicability of these approaches. In addition, we have asked faculty from diverse backgrounds to help facilitate these workshops in order to highlight the fact that effective teachers do not need to be expert neuroscientists. Essential ingredients for a successful experience include: faculty enthusiasm for the topic, clear learning objectives, and active teaching techniques built around readily available resources. After each workshop we have built in a 15 minute period for participants to reflect on the exercise and to process as a group what it might be like to implement each approach in their own programs.

TABLE 1. MK3. CLINICAL NEUROSCIENCE MILESTONES

NEURODIAGNOSTIC TESTING	
Level 1	Knows commonly available neuroimaging and neurophysiologic diagnostic modalities and how to order them
Level 2	Knows indications for structural neuroimaging (cranial computed tomography [CT] and magnetic resonance imaging [MRI]) and neurophysiological testing (electroencephalography [EEG], evoked potentials, sleep studies)
Level 3	Recognizes the significance of abnormal findings in routine neurodiagnostic test reports in psychiatric patients
Level 4	Explains the significance of routine neuroimaging, neurophysiological, and neuropsychological testing abnormalities to patients. Knows clinical indications and limitations of functional neuroimaging.
Level 5	Integrates recent neurodiagnostic research into understanding of psychopathology
NEUROPSYCHOLOGICAL TESTING	
Level 1	Knows how to order neuropsychological testing
Level 2	Describes common neuropsychological tests and their indications
Level 3	Knows indications for specific neuropsychological tests and understands meaning of common abnormal findings
Level 5	Flexibly applies knowledge of neuropsychological findings to the differential diagnoses of complex patients
NEUROPSYCHIATRIC CO-MORBIDITY	
Level 2	Describes psychiatric disorders co-morbid with common neurologic disorders and neurological disorders frequently seen in psychiatric patients
Level 4	Describes psychiatric comorbidities of less common neurologic disorders and less common neurologic comorbidities of psychiatric disorders
NEUROBIOLOGY	
Level 3	Describes neurobiological and genetic hypotheses of common psychiatric disorders and their limitations
Level 4	Explains neurobiological hypotheses and genetic risks of common psychiatric disorders to patients
Level 5	Explains neurobiological hypotheses and genetic risks of less common psychiatric disorders to patients. Integrates knowledge of neurobiology into advocacy for psychiatric patient care and stigma reduction
APPLIED NEUROSCIENCE	
Level 2	Identifies the brain areas thought to be important in social and emotional behavior (Areas might include dorsolateral prefrontal cortex, anterior cingulate, amygdala, hippocampus, etc.)
Level 4	Demonstrates sufficient knowledge to incorporate leading neuroscientific hypotheses of emotions and social behaviors into case formulation. (Social behaviors might include attachment, empathy, attraction, reward/addiction, aggression, appetites, etc.)

PROGRAM ASSESSMENT

Throughout the day we will ask you to provide feedback immediately after each workshop at:

<http://tinyurl.com/brain2017-survey>

These surveys should take fewer than 5 minutes to complete. At the end of this year's BRAIN Conference we will ask you to complete an additional survey relevant to the BRAIN Conference Series and in order to obtain CME credit for this event. This brief survey will be part of the annual meeting survey distributed by AADPRT. The results of these surveys will be used to determine the effectiveness of this year's meeting and the BRAIN Conference series in achieving set learning objectives and educational goals.

SCHEDULE

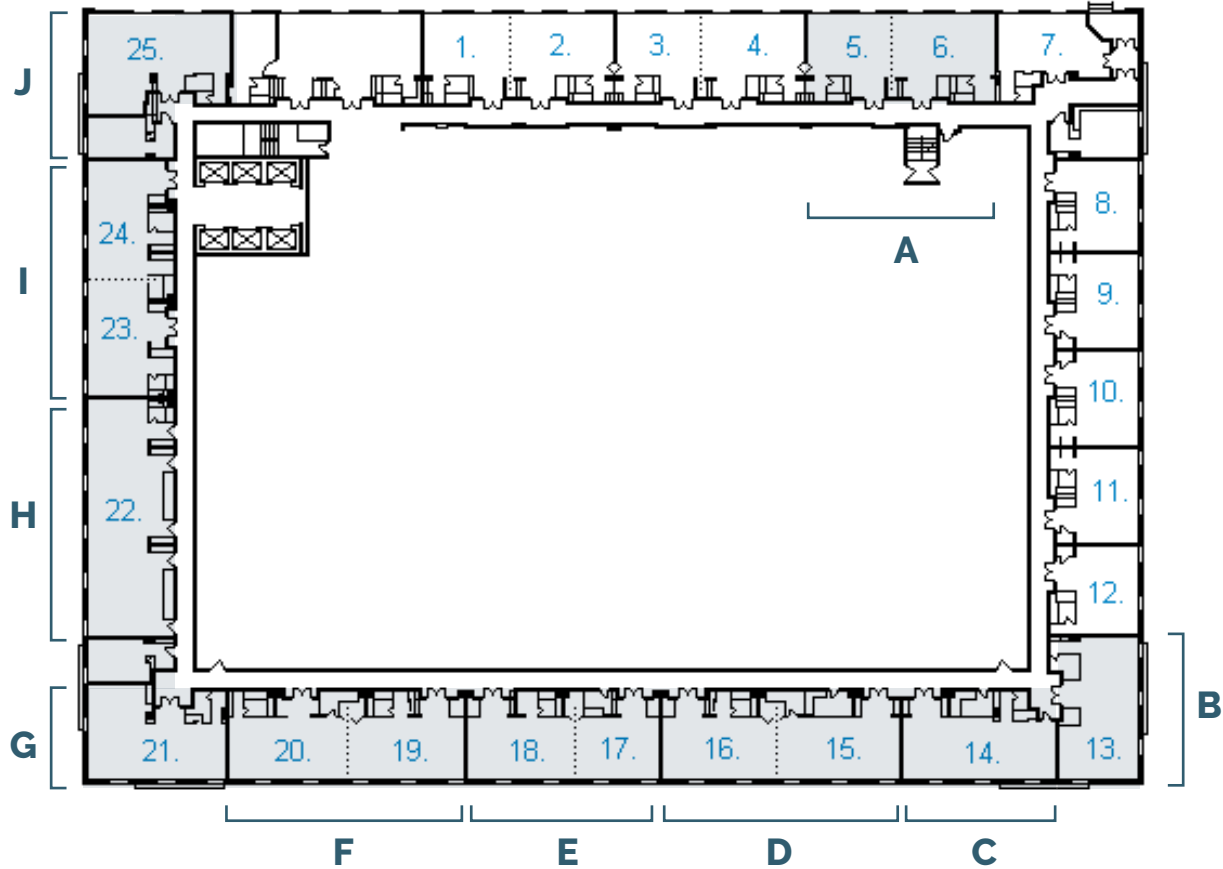
Check-in times for pre-registered attendees are on Tuesday, March 7th from 4:00pm - 6:00pm in room Golden Gate 1 and Wednesday, March 8th from 7:00am - 10:00am in the East Lounge.

WEDNESDAY, MARCH 8, 2017			
7:00AM - 8:00AM	30 minutes	Continental Breakfast	Continental 4/5
8:00AM - 8:30AM	30 minutes	Opening Session & Fellows Award Presentation	Continental 4/5 (Ballroom Level/Tower 3)
8:30AM - 8:45AM	15 minutes	Coffee Break	Transition to assigned breakout rooms*
8:45AM - 10:15AM	90 minutes	Workshop Session #1	Union Square Meeting Rooms (4th Floor/Tower 3) (see next page for map)
10:15AM - 10:30AM	15 minutes	Coffee Break	Union Square Hallway
10:30AM - 12:00PM	90 minutes	Workshop Session #2	Union Square Meeting Rooms (4th Floor/Tower 3)
12:00PM - 1:00PM	1 hour	Lunch	Golden Gate 2-5 & Foyer
1:00PM - 2:30PM	90 minutes	Workshop Session #3	Union Square Meeting Rooms (4th Floor/Tower 3)
2:30PM - 2:45PM	15 minutes	Coffee Break	Union Square Hallway
2:45PM - 4:15PM	90 minutes	Workshop Session #4	Union Square Meeting Rooms (4th Floor/Tower 3)
4:15PM - 4:45PM	30 minutes	Closing Session	Union Square Meeting Rooms (4th Floor/Tower 3)

*Participants will receive their group and room assignments when they arrive at the meeting.

ROOM LOCATIONS

HILTON SAN FRANCISCO - FOURTH FLOOR UNION SQUARE ROOMS



BREAKOUT GROUPS

GROUP	A	B	C	D	E
UNION SQUARE ROOM	5/6	13	14	15/16	17/18
MODERATOR	JOAN ANZIA	ANTHONY ROSTAIN	ADRIENNE BENTMAN	JANE EISEN	DEBORAH COWLEY
FACILITATOR	ELIZABETH BURCH*	SUSAN CONROY*	RANDON WELTON	MAYADA AKIL	ERICK HUNG
FACILITATOR	MICHAEL JIBSON	CHANDLEE DICKEY	ERICA BALLER*	SOURAV SENGUPTA	JOSEPH COOPER
FACILITATOR	ASHER SIMON	LISA CATAPANO	MELISSA ARBUCKLE		

GROUP	F	G	H	I	J
UNION SQUARE ROOM	19/20	21	22	23/24	25
MODERATOR	SANDRA DEJONG	ROBERT BOLAND	DONNA SUDAK	SALLIE DECOLIA	MARSHALL FORSTEIN
FACILITATOR	MATTHEW HIRSCHTRIT*	JOYCE CHUNG	SHASHANK JOSHI	SANJAI RAO	DAVID ROSS
FACILITATOR	MICHAEL TRAVIS	SIDNEY ZISOOK	ASHLEY WALKER	HANNA STEVENS	KRISTIN CADENHEAD

*NNCI Scholars

MODERATORS / FACILITATORS

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Washington, DC

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Tulsa, OK

Randon Welton, MD

Boonshoft School of Medicine, Wright State University
Dayton, OH

Sidney Zisook, MD

University of California, San Diego
San Diego, CA

NNCI SCHOLARS

Four residents were selected as NNCI Scholars and were invited to attend this year's BRAIN Conference. Scholars were selected based on research and scholarly accomplishments, interest and experience in teaching, and potential as future academic psychiatrists. Please join us in congratulating this year's awardees:

Erica Baller, MD

Perelman School of Medicine at
the University of Pennsylvania
Philadelphia, PA

Susan Conroy, MD, PhD

Indiana University School of Medicine
Indianapolis, IN

Elizabeth Burch, DO

The Institute of Living / Hartford Hospital
Hartford, CT

Matthew Hirschtritt, MD, MPH

University of California, San Francisco
San Francisco, CA

BRAIN 2017 & THE NATIONAL NEUROSCIENCE CURRICULUM INITIATIVE

The idea for the National Neuroscience Curriculum Initiative (NNCI) emerged as an extension of the 2014 BRAIN Conference. As we began to plan for the conference, we considered the many challenges that psychiatry programs face in trying to teach neuroscience effectively. We recognized that addressing these challenges would require educators and researchers coming together, across institutions, to develop a comprehensive set of shared teaching resources. In addition, these resources needed to be based upon the principles of adult learning and focused on the relevance of neuroscience to the clinical practice of psychiatry. In order to formalize this effort, we developed the NNCI.

Since BRAIN 2014 we have obtained two NIMH grants to support this ongoing effort and the BRAIN Conference. In addition, we have built a website to host a broad collection of shared resources (www.NNCIonline.org), and conducted faculty development and outreach exercises at grand rounds and at major national conferences, including the annual meetings of the American Psychiatric Association (APA), the Association for Academic Psychiatry (AAP), Society of Biological Psychiatry (SoBP), Academy of Psychosomatic Medicine (APM), American Academy of Child and Adolescent Psychiatry (AACAP), and the American College of Neuropsychopharmacology (ACNP). Most importantly, we are thrilled by how much this effort has grown. Since launching the new National Neuroscience Curriculum Initiative (NNCI) website in March 2015, we have had 17,263 users from 130 countries with 153,721 page views.

At the 2017 BRAIN Conference, you will get a taste of many of the new teaching resources we have been working on for the past year. As we continue to grow, we are eager for your input. If you have used NNCI teaching resources, please take a moment to provide us with your feedback. If you have teaching resources or approaches you would like to share, let us know. Suffice it to say: we are very excited about the year ahead and hope that you will contribute to the effort!

David Ross, MD, PhD
Melissa Arbuckle, MD, PhD
Michael Travis, MD

Co-Chairs of the Neuroscience Education Committee for AADPRT and the NNCI

ACKNOWLEDGEMENTS

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We are particularly grateful to trainees and faculty members from Columbia University Medical Center, Harlem Hospital Center, Icahn School of Medicine at Mount Sinai, Maimonides Medical Center, Mt. Sinai St. Lukes, New York University School of Medicine, University of Pittsburgh Medical Center, Weill Cornell University, and Yale School of Medicine who participated in focus groups to test run these modules and provide early feedback.

We also want to thank the residents and faculty who directly contributed to the development of the 2017 BRAIN workshops, as well as our many experts who consulted and provided feedback on the core content of our sessions and all of the faculty moderators, facilitators, and NNCI scholars who agreed to run the breakout groups. We couldn't have done this without you!