**Department of Physical Medicine and Rehabilitation**

**Division of Rehabilitation Psychology and Neuropsychology**

**Postdoctoral Training Program in Neuropsychology/Rehabilitation**

**Psychology**

**2021-2023 Program Brochure**

**PEDIATRIC TRACK PROGRAM CODE: 8033**

**ADULT TRACK PROGRAM CODE: 8031**

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**Overview**

Michigan Medicine’s Postdoctoral Fellowship Training Program in Rehabilitation Neuropsychology is based in the Department of Physical Medicine and Rehabilitation [(www.med.umich.edu/pmr),](http://www.med.umich.edu/pmr))

Division of Rehabilitation Psychology-Neuropsychology. Michigan Medicine is nationally known for excellence in clinical services, education and research. The fellowship program provides training opportunities within the University Hospital, Michigan Medicine Chelsea Hospital Rehab Unit, C.S. Mott Children’s Hospital, and ambulatory care clinics.

Fellowship candidates interested in neuropsychology within a rehabilitation context will be best suited to our training program. Our happiest and most successful fellows come to our program with experience in clinical neuropsychology and psychotherapy. Experience within a hospital setting is beneficial, but not necessary.

The primary goal of the training program is to prepare high quality neuropsychologists for leadership roles and independent work in rehabilitation settings or with rehabilitation populations. We offer two tracks, one with a specialization in adults and the other with a specialization in pediatrics. Training opportunities are diverse, and while fellows are expected primarily select either the adult or pediatric track and participate in structured core rotations, training faculty will assist fellows in defining their own career goals and specific areas of interest.

Michigan Medicine’s Neuropsychology/ Rehabilitation Psychology fellowship program is a member

program of the APPCN. As such we participate in the match and adhere to the procedures and the training guidelines endorsed by the APPCN. As a member program of the APPCN, our fellowship is committed to offering the highest quality, competency-based residency training in clinical neuropsychology with an emphasis on preparation for future specialty board certification though the [American Board of Professional Psychology/American Board of Clinical Neuropsychology (ABPP/ABCN).](http://www.theabcn.org/)

The postdoctoral fellowship is designed as a two-year training program. The structure of our fellowship allows trainees to obtain a diversity of skills over the course of the first training year, and to apply and refine these skills with more independence during the second year. Two years of focused clinical work in neuropsychology are required in order to provide adequate preparation for board certification in clinical neuropsychology and, for pediatric specialists, the pediatric sub-specialty board certification. The adult fellowship is also designed to help prepare fellows for board certification in rehabilitation psychology. Fellows in the pediatric program who plan to pursue board certification in rehabilitation psychology may find it necessary to seek additional targeted training experiences after their fellowship program in order to complete full criteria for board certification in rehabilitation psychology, depending on their exposure and experiences in rehabilitation psychology prior to postdoctoral fellowship.

Fellows can expect that they will spend 45-55 hours per week on tasks related to our program. Sample schedules for pediatric and adult track trainees are available upon request.

# Didactic Training

Clinical postdoctoral fellows will be required to attend two primary didactic seminars per week, as well as case conferences:

The Neuropsychology Core Seminar, which provides a wide variety of lectures covering content areas of neurological disorders, neuropsychological assessment, neuropsychology of behavior, functional neuroanatomy, and related assessment, multicultural issues in neuropsychology, intervention and psychological considerations.

The Rehabilitation Psychology Core Seminar, which provides advanced training in rehabilitation psychology topics covering core medical issues frequently encountered by rehabilitation psychologists as well as environmental and psychosocial factors influencing disability and adjustment to disability. Topics also reflect the important roles of interdisciplinary consultation, advocacy, consumer protection, and multicultural issues in rehabilitation psychology.

Case Conferences, which typically are conducted every other week, include a variety of adult- and pediatric-focused cases formatted as informal case presentations or fact-finding exercises.

Fellows may also be required to attend hospital based trainings and journal clubs that provide further instruction and in-depth training in related topics including functional neuroanatomy, neuroimaging and other neurodiagnostic techniques, and lectures related to the etiology, pathophysiology, treatment and outcome of neurological disorders.

# Rounds Expectations

All fellows attend chart rounds appropriate for their service and case-load. Chart rounds are typically held once weekly with the multidisciplinary staff of the inpatient rehabilitation unit. Fellows will have the opportunity to work closely with other rehabilitation disciplines and to participate in important treatment and discharge planning decision making.

# Research Participation

Fellows are primarily funded through the PM&R department. Pediatric fellows and some adult fellows are also partially funded through research grants. Fellows will work closely with their mentors to determine a reasonable research goal given the time demands of their clinical training; this experience will vary based on the background and clinical demands of each individual fellow but aims for all fellows to prepare at least one publication or conference presentation during their two-year fellowship. Research participation may include working on existing faculty projects or, for well-prepared fellows, developing an independent research project.

# Professional Development

Fellows work with their training director and faculty mentors to develop competencies in organization, management and administrative practices that they will need to be fully independent and leaders in their future careers. Fellows will also receive mentorship and didactics related to searching for and obtaining a job.

Second year fellows may have the opportunity to participate in supervision of practicum students or first year fellows to develop supervisory and teaching skills.

**Diversity, Equity, and Inclusion**

Diversity, equity, and inclusion (DEI) are essential components of our division’s clinical, research, and teaching missions. We endeavor to identify and change unjust institutional, cultural and educational systems and to address racial and other disparities within our division and profession. Our fellows are a critical part of these efforts and will receive supervision and didactic instruction in DEI, anti-racism, and multicultural psychology. Participation in the division DEI task force is also optional.

## Stipend and Benefits

Fellows are offered a competitive stipend with a very attractive benefits package, including professional development funds. Health care benefits are included and fellows have access to a number of campus services as a member of the University of Michigan community including world class libraries, free statistics consulting, and lectures and cultural events.

**A note about COVID-19**

We have made multiple modifications to our clinical, training, and research practices in light of COVID-19. The opportunities described below reflect what is typically offered to our trainees and may vary based on current guidelines related to the pandemic. We understand that this is a uniquely stressful time for trainees, and welcome applicants to ask any questions they may have about our COVID-19 procedures.

# Pediatric Track

Fellows on the pediatric track will conduct major rotations providing neuropsychological assessment, consultation, and intervention services on the inpatient rehabilitation unit as well as neuropsychological assessment in outpatient neuropsychology clinics. Fellows are also expected to become comfortable with the competencies needed in order to provide high quality care within a rehabilitation setting. As such, fellows will develop an expertise in the complex interplay between neuropsychological functioning and coping in the context of physical disability, neurological injury, and/ or chronic health conditions. Our most successful fellows have been those who are comfortable not only with neuropsychological assessment, but also with general psychological principles and who have competency in basic psychotherapy skills.

## Pediatric Track Structure

While modifications to the structure of the training program are sometimes necessary due to fellow specialization, patient demand, or clinical needs, we aim to provide the opportunities outlined below.

Fellows have two primary rotations—inpatient rehabilitation and outpatient neuropsychology:

Inpatient Placement. The first core placement includes an inpatient training experience at the C.S. Mott Children’s Hospital, primarily on the pediatric rehabilitation care unit. Fellows also provide consultation to other services (such as Hematology/Oncology/Bone Marrow Transplant, Cardiology, and Pediatric Intensive Care Unit), primarily when neuropsychological assessment is required. Fellows on this rotation will provide psychological support to patients and their families presenting with a wide variety of neurological and acquired conditions including traumatic brain injury, spinal cord injury, orthopedic injuries, demyelinating conditions, and to patients who require long-term mechanical ventilation or have other causes for deconditioning. Postdoctoral fellows frequently are called upon to evaluate neuropsychological status, design treatment interventions for neuropsychologically complex patients who have behavioral and/or psychological treatment needs, and to provide psychoeducation and therapeutic support to families. Fellows on the inpatient rotation also complete one outpatient neuropsychological assessment per week to continue to develop and maintain assessment skills.

Outpatient Placement.The second core placement is in the outpatient neuropsychology clinic. Fellows on this rotation complete 2 outpatient neuropsychological evaluations per week with medically complex and neurodevelopmental populations including those with history of traumatic brain injury, epilepsy, autoimmune disorders, late effects of cancer, complex genetic conditions, craniofacial-cleft conditions, developmental delays, prematurity, CP, attention-deficit/hyperactivity disorder, learning disorders, and a number of rarer conditions. Additionally, outpatient fellows participate in our early childhood assessment clinic, which provides experiences in developmental and neuropsychological assessment with infants and young children who have complex medical and neurodevelopmental conditions.

Additional Consultation and Assessment Experiences*.* Fellows will also complete several minor training experiences. Fellows will rotate through the multidisciplinary craniofacial anomalies clinic where we provide neuropsychological/psychological assessment in a brief consultation model. Outpatient testing experiences are available through specialty clinics focused on structured assessment and coordinated care for neonatal follow-up and concussion/mild TBI. Another unique training opportunity associated with this track includes instruction in the use of assistive technology to increase accessibility to neuropsychological assessment in children with severe motor and speech impairments through the Adapted Cognitive Assessment Clinic.

Intervention/Therapy Experiences*.* The majority of psychotherapy/intervention work occurs within the context of the inpatient unit; however, fellows will have the opportunity if interested to take a small therapy caseload of patients through our neurorehabilitation day treatment program. Therapy opportunities center around helping patients and families cope with and adjust to the rehabilitation process as they transition from an inpatient therapeutic setting to the home environment.

### Supervision

Postdoctoral fellows will work closely with all of the pediatric RPN faculty. Each week, fellows will receive at least 1 hour of face to face supervision with the faculty supervising their major rotation (inpatient rehabilitation or outpatient neuropsychology). At least one additional hour of face to face supervision is required weekly for minor rotations, guaranteeing 2 hours of direct face to face supervision weekly. In reality, fellows receive much more supervision within the context of clinical work. University policy is that supervising faculty interact directly with each patient they supervise and, as such, we are easily able to adopt a developmental approach to supervision in which fellows can move from shadowing faculty in clinic to leading patient interactions, with faculty observation.

### Primary Pediatric Faculty

Abigail Johnson, Ph.D., ABPP

Dr. Abigail Johnson is a Clinical Assistant Professor and member of the pediatric faculty group in the Division of Rehabilitation Psychology and Neuropsychology. She has been board certified in clinical neuropsychology since 2014 and one of the lead supervisors for the pediatric fellows. Dr. Johnson was awarded her Ph.D. in child clinical psychology from Southern Illinois University and completed her clinical internship in pediatric consultation/liaison and neuropsychology at the Kennedy Krieger Institute/Johns Hopkins School of Medicine. After completing her postdoctoral fellowship in pediatric neuropsychology at Cincinnati Children’s Hospital Medical. As a member of the RPN faculty, she provides comprehensive outpatient neuropsychological assessments to children referred by diverse medical specialties including neurology, neurorehabilitation, neurosurgery, and others. She and Marie Van Tubbergen codirect the pediatric concussion management clinic and pediatric neurorehabilitation programming for children with acquired and traumatic injuries across the inpatient and outpatient settings. Her clinical and research interests include in predicting and improving clinical outcomes for children who sustain traumatic and acquired brain injury, as well as predictors of outcomes and intervention for patients with concussion/mTBI.

Selected Publications:

Durfee, E.H., Garrett, L.H. & Johnson, A. Promoting Independence with a Schedule Management Assistant that Anticipates Disruptions. J Healthc Inform Res 4, 19–49 (2020). https://doi.org/10.1007/s41666-019-00060-5

Kolberg,K., Larson, J., Almeida, A., Ichesco, I., Johnson, A., Van Tubbergen, M., Nagappan, B, Saleem, N., Cranford, J., & Hashikawa, A. The Feasibility of Using Comic-Based Concussion Discharge Instructions: Gauging Likeability and Knowledge Improvement Among Adolescents and Parents.

Pediatric Emergency Care (IF 3.014 ) Pub Date : 2020-06-11 , DOI: 10.1097/pec.0000000000002133

Jacqueline N. Kaufman, Ph.D.

Dr. Kaufman is an Associate Professor and Director of the Division of Rehabilitation Psychology and

Neuropsychology. She is a member of the pediatric faculty group in the Division and a primary clinical supervisor of the pediatric fellows. She joined the Department of Physical Medicine and Rehabilitation after completing a T-32 NIH Fellowship at the U of M. Dr. Kaufman completed her graduate training at the University of Wisconsin-Milwaukee in Clinical Psychology with a specialization in Neuroscience and Pediatric Clinical Neuropsychology. She completed her internship training at the Columbus Children’s Hospital (Now Nationwide Children’s) in Columbus, Ohio in pediatric hospital based psychology. She has been a co-investigator of the Adapted Cognitive Assessment Lab and has served as president of the Division of Pediatric Rehabilitation Psychology (Div 22, section 1). Her research and clinical interests include empirically driven adapted cognitive assessment for patients with severe speech and motor impairment, as well as transition planning for adolescents and young adults with neurodevelopmental disabilities.

Selected Publications:

Kaufman JN, Donders J, Warschausky S: A Comparison of Visual Inspection Time Measures in Children with Cerebral Palsy Rehabilitation Psychology 59(2): 147-154, 2014.

Warschausky S, Kaufman J, Evitts M, Schutt W, Hurvitz EA: Mastery Motivation and Executive Functions as Predictors of Adaptive Behavior in Adolescents and Young Adults with Cerebral Palsy or Myelomeningocele. Rehabil Psychol. 2017 Aug;62(3):258-267.

Warschausky W, Kaufman JN, Schutt W, Evitts M, Hurvitz EA: Health Self-Management: Transition Readiness and Adaptive Behavior in Persons with Cerebral Palsy or Myelomeningocele. Rehabil Psychol. 2017 Aug;62(3):268-275.

Kaufman, JN; Lahey, S., Slomine, BS: Pediatric Rehabilitation Psychology: Rehabilitating a Moving Target. Rehabil Psychol. 2017 Aug;62(3):223-226.

Jennifer Larson, Ph.D., ABPP

Dr. Jennifer Larson is a Clinical Assistant Professor and member of the pediatric faculty group in the Division of Rehabilitation Psychology and Neuropsychology. Dr. Larson was awarded her Ph.D. in clinical neuropsychology from the University of Utah. After completing her clinical internship at Children’s Hospital Colorado, she completed her postdoctoral fellowship in pediatric neuropsychology at the Kennedy Krieger Institute/Johns Hopkin’s School of Medicine. She became board certified in neuropsychology in 2018 and more recently became board certified in the pediatric subspecialty. As a member of the RPN faculty, she provides comprehensive outpatient neuropsychological assessments to diverse and complex child clinical populations of various ages with a broad spectrum of developmental, medical, and neurological disorders. She is also an attending neuropsychologist on the inpatient rehabilitation unit. Her research interests include the motor and executive systems and their interactions with development, outcomes research for children born prematurely, and the clinical utility of neuropsychological measures and methods. She provides supervision to the pediatric fellows during outpatient and inpatient rotations.

Selected Publications:

Gidley Larson, J.C., Flaro, L., Peterson, R.L., Connery, A.K., Baker, D.A., & Kirkwood, M.W. (2015).

The medical symptom validity test measures effort not ability in children: A comparison between mild TBI and fetal alcohol spectrum disorder samples, Archives of Clinical Neuropsychology, 30(3), 192199.

Gidley Larson, J.C. & Suchy, Y. The contribution of verbalization to motor performance. (2014). Psychological Research, 79(4), 590-608

Gidley Larson, J.C. & Suchy, Y. (2014). Does language guide behavior in children with autism?, Journal of Autism and Developmental Disorders, 44(9), 2147-2161.

Gidley Larson, J. C., Baron, I.S., Erickson, K., Ahronovich, M. D., Baker, R., and Litman, F. R. (2011). Neuromotor outcomes at school age of extremely preterm birth: Early detection of subtle signs, Neuropsychology, 25(1), 66-75.

Danielle Shapiro, Ph.D., ABPP

Dr. Danielle Shapiro is a Clinical Associate Professor and member of the pediatric faculty group in the Division of Rehabilitation Psychology and Neuropsychology. She is also the training director for the postdoctoral fellowship program and the pediatric training lead. She was awarded her Ph.D. in clinical psychology and women’s studies from The University of Michigan in 2012 and completed her fellowship in pediatric rehabilitation psychology/ neuropsychology, also at The University of Michigan, in 2014. She joined the RPN faculty in September, 2014 with clinical interests in the early childhood period and fetal alcohol syndrome. She provides developmental and neuropsychological assessment services to children with a range of medical and behavioral conditions. Her current research interests include novel clinical research methods and social media use among individuals with acquired brain injuries. She maintains active research collaborations with faculty in a range of other departments both within and outside of the medical school. Her primary supervision of fellows is in neuropsychological assessment and inpatient neuro-rehab.

Selected Publications:

Chandler, J, Sisso, I, & **Shapiro, DN** Participant carelessness and fraud: Consequences for clinical research and potential solutions, *Journal of Abnormal Psychology,* 129: 49-55, 2020.

Whitney, DG & **Shapiro, DN** National prevalence of pain among children and adolescents with autism

Spectrum disorders, *JAMA Pediatrics* 173: 1203-1205, 2019.

**Shapiro, DN** & Chandler, J. Re: Characteristics of a Mild Traumatic Brain Injury Sample Recruited Using Amazon’s Mechanical Turk. *Physical Medicine and Rehabilitation,* 230-231, 2018.

Chandler, J & **Shapiro, DN** Conducting Clinical Science Research on Amazon Mechanical Turk, Annual Review of Clinical Psychology,12: 53-81, 2016.

Marie Van Tubbergen, Ph.D.

Dr. Van Tubbergen is an Associate Professor in the pediatric faculty group in the Division of

Rehabilitation Psychology and Neuropsychology. She joined the Department of Physical Medicine and Rehabilitation faculty after completing a postdoctoral fellowship and working in a research position in this same department. Dr. Van Tubbergen completed her graduate training at Central Michigan

University in Clinical Psychology and completed her internship training at the University of

Massachusetts-Amherst in the Counseling and Assessment center. Clinical interests focus on her role as the Director of the outpatient Pediatric NeuroRehabilitation Program, she also serves as a supervisor for the postdoctoral fellows during the inpatient rehabilitation rotation. She also supervises postdoctoral fellows for neurodevelopmental evaluations and both evaluation and intervention in the concussion management clinic. Her current research interests include advances in the provision of psychological care after brain insult and examination of treatment and intervention strategies targeting prolonged post-concussive symptoms.

Selected Publications:

Van Tubbergen M, Warschausky S, Birnholz J, Baker S. (2008). Choice Beyond Preference:

Conceptualization and Assessment of Choice Making Skills in Children with Significant Impairments. Rehabilitation Psychology.

Asbell S, Donders J, Van Tubbergen M, Warschausky S. (2010). Predictors of reading comprehension in children with cerebral palsy and typically developing children. Child Neuropsychology.

Warschausky S, Van Tubbergen M, Asbell S, Kaufman J, Donders J, Ayyangar A. (2012). Modified test administration using assistive technology: Preliminary psychometric findings. Assessment.

Stiers W, Hanson S, Turner A, Stucky K, Barisa M, Brownsberger M, Van Tubbergen M, Ashman T, Kuemmel A. (2012). Guidelines for Structure and Process of Postdoctoral Training in Applied Rehabilitation Psychology. Rehabilitation Psychology.

Stiers W, Barisa M, Stucky K, Turner A, Pawlowski C, Van Tubbergen M, Hibbard M, Caplan B. (2015). Guidelines for Competency Development and Measurement in Postdoctoral Training in Rehabilitation Psychology. Rehabilitation Psychology.

Seth Warschausky, Ph.D.

Dr. Warschausky is a Professor in the Department of PM&R. Dr. Warschausky’s clinical interests focus on the neuropsychology of congenital and acquired neurodevelopmental disorders. He has authored numerous research papers and been Principal Investigator on neuropsychological and developmental studies of children and young adults with congenital and acquired neurodevelopmental conditions. He is on the Editorial Boards of JINS, Developmental Medicine and Child Neurology, Rehabilitation Psychology and the Journal of Pediatric Rehabilitation Medicine. In 2017, he received the Leonard Diller Award in Rehabilitation Psychology.

Selected publications:

Warschausky S, Kay JB, Chi P, Donders J. (2005). Hierarchical linear modeling of CVLT-C learning curve characteristics following childhood traumatic brain injury. Neuropsychology, 19, 193-198

Stepanov I, Abramson C, Warschausky S (2011). Assessment of the learning curve from the California Verbal Learning Test – Children’s Version with the first order system transfer function. Child Neuropsychology, 17, 330-346

Warschausky S, Van Tubbergen M, Asbell S, Kaufman J, Donders J, Ayyangar A (2012). Modified test administration using assistive technology: Preliminary psychometric findings. Assessment, 19:472479

Warschausky S, Kaufman J, Evitts M, Schutt W, Hurvitz EA (2017). Mastery Motivation and Executive Functions as Predictors of Adaptive Behavior in Adolescents and Young Adults with Cerebral Palsy or Myelomeningocele Rehabilitation Psychology 62(3): 258-267, 2017.

Whitney DG, Warschausky SA, Ng S, Hurvitz EA, Kamdar, NS, Peterson MD (2019). Prevalence of mental health disorders among adults with cerebral palsy, Annals of Internal Medicine, 171, 328-333 2019

**Adult Track**

Fellows who are accepted into the Adult Track have the opportunity to work with patients with various disorders that require rehabilitation, such as traumatic brain injury, spinal cord injury, stroke, encephalopathies, neurodegenerative and demyelination diseases such as multiple sclerosis, brain and spinal tumors, hematological cancers, limb loss, orthopedic injuries, burns, developmental disorders (e.g. spina bifida), multiple sclerosis or even rarer genetic or autoimmune disorders such as leukodystrophy, Guillain-Barré or neuromyelitis optica.

**Adult Track Structure**

Adult fellows will participate in both inpatient and outpatient rotations, with additional rotation opportunities as interests and scheduling permit.

Inpatient rehabilitation rotations: The major inpatient rotations will be split between the five PM&R inpatient rehabilitation multidisciplinary teams: “Neuro,” “TBI,” “Oncology,” “Complex Medical,” and “Spinal Cord” rehabilitation. Fellows assess psychological and neuropsychological functioning, form therapeutic alliances with and provide evidence-based treatments to patients and families, collaborate with rehabilitation team members, and facilitate patients’ participation in rehabilitation therapies and nursing care.

Inpatient consult/liaison rotations: There are additional opportunities to provide PM&R

Consult/Liaison services to referred inpatients, often in acute and critical care units.

Outpatient rotations: Fellows in the Adult track will have rotations in the outpatient multidisciplinary clinic, Med Rehab, as well as in the Neuropsychology Clinic at the Burlington ACU. The fellow will provide comprehensive neuropsychological evaluations and evidence-based psychotherapies to a range of adult outpatients, including some who are served in the Adult Neuro-Rehabilitation Program. Fellows will also have a rotation in the concussion clinic, providing neuropsychological assessments and group psychological interventions.

Pain Psychology Training: Depending upon individual interest, fellows may negotiate specialized pain psychology services, provided at the PM&R outpatient facility at the Burlington Building. This clinic serves primarily patients with chronic pain (e.g. back pain, headaches, and orthopedic injuries) and other chronic health problems. Trainees will learn and/or refine a variety of relaxation and pain management techniques often used to treat this complex patient population.

Additional training opportunities are available depending on the fellows’ interests and career goals, including involvement in a multidisciplinary outpatient assessment and treatment clinic for adults with brain tumors, traumatic brain injury, and stroke and in the multidisciplinary PULSE (Post ICU Longitudinal Survivor Experience) Clinic, which follows patients recently discharged from the ICU including patients who have been diagnosed with COVID-19.

### Supervision

Postdoctoral fellows will work closely with all of the primary adult RPN faculty. Each week, fellows will receive at least 1/2 hour of face to face supervision with each faculty supervising their current rotations (inpatient, outpatient intervention, outpatient assessment, concussion clinic, etc.), with a guarantee of at least 2 hours of direct face to face supervision weekly. In reality, fellows receive much more supervision within the context of clinical work. We have a developmental approach to supervision in which fellows can move from shadowing faculty to leading patient interactions, with faculty observation and/or consultation depending on whether the case is outpatient or inpatient.

Faculty supervise within their areas of specialty and fellows rotate through these services, ensuring a diversity of supervision. Faculty maintain an open door policy and encourage fellows to seek additional guidance and mentorship in research, professional development, and clinical expertise in rehabilitation and neuropsychology.

**Primary Adult Faculty**

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Emily Briceño, Ph.D.

Dr. Briceño is an Assistant Professor (Clinical) in the Department of Physical Medicine and Rehabilitation. She completed her postdoctoral training at the University of Michigan/VA consortium postdoctoral training program in Neuropsychology and predoctoral clinical internship at the Ann Arbor VA Healthcare Center. She received her Ph.D. in Clinical Psychology with a specialization in Neuropsychology at Wayne State University. Her primary clinical responsibilities include conducting outpatient neuropsychological assessments. Clinical and research areas of interest include neuropsychological rehabilitation of stroke, cultural considerations in the neuropsychological assessment process, and disparities in cognitive health in racial and ethnic minority populations.

Selected Publications

**Briceño, E.M.,** Mehdipanah, R., Gonzales, X., Langa, K.M., Levine, D.A., Garcia, N., Longoria, R.,Giordani, B., Heeringa, S. & Morgenstern, L.B. (2020). Neuropsychological assessment of Mild Cognitive Impairment in Latinx adults: A scoping review. *Neuropsychology 34(5)*: 493-510, 2020. 32281811

Levine, D.A., Galecki, A., Okullo, D., **Briceño, E.M.**, Kabeto, M.U., Morgenstern, L.B., Langa, K.M., Giordani, B., Brook, R., Sanchez, B.N. & Lisabeth, L.D. (2020). Association of blood pressure and cognition after stroke. *Journal of Stroke and Cerebrovascular Diseases, 29(7):* 104754.

**Briceño, E.M.**, Mehdipanah, R., Gonzales, X., Heeringa, S., Levine, D.A., Langa, K.M., Garcia, N., Longoria, R. & Morgenstern, L.B. (2020). Methods and early recruitment of a community-based study of cognitive impairment among Mexican Americans and non-Hispanic whites. Manuscript submitted to *Journal of Alzheimer’s Disease*.

Levine, D.A., Gross, A.L., **Briceño, E.M.**, Tilton, N., Kabeto, M.U., Hingtgen, S.M., Giordani, B.J., Sussman, J.B., Hayward, R.A., Burke, J.F., Elkind, M.S.V., Manly, J.J., Moran, A.E., Kulick, E.R., Gottesman, R.F., Walker, K.A., Yano, Y., Gaskin, D.J., Sidney, S.S., Yaffe, K., Sacco, R.L., Wright, C.B., Roger, V.L., Allen, N.B. & Galecki, A.T. (2020). Blood pressure over the life course and later-life cognition in Blacks and Whites (BP-COG): A pooled cohort analysis of ARIC, CARDIA, CHS, FOS, NOMAS. *Journal of the American Medical Association- Neurology, 77(7):* 810-819*.*

Dong, L., **Briceño, E.M.**, Morgenstern, L. & Lisabeth, L. (2020). Post-stroke cognitive outcomes: sex differences and contributing factors J*AHA: Journal of the American Heart Association* 9(14): e016683.

Nicolette Gabel, Ph.D., ABPP

Nicolette Gabel, Ph.D., ABPP Dr. Gabel is an Associate Professor in the Department of Physical Medicine and Rehabilitation. Dr. Gabel received her BA in Psychology from University of Michigan in 2004, and her PhD in Clinical Psychology from Saint John’s University in 2012. She completed an internship in Clinical Psychology at Northport VA Medical Center in Northport, NY in 2012. She completed a Postdoctoral Fellowship in Clinical Neuropsychology in the training consortium at the University of Michigan Psychiatry Department Neuropsychology Division and the Ann Arbor VA Medical Center. In 2014, she joined the clinical faculty of the Division of Rehabilitation Psychology and Neuropsychology at the University of Michigan Department of Physical Medicine and Rehabilitation. She is board certified in Clinical Neuropsychology by the American Board of Professional Psychology. She provides outpatient neuropsychological assessments, and also serves as an attending psychologist on the adult PM&R neurological and oncology inpatient units and in the multidisciplinary Functional Wellness Clinic for adults with primary brain tumors. Her research interests include neuropsychological function and quality of life in cancer.

Selected Publications

Gabel, N., Altshuler, D., Brezzel, A., Briceno, E., Boileau, N., Miklja, Z., Kluin, K., Ferguson, T., McMurray, K., Wang, L., Smith, S., Carlozzi, N., Hervey-Jumper, S. (2019). Health related quality of life in adult low and high-grade glioma patients using the National Institutes of Health Patient Reported Outcomes Measurement Information System (PROMIS) and Neuro-QOL Assessments. Frontiers in Neurology, 10, 212. PM30930834/PMC6428723

Altshuler, D.B., Wang, L., Miklja, Z., Linzey, J., Brezzell, A., Kakaizada, S., Zhang, E., Briceño, E.M., Gabel, N., Hervey-Jumper, S.L. (2019). BDNF, COMT, and DRD2 polymorphisms and ability to return to work in adult patients with low and high-grade glioma. NeuroOncology Practice.

Waldron-Perrine, B., Gabel N., Pangilinan, P., Bieliauskas, L. (2019). Use of the Montreal Cognitive Assessment (MoCA) as a screening tool in polytrauma: Relationship to standard neuropsychological and distress measures, and impact of suboptimal effort.

Gabel, N., Waldron-Perrine, B., Spencer, R., Pangilinan, P., Hale, A., Bieliauskas, L. (2018). Suspiciously slow: Timed digit span as an embedded performance validity measure in a sample of Veterans with mTBI. Brain Injury. doi: 10.1080/02699052.2018.1553311.

Kitchen Andren, K., Gabel, N., Stelmokas, J., Bieliauskas, L. (2017). Population Base Rates and Disease Course of Common Psychiatric and Neurodegenerative Disorders. Neuropsychology Review, 27(3), 284-301.

Carrie Pilarski, Ph.D.

Dr. Pilarski is an Assistant Professor (Clinical) and member of the adult faculty group in the Department of Physical Medicine and Rehabilitation. She earned her doctorate in clinical psychology from Central Michigan University, and completed internship training at the James A. Haley Veterans Affairs Medical Center, Tampa, FL. She completed a two-year rehabilitation psychology postdoctoral fellowship at the University of Michigan. Within the American Psychological Association’s Division on Rehabilitation Psychology, Dr. Pilarski serves on the executive board as a Member-At-Large, is the covice chair of the Disability Identity Committee, and is past-president of the section on *Women’s Issues in Rehabilitation Psychology*. She served a three-year term on APA’s *Committee on Disability Issues in Psychology*. For five years, her clinical work focused on brain injury treatment using an interdisciplinary holistic neurorehabilitation approach at the Origami Brain Injury Rehabilitation Center.

In December, 2015, she joined PM&R as the attending psychologist for the adult Spinal Cord Injury / Disease (SCI/D) inpatient service at the University Hospital. She also provides outpatient psychotherapy services at the Brighton Center for Specialty Care. She is passionate about the role of psychotherapy and psychoeducation in promoting adjustment after an acute injury or for chronic illness and disability. She is interested in research on factors promoting healthy coping and development of a positive disability identity. Dr. Pilarski is also committed to issues of accessibility and advocating for individuals with disabilities.

Selected Publications

Andrews, E., Kuemmel, A., Williams, J., **Pilarski, C.**, Dunn, M., & Lund, E. (2013). Providing culturally competent supervision to trainees with disabilities in rehabilitation settings. Rehabilitation Psychology, 58, 233-244.

**Pilarski, C.**, Skeel, R., & Reilly, M. (2014). Acute effects of nicotine on risky choice among nonsmokers. The Psychological Record, 64,151-159.

Andres. E. E., Forber-Pratt. A. J., Mona, L. R., Lund, E. M., **Pilarski, C.** R,, & Balter, R. (2019).

#SaytheWord: A disability culture commentary on the erasure of ‘disability’. *Rehabilitation Psychology.*

Katharine Seagly, Ph.D.

Dr. Seagly is a neuropsychologist and rehabilitation psychologist, Assistant Professor (Clinical) and member of the adult faculty group in the Department of Physical Medicine and Rehabilitation. She completed her APPCN neuropsychology fellowship at the Rehabilitation Institute of Michigan. She completed her clinical internship at the Rusk Institute of Rehabilitation Medicine at New York University, and earned her PhD at the Virginia Consortium Program in Clinical Psychology. She currently serves on the Southeast Michigan TBI Model System Board and is involved in TBI Model System research. She also serves on the American Psychological Association’s Joint Committee with the American Speech-Language and Hearing Association to further collaboration between these two disciplines. Her clinical and research interests are primarily in the areas of psychosocial, cognitive and quality of life outcomes following TBI, concussion outcomes, performance validity tests, and improving collaborative TBI treatment. Since joining the University of Michigan, she has started an RPN adult concussion clinic incorporating both brief assessment and intervention, and is working with physiatry on further developing the inpatient TBI program. She is supervising fellows in the concussion clinic and on the inpatient Neuro and Brain Injury services. She is looking forward to working with future trainees who have an interest in TBI ranging from concussion to severe brain injury.

Selected publications

Mashima, P., Waldron-Perrine, B., Ashman, T., Milman, L., **Seagly, K.**, Mudur, R., &

Paul, D. (2019). Looking Beyond Test Results: Interprofessional Collaborative Management of Persistent mTBI Symptoms. *Topics in Language Disorders, 39*, 293-312.

Waldron-Perrine, B., Gabel, N., **Seagly, K.**, Kraal, A. Z., Pangilinan, P. H., Spencer, R, & Bieliauskas, L. (2019). Use of the MoCA as a screening tool: Influence of performance and symptom validity. *Neurology: Clinical Practice,* 10-1212.

Hanks, R. A., Rapport, L. J., **Seagly, K.**, Millis, S. R., Scott, C., & Pearson, C. (2019). Outcomes after Concussion Recovery Education: Effects of Litigation and Disability Status on Maintenance of Symptoms. *Journal of Neurotrauma, 36,* 554–558.

**Seagly, K**., O’Neil, R. & Hanks, R. (2018). Pre-Injury Psychosocial and Demographic Predictors of Long-Term Functional Outcomes Post-TBI. *Brain Injury*, *1*, 78-83.

Evan L. Smith, Ph.D.

Dr. Evan L. Smith is a Rehabilitation Psychologist and recently joined the UM Department of Physical Medicine & Rehabilitation, as Clinical Assistant Professor in 2018. Dr. Smith earned a bachelor’s degree from Tulane University and completed his Ph.D. in Clinical Psychology at Nova Southeastern University. Following pre-doctoral internship training in adult rehabilitation psychology, Dr. Smith next completed his post-doctoral residency at the Johns Hopkins University School of Medicine in adult rehabilitation psychology. Dr. Smith’s clinical responsibilities include outpatient psychological services for individuals with multiple sclerosis, chronic pain, and neurological injury, as well as pre-surgical psychological evaluation for neurostimulator implantation. His clinical and research interests include psychosocial adjustment to disability, pain and fatigue management, and patient-provider communication. He served as the chairperson for the American Psychological Association (APA), Division of Rehabilitation Psychology (Division 22), Science Committee from 2016-2018. He currently serves as the APA Division 22 Program Chair for the APA 2020 Convention.

Selected publications

Williams, M.W. & **Smith, E.L.** (2017, August). Tear Sheet: Clinical utility and psychometric properties of the Disability Rating Scale for individuals with traumatic brain injury. Rehabilitation Psychology.

**Smith, E.L.** & Driskell, L.D. (2016, May). Tear Sheet: Clinical utility and psychometric properties of the Functional Assessment of Multiple Sclerosis for individuals with multiple sclerosis. Rehabilitation Psychology.

Nierenberg, B., Mayersohn, G., Serpa, S., Holovatyk, A., **Smith, E.L.** & Cooper, S. (2016, February). Application of well-being therapy to people with disability and chronic illness. Rehabilitation Psychology: Special Issue on Foundations of Rehabilitation Psychology.

Brigid Waldron-Perrine, Ph.D., ABPP

Dr. Brigid Waldron-Perrine joined the department in September 2019. She currently serves as the lead RPN faculty at Med Rehab (Outpatient Neurological Rehabilitation). She earned her doctorate from Wayne State University in 2010 and completed her internship at the John D. Dingell VA in Detroit. Her APPCN fellowship was at the Ann Arbor VA and University of Michigan, after which she worked in interdisciplinary outpatient neurological rehabilitation clinics conducting neuropsychological evaluations, neurobehavioral status examinations and rehabilitation psychotherapy at the Rehabilitation Institute of Michigan for 7 years. Her research areas are related to cognitive and emotional rehabilitation following neurological injury and the influence of task engagement and test psychometrics on neuropsychological test performances. She is board certified in clinical neuropsychology, involved in the Division 22 Practice Committee, the ABPP-ABCN Board Certification Promotion Committee, and the APA/ASHA Joint Committee on Interdisciplinary Relations. Dr. Waldron regularly presents to local, regional, national and international audiences, both lay and professional, on the topics of neuropsychology, rehabilitation and resilience after brain injury, and Acceptance and Commitment Therapy as applied to neurological and psychiatric rehabilitation.

Selected Publications

**Waldron-Perrine, B.**, Rapport, L.J., Hanks, R.A. Lumley, M., Meachen, S.J., Hubbarth, P. (2011).

*Religion and spirituality in rehabilitation outcomes among individuals with traumatic brain injury.* Rehabilitation Psychology, 56(2), 107-116.

**Waldron-Perrine, B.**, Neils-Strunjas, J., Paul, D., Clark, A., Mudar, R., Maestas, K., Duff, M. & Bechtold, K. (2015). *Integrating resilience building into the neurorehabilitation process.* Brain Injury Professional, 12 (3), 22-25.

**Waldron-Perrine, B.**, Hennrick, H., Spencer, R.J., Pangilinan, P.H., & Bieliauskas, L.A. (2014). *Post-concussive Symptom Report in Polytrauma: Influence of Mild Traumatic Brain Injury and Psychiatric Distress.* Military Medicine, 179(8):856-864.

**Waldron-Perrine, B.** & Axelrod, B. (2012). *Determining an appropriate cutting score for indication of impairment on the Montreal Cognitive Assessment (MoCA)*. International Journal of Geriatric Psychiatry, 27(11), 1189-1194.

**Waldron-Perrine, B.**, Gabel, N., Seagly, K., Kraal, A., Pangilinan, P., Spencer, R., & Bieliauskas, L. (2019). *Use of the MoCA as a screening tool: Influence of performance and symptom validity*. Neurology: Clinical Practice, 9(2)*.*

**Additional faculty profiles for available mentors and supervision in minor clinical opportunities or research can be found on the PM&R website:**

https://medicine.umich.edu/dept/pmr/faculty/faculty/rehab-psychology-neuropsychology

# About the University of Michigan

The quality of the academic programs at the University of Michigan places it among the top 10 universities nationwide. The University's academic excellence is renowned throughout the world on both graduate and undergraduate levels and in a wide variety of degree programs. Students at the University represent richly diverse social, ethnic and economic backgrounds; geographically, they originate from all 50 states and almost 100 foreign countries.

Michigan Medicine comprises the Medical School, the University Hospitals and Health Centers and the Michigan Health Corporation. The University of Michigan established the first University-owned teaching hospital in the nation when it opened University Hospital in 1869. The establishment of this hospital introduced a legacy of providing health care, programs of education and research, and referral support for other health care providers and institutions in Michigan.

Today, there are three core hospitals as well as extensive outpatient and ambulatory clinics continuing the tradition of excellence at the Michigan Medicine. The Comprehensive Cancer Center and Cardiovascular Center are new state of the art facilities on the medical campus that highlight the University of Michigan’s burgeoning care options. As a teaching resource, the Hospitals are used for the training of students each year in the techniques of modern clinical medicine, including physicians in residency training in all medical and surgical specialties. The Hospitals serve as the core teaching facility for the UM Medical School.

## Department of Physical Medicine and Rehabilitation

The University of Michigan Health System was among the first major institutions in the nation to organize and develop an independent Department of Physical Medicine and Rehabilitation. James W. Rae, M.D. established the department in 1950 when he saw the need to have hospital-based research and education related to people with disabilities. The department currently operates 17 clinics providing a wide range of rehabilitation services to children and adults. Postdoctoral Fellowship candidates can learn more about these clinics and departmental offerings by viewing the following website: [www.med.umich.edu/pmr.](http://www.med.umich.edu/pmr)

**Ann Arbor**

The University of Michigan and Michigan Medicine are located in the heart of Ann Arbor, a vibrant college town located about 40 miles from Detroit and 25 miles from Detroit International Airport. Ann Arbor is home to a wide range of cultural events and amenities, including a large annual art fair and summer festival, multiple theaters and play houses, a thriving restaurant, small business, and bar scene, weekly farmer’s and artisan markets, multiple religious communities and activist organizations, and more. Ann Arbor is located on the Huron River, with several canoe liveries, rapids for tubing and kayaking, and dozens of hiking trails. Our schools are consistently ranked among the best in Michigan.

# Application Procedures

# Application Requirements

Applicants must have prior experience and training in neuropsychology consistent with the Houston conference guidelines for training in clinical neuropsychology. This includes previous coursework in neuropsychological assessment, brain-behavior relationships and neuroanatomy in addition to the strong foundation in clinical skills and fundamentals of clinical psychology. Fellows are encouraged to have had previous training experiences within a rehabilitation setting.

## Application Process, Selection Timeline and Notification

The residency/fellowship program is a participating member of the Association of Postdoctoral

Programs in Clinical Neuropsychology (APPCN) and will be participating in the APPCN Resident

Matching Program. Details about the Matching Program can be obtained at the APPCN website

(http://www.appcn.org). Please note that all applicants for this position must register with the

National Matching Service and abide by the posted timeline. Interviews will be conducted virtually this year and will be scheduled with selected candidates after the application deadline. This residency site agrees to abide by the APPCN policy that no person at this facility will solicit, accept, or use any ranking-related information from any residency applicant.

## Application Process

Applicants are required to submit the following materials:

1. Letter of interest
2. Curriculum Vitae, including status of your dissertation
3. Three letters of recommendation (At least two from recent/current clinical supervisors, including one from your graduate program training director.)

Letters should be on letterhead and signed.

1. [The](http://www.appcn.org/doctoral-training-verification) [APPCN Verification of Completion of Doctorate form](http://www.appcn.org/doctoral-training-verification)
2. 1-2 relevant clinical neuropsychology reports (appropriately de-identified) that are representative of the applicant’s current report writing skills
3. An official graduate transcript (These can be sent directly and separately from the electronic submission.)

**SEND APPLICATION MATERIALS TO:**

Aaron Quillen [aquillen@med.umich.edu](mailto:aquillen@med.umich.edu)

Attention: Pediatric Postdoctoral Fellowship Application or Adult Postdoctoral Fellowship Application

**Application deadline: December 18, 2020**

Contact Danielle Shapiro, Ph.D., ABPP for further inquiries:

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