Welcome to the latest issue of Alumni News. This year, 2011, marks the 200th anniversary of the founding of McLean and Massachusetts General Hospital (MGH). On Feb. 25, the two institutions held a special reenactment of their founding charter at the Massachusetts State House. The three of us were fortunate enough to be in attendance and were awed by the occasion. Drs. Scott Rauch, McLean’s president and psychiatrist in chief, and Peter Slavin, MGH’s president and chief executive officer, gave rousing speeches integrating the past, present and future. With great pride and responsibility, they reaffirmed both hospitals’ dedication to quality patient care, medical education, research and community involvement.

McLean began the year in January with its annual Research Day, a major hospital community event that continues to grow. More than one hundred posters highlighting the latest investigations by all McLean research groups (including some of the MGH/McLean residents) were showcased followed by five-minute presentations from 20 different innovative and leading edge investigators. It was an enormous success, reflecting the depth and breadth of research going on at McLean to enhance and improve mental health care.

On a more recent note, in May, McLean hosted a celebratory reception at the annual American Psychiatric Association (APA) meeting in Honolulu. This event, like McLean Research Day, continues to grow in popularity. Clearly, this year was no exception as it was the place to be for more than 1,200 APA participants.

As we make our way through this bicentennial year, the hospital continues to pursue activities on many fronts—all of which have one primary focus: that of improving the lives of our patients and their families. Some of these initiatives are highlighted within. We hope you find this newsletter useful in connecting you to McLean and each other. We look forward to hearing from you.

Best wishes,
Kathy Sanders, MD
Dost Öngür, MD, PhD
Francis de Marneffe, MD
Association Chairs
In light of the bicentennial, the McLean Alumni Associations included a special article highlighting different perspectives from past and present hospital leadership. Drs. Scott Rauch, Bruce Cohen, Steven Mirin, Shervert Frazier and Francis de Marneffe (co-chair, Psychiatry Residency Alumni Association) each chose two questions of interest from a list of six. The experiences encapsulated in their responses span seven decades of hospital leadership. Here are their responses.

Scott L. Rauch, MD  
President and Psychiatrist in Chief, 2006 to present

What does it mean to you to serve as president of McLean?

It is a great honor and privilege to serve as president and psychiatrist in chief of McLean Hospital. This is an institution with a 200-year history of leading the field and serving people in need. I feel a

“While many things have changed since our founding, our commitment to the people we serve—our patients and their families—remains the focal point of our mission today,” said McLean President and Psychiatrist in Chief Scott Rauch, MD, speaking from the Senate rostrum. “Speaking for the hospital leadership and staff assembled here in this chamber and for the hundreds of other members of our beloved institution, I reaffirm our dedication to McLean’s precious mission of compassionate clinical care, scientific discovery, professional training and public education in order to improve the lives of people with psychiatric illness and their families.”

Presiding over the ceremony, Senate President Therese Murray read a joint resolution from the House and Senate and a citation from Governor Deval Patrick commending McLean and its staff for their continued commitment. “On behalf of the Commonwealth of Massachusetts, I salute Massachusetts General Hospital and McLean Hospital on their 200th birthday,” said Murray, who noted the contributions made by both institutions. “I have great confidence that as you step into your next century of care and service the tradition of progress will continue to flourish.”

More than 200 Massachusetts state legislators and McLean Hospital and Massachusetts General Hospital leadership, staff and friends celebrated the 200th anniversary of the two hospitals during a moving charter renewal ceremony held at the State House on Feb. 25, 2011. Held in the Senate Chamber, the ceremony marked the exact day two centuries ago that McLean and MGH were chartered.

State House provides poignant backdrop for bicentennial ceremony

Celebrating a symbolic signing of the McLean charter are, from left: McLean President and Psychiatrist in Chief Scott L. Rauch, MD, House Speaker pro Tempore Patricia Haddad, Senate President Therese Murray and MGH President Peter Slavin, MD.

In back from left: Francis de Marneffe, MD, Shervert Frazier, MD, Steven Mirin, MD, Bruce M. Cohen, MD, PhD. In front: Scott L. Rauch, MD.

Five leaders on seven decades of the McLean experience

Interview by Robert L. Youngberg, PhD

In light of the bicentennial, the McLean Alumni Associations included a special article highlighting different perspectives from past and present hospital leadership. Drs. Scott Rauch, Bruce Cohen, Steven Mirin, Shervert Frazier and Francis de Marneffe (co-chair, Psychiatry Residency Alumni Association) each chose two questions of interest from a list of six. The experiences encapsulated in their responses span seven decades of hospital leadership. Here are their responses.

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profound responsibility to our patients and their families, to those who came before us and built the legacy of McLean, as well as to those who will follow us into the future. Perhaps it has always been so, but this feels like an especially exciting time in psychiatry, with abundant challenges, but also with extraordinary opportunities arising from emerging science and the promise of health-care reform. I can think of no better place from which to try and make a positive impact, nor any more dedicated team with which to work toward such worthy goals.

**What do you think motivates so many of us to remain connected to McLean long after our training has been completed?**

McLean is a truly unique place that inspires extraordinary loyalty. First and foremost, we are galvanized together through our shared commitment to a precious mission, focused on helping people who are among society’s most vulnerable. But beyond that, there is something special about the paradox of our academic subspecialty hospital—that we are at once wholly focused on psychiatry, while pursuing progress across a tripartite array of approaches that span compassionate care, research and education. This constitutes an incredibly rich environment within which to learn, develop and grow. For those fortunate enough to have spent our formative years here, it becomes a part of us—the culture from which we are born as professionals, a haven and a home. Hence, we are drawn back to McLean as a touchstone, a place to rekindle friendships and to renew ourselves as colleagues.

**Bruce M. Cohen, MD, PhD**
President and Psychiatrist in Chief, 1997 to 2005

**When you think of your tenure as president of McLean, of what advancement(s) are you most proud?**

Contrary to predictions that we would shrink and close, we grew and thrived. We opened more than 30 new clinical services, more than doubled the size of research and enhanced training programs and opportunities. We increased the proportion of the budget going to front-line colleagues: clinicians, investigators, teachers and support staff. Even in the leanest times, we raised salaries for staff every year.

**What do you think motivates so many of us to remain connected to McLean long after our training has been completed?**

What we learn and do here is crucially important to the lives of others and deeply rewarding to each of us. Our work, helping both our patients and one another, makes bonds that never break. McLean is a multigenerational family of all of us who have been here.

**Steven Mirin, MD**
President and Psychiatrist in Chief, 1988 to 1997

**Assuming the leadership of a hospital as large as McLean is a monumental undertaking. What was/were the most formidable obstacle(s) that you faced while in office?**

As an institution focused on the long-term inpatient care of people with severe mental illness, McLean was ill prepared for the constraints imposed by the widespread imposition of managed care. In the late 1980s and early 1990s, pressure to reduce inpatient lengths of stay and justify clinical decisions to managed care intermediaries challenged our conceptions about what constituted appropriate care. At the same time, increased patient acuity and reduced reimbursement threatened our survival as a financially viable, freestanding institution. Working with staff to reconfigure our care model, develop new programs and advance the hospital’s academic mission, while having to dramatically reduce operating costs and change the institutional culture, was the most challenging task of my tenure. That we were able to do so while honoring our commitment to patients demonstrates McLean’s enduring strength as one of the world’s premier psychiatric institutions.

**When you think of your tenure as president of McLean, of what advancement(s) are you most proud?**

Though blessed with a rich clinical tradition, McLean’s emergence as a leading academic institution can be traced to the influx of clinical and basic scientists that began in the early 1970s and continues to this day. Building on the talents of these individuals, many of whom are now leaders in our field, McLean has become a unique environment in which research findings are rapidly translated into improvements in patient care and where everyone—students, trainees, faculty and staff—is an active participant in a culture of inquiry dedicated to advancing our understanding of mental illness and its treatment. Despite the economic challenges of the time, I am proud that during my tenure we were able to develop disease-focused programs in which the integration of clinical care, teaching and research were a given rather than a goal. This, in turn, helped us raise more than $30 million to support McLean’s academic programs, double the space and annual budget for research (now doubled again), recruit many leading basic and clinical investigators and compete successfully for excellent trainees in psychiatry, psychology and social work. Maintaining this tradition of excellence is the key leadership task of all McLean presidents, now and in the future.

**Shervert Frazier, MD**
Psychiatrist in Chief, 1972 to 1984, 1986 to 1987
General Director and Psychiatrist in Chief, 1987 to 1988

**When you think of your tenure as president of McLean, of what advancement(s) are you most proud?**

I am most proud of the development of our research and resource centers. The Mailman Research Center, which opened its doors in 1978, the Shervert H. Frazier Institute created in 1992, and the Jonathan O. Cole Mental Health Consumer Resource Center begun in 1993. These influential centers of learning will perpetuate McLean’s position as cutting edge in the frontier of mental health advancement.

**What do you think motivates so many of us to remain connected to McLean long after our training has been completed?**

The impact this major psychiatric center has on the world, coupled with the opportunity to mentor so many brilliant, up-and-coming

*continued on page 4*
A conversation with Terry Bragg

In his 30 years at McLean, Terry Bragg, MA, MLS, is well known to members of the professional staff as registrar and archivist. Considered by many as McLean's "resident historian," Bragg, on the occasion of McLean’s bicentennial, shares his knowledge and perspective on the establishment of the McLean Archives and the growth the hospital has enjoyed since his arrival in 1981.

“I came to McLean on Nov. 1, 1981 to establish a formal archive, supported by a one-year grant from the National Historical Publications and Records Commission, written and submitted by Robert J. Waldinger, MD, of McLean and Harvard University History Professor Barbara G. Rosenkrantz, PhD, through McLean’s Research Administration. Subsequently, the hospital (Francis de Marneffe, MD, general director, Shervert Frazier, MD, psychiatrist in chief; Henry Langevin, hospital administrator; and Joseph H. Davis, DSc, director of Research Administration) provided additional funding for outside professional restoration of rare books and special collections, as well as the microfilming of 19th-century records in need of conservation. The funding also provided for the ongoing position of archivist to administer the collection. Professional conservation was also supported by an archives fund established by Frederic Washburn, MD, former director of Massachusetts General Hospital (MGH), who specifically stated that the fund be split between McLean and MGH.

When I came to McLean in the 1980s, the hospital was licensed for 328 inpatient beds. The number of beds in use changed dramatically from 248 in 1971 to 328 in 1976. The number of patients admitted rose from 423 in 1971 to 1,119 in 1976 to 1,528 in 1982. The total number of patients served in 1981 to 1982 was 3,657, which included inpatients, outpatient clinic patients/visits (1,813), partial hospital patients/visits (188), and 128 patients in community residential services. McLean also made its staff and expertise available to varied community organizations, such as Bridgewater State Hospital and Northampton State Hospital, on a contractual basis. It was a hospital to which many other institutions referred their most difficult cases. An extensive research program was supported by $8.5 million in research.

When you think of your tenure as president of McLean, of what advancement(s) are you most proud?

I assumed the directorship of McLean in 1962 at a time when its future existence was in jeopardy. Cumulative deficits over a number of years had prompted the board of trustees to question our viability as a freestanding institution. My challenge, as director, was to rectify this financial instability, while concurrently, expanding our clinical, teaching and research initiatives. These objectives were successfully accomplished, making possible the remarkable achievements of the years that lay ahead.

What do you think motivates so many of us to remain connected to McLean long after our training has been completed?

Beginning with my residency, McLean has been an ideal place for me to devote my 58 years (and counting) to the field of psychiatry. It has enabled me to fulfill my professional desire to care for others (patients, families, trainees and colleagues); while, at the same time, satisfy more personal and individual goals. It is an institution worthy of one’s best effort, where that best effort will be recognized and encouraged, only to discover the presence of still greater talents and abilities in the process. Over time, staff and employees develop a personal identification with McLean and take great pride in their connection to this nationally recognized, superb institution. The opportunities for professional development at McLean are nearly limitless, whether one aspires to a career in clinical work, teaching, research or administration.

Francis de Marneffe, MD
Director, 1962 to 1980
General Director, 1980 to 1987

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Front row, from left: Willie Siu, MD, D. Phil; Erica Keen, MD, PhD; Tracy Barbour, MD; Jane Viner, MD; Maithri Amerasekere, MD; Charlotte Hogan, MD; Keri Oxley, MD, MPA; and Aronica Cotton, MD. Back row, from left: Aaron Babb, MD; John Teal, MD; Matt Lahaye, MD; JD; Anthony Sossong, MD; Mladen Nisavic, MD; and Vinod Rao, MD, PhD.

Residency Class of 2015

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The Massachusetts General Hospital (MGH)/McLean Hospital Adult Psychiatry Residency Training Program continues into its 15th year! The Class of 2011 (the 12th MGH/McLean class) recently graduated while we matched another extraordinary group of trainees who began in June. Five of the graduates will start or continue Child and Adolescent Psychiatry Residency Training, three of the graduates will pursue clinical fellowships and eight graduates will be taking clinical and/or research attending positions within our Partners system and around the country.

This year, our program received over 900 applications and we interviewed 85 applicants for 16 resident positions. We were thrilled with the outstanding talent and range of interests these future psychiatrists brought to the table. The Class of 2015 includes three MD/PhDs, one MD/MPA and representation from medical schools all over the country.

As testimony to our innovation and response to resident and faculty feedback—both hallmarks of our program—we are advancing our technological capabilities, having created several new faculty meetings conducted via videoconferencing between MGH and McLean. Videoconferencing is also being used by our residents for meetings, rounds and supervision. We are pleased that as MGH and McLean celebrate their 200th anniversary, our training program is current, inclusive and diverse for a future-oriented globally involved health-care system.

In addition to enhancing technology, we continue to introduce novel programming. We recently began a Program in Psychodynamics (PiP). This program allows residents, as early as their first year, to increase their understanding of psychodynamic therapy and explore psychoanalysis with the help of mentors, elective seminars and scholarly activity. We expect this program to serve as a template for the creation of other subspecialty concentrations that will provide early training and opportunities for career development throughout residency training.

Our associate training director, Stephen Seiner, MD, has developed a didactic curriculum for the PGY-1 class. The PGY-1s rotate through MGH's inpatient psychiatry unit for three months and through McLean's Clinical Evaluation Center for one month. During this time, they enjoy three dedicated hours on Thursday afternoons for training seminars with chief residents, professionalism seminars with the two associate training directors, reading seminars with me, and interviewing seminars with Joan Wheelis, MD, and Eliza Menninger, MD. This curriculum has been well received by the PGY-1 class. We are grateful to Dr. Seiner for his oversight and organization of the Wednesday didactic seminars for the senior residents.

Where are they now?

Our graduating seniors continue to find ways to remain either at McLean or Massachusetts General Hospital (MGH). Here is an update on where they are now:

**Class of 2011**
- **Justin Baker, MD, PhD**, is the assistant training director of Research Education for the MGH/McLean Adult Residency Training Program and is conducting research with the McLean Schizophrenia and Bipolar Disorder Program.
- **Christopher Celano, MD**, is a fellow with the MGH Psychosomatic Fellowship.
- **Nora Friedman, MD**, is an MGH/McLean child and adolescent resident.
- **Katherine Knuston, MD**, is an MGH/McLean child and adolescent resident.
- **Russell Horwitz, MD, PhD**, is an attending at MGH/Revere Health Center.
- **Kate Nyquist, MD**, is an MGH/ McLean child and adolescent resident.
- **Elizabeth Pinsky, MD**, is an MGH/McLean child and adolescent resident.
- **Joseph Stoklosa, MD**, is a psychiatry in charge (PIC) for McLean's Schizophrenia and Bipolar Disorder Program.
- **Brandon Unruh, MD**, is a Gunderson Residence fellow and PIC with the Hill Center for Women at McLean.
- **Stephanie White-Bateman, MD**, is a PIC for McLean's Short Term Unit.
- **Julia Wood, MD**, is a PIC for McLean's Dissociative Disorders and Trauma Program.
- **Lisa Zakhary, MD, PhD** is an attending at the MGH OCD outpatient and primary care clinics.

Where are they now?

June 2011 Senior Talks

Senior residents, prior to graduating on June 18, were joined by McLean Hospital President and Psychiatrist in Chief Scott Rauch, MD, (seated, front row, fourth from left), training leadership, program administrators and junior residents for their annual ‘Senior Talks’ lectures and presentations held at both McLean and MGH in early June.
Children’s programs grow on and off the Belmont campus

McLean increased its capacity to respond to the mental health needs of children and their families with the 2010 expansion of its inpatient unit and the launch of two residential programs.

- The McLean/Franciscan Child and Adolescent Inpatient Mental Health Program increased from 20 to 32 inpatient beds, with a new wing at Franciscan Hospital for Children (FHC) in Boston. Established in 1997, the program, for children and adolescents ages three to 19, incorporates a critical educational component not often found in inpatient programs. The F.A.O. Schwartz Family Foundation funded aspects of the new wing’s décor.

- The Mill Street Lodge, located on McLean’s Belmont campus, is a longer-term residential program for adolescent girls ages 13 to 20 with emerging borderline personality and other disorders of affect dysregulation. The program offers ongoing care and support within a group home setting as patients integrate back into school and the greater community. The six-bed program places heavy emphasis on dialectical behavioral therapy (DBT) and is complemented by educational and community integration components.

- The Landing at McLean Hospital is a 12-bed residential program combining intensive and extended transitional care for adolescents with co-occurring substance use disorders and psychiatric illness. The transitional care component enables male and female adolescents ages 13 to 19 to consolidate the skills acquired, build confidence and integrate learning for when they return to home and the community.

A conversation with Terry Bragg

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Grants in 1985. Hundreds of students and mental health professionals participated in McLean’s educational programs. During that period, the hospital met the major challenge of implementing its long-range building and renovation plan, leading to the construction of the Admissions Building and the Francis de Marneffe Building, and the renovation of the inpatient buildings constructed in the 1890s.

Although McLean’s inpatient beds have been reduced to a number equaling what we were originally built to house, the hospital has expanded its services to a greater number of clients through ambulatory services, specialty treatment programs and the delivery of care at satellite programs throughout the Commonwealth. Research support has quadrupled to more than $40 million annually, with a consequent increase in research space and the number of laboratories and principal investigators. The Mailman Research Center has grown in size and staff, alcohol and drug abuse research has continued to expand and the Neuroimaging Center and unit-based clinical research programs have been established. While McLean may no longer be a hospital comprised of 44 buildings located on 242 acres, its future, on all fronts—clinical, research and education—has never looked brighter.

Greenfield earns full professorship

McLean’s Chief Academic Officer, Shelly F. Greenfield, MD, MPH, has been promoted to full professor of psychiatry at Harvard Medical School (HMS). Greenfield, the fourth female faculty member at McLean to be named a full HMS professor, directs Clinical and Health Services Research and Education in the hospital’s Division of Alcohol and Drug Abuse and oversees the Partners HealthCare Addiction Psychiatry Fellowship Training Program.

A personal memoir on McLean history

Francis de Marneffe, MD, general director emeritus, who served as director of the hospital between 1962 and 1987, has published “McLean Hospital: A Personal Memoir.” The book is a compilation of personal and professional recollections from de Marneffe, who has been affiliated with the hospital for more than five decades.

With a picture of the McLean campus building bearing his name on its cover, de Marneffe’s book deftly interweaves autobiographical and hospital history. With the knowledge that, in many cases, he is the last remaining witness to some of the events he writes about, de Marneffe covers what he described as “the less well-known and more human dimensions of this remarkable institution” with great care and candor. The book is available at the Harvard Book Store in Cambridge and at the Cole Resource Center at McLean.
1959
From Alan Stone, MD: “I am now the oldest full-time professor in the history of Harvard Law School. I expect to be teaching next fall at the School of Oriental and African Studies in London while on sabbatical. My son, A. Douglas Stone, a physics professor at Yale, is nonetheless winning the Oedipal struggle; he recently invented the ‘anti-laser’.”

1966
Barrie Richmond, MD, writes: “My wife and I live in Highland Park, Illinois. We have three sons and four grandchildren. I am in private practice and teach and supervise at the Chicago Institute for Psychoanalysis. I am active administratively as chair of the Training Analysis Committee and co-chair of the Child and Adolescent Analysis Program. I recently presented a paper, “The Identity of the Psychoanalyst,” at the St. Louis Institute. My contact information: barrie.richmond@comcast.net and 847-433-3498.”

1979
From Marshall Lewis, MD: “As clinical director for Behavioral Health Services for San Diego County, I am responsible for the direction and quality of public mental health and substance abuse services for our population of three million. I am also a clinical professor in Psychiatry at UC San Diego. I have been particularly involved in safety-net, health-system transformation, with a special interest in the development of patient-centered medical homes within integrated systems of behavioral health and primary care. E-mail: marshall.lewis@sdcounty.ca.gov.”

1985
From Steve Adelman, MD: “I married Debbie Levenson of Braver Wealth Management in Newton in January. I continue in my role as director of Psychiatry & Addiction Medicine at Harvard Vanguard Medical Associates. Our mental health practice continues to grow and flourish, and as our senior psychiatrists head into retirement, I would be happy to hear from folks interested in working in an integrated ambulatory multispecialty group practice. E-mail: steven_adelman@vmed.org.”

1986
Karen Dickson, MD, writes: “I completed my psychiatric residency at McLean in 1986 and remained on staff at McLean as psychiatrist in charge on North Belknap II and in private practice from 1986 to 1988, then moved to St. Paul, Minnesota. I currently work in a community mental health center half time. I have kept and developed my interest in addiction psychiatry, working as the chief psychiatrist at a 35-bed MI/CD treatment center. I also consult at a nursing home and at an intensive residential treatment center with chronically mentally ill patients. I am a past president of the Minnesota Psychiatric Society and served as vice speaker for the Minnesota Medical Association for three years, after having been on its board for ten years.”

1995
Joseph Shrand, MD, is medical director of CASTLE (Clean and Sober Teens Living Empowered), an adolescent substance abuse program in Brockton, Massachusetts. He is the author of two books though Harvard Health Publications; one on stress and the other on anger. In addition, he has been certified in Addiction Medicine, having passed the addiction medicine boards in 2010. His eldest child graduated from Northeastern University with a double major in behavioral neuroscience and theater. His website is www.drshrand.com.

2000
David Rettew, MD, writes: “I am still in Vermont, researching child temperament and personality and their relationship to psychopathology, and working on a new book on the topic. I am also the child and adolescent fellowship training director of a new program here at the University of Vermont that stresses research training and a family-based approach to treatment. My e-mail is david.rettew@uvm.edu.”

2005
Dan Wolf, MD, PhD, is now an assistant professor of psychiatry at the University of Pennsylvania, conducting functional neuroimaging research and caring for patients with psychotic disorders. His oldest son, born during his residency, is joined by a younger brother and sister. Dan can be reached at danwolf@upenn.edu.

In memoriam.
Tana Grady-Weliky, MD, a graduate of the McLean Hospital Residency Training Program, passed away in January 2001 following a battle with cancer. She was 48.

Send Class Notes to Dost Öngür, MD, PhD, at dongur@partners.org.”

Class Notes

Compiled by
Dost Öngür, MD, PhD
Class of 2004

Online resource directory
Remember to update your member page contact information in McLean’s online Alumni Resource Directory. The directory enables alumni to connect with colleagues and provides a way for the general public to locate a McLean-trained clinician. Visit https://secure.mclean.harvard.edu/education/alumnidb/landing.php ♦
Members of the Class of 2011 are the first residents who do not take oral board exams as part of the American Board of Psychiatry and Neurology (ABPN) certification. Residents are now required to take only one computerized board-certification exam in the fall after graduation. This change includes an interviewing verification process during residency to ensure that residents have attained basic psychiatric interview skills prior to applying for the board exam. We anticipate more changes in which the Accreditation Council for Graduate Medical Education (ACGME) and ABPN monitor residents in annual surveys and tracking systems designed to catalogue residency accomplishments in an ongoing, rather than a summative, manner.

In addition to this change, the ACGME has established new regulations limiting first-year residents from working more than 16-hour shifts. New residents also must have an attending physician in the room with them, unless it can be verified that they can work without direct supervision (though immediately available, if necessary). We are fortunate not to depend on our PGY-1s for overnight call. All overnight call at both MGH and McLean is done as a night-float system during PGY-2. And during the APS rotation, shifts are only 12 hours long. All of these changes enhance the education of our junior residents!

Our research concentration appears to be paying off—particularly this year, with nine of our residents having presented posters at the 2011 Harvard Psychiatry Research Day Poster Session and Mysell Lecture Day. Two residents were awarded the Harry and Maida Solomon Prize: Joan Comprodon, MD, MPH, PhD, for his presentation titled “Simultaneous TMS and fMRI to Study Effective Neural Connectivity, Adaptive Plasticity and Therapeutic Neuromodulation of Attentional Networks” and Michael Halassa, MD, PhD, MPH, for his presentation titled “Integrated Optogenetics with Multi-site Electrode Recordings for Investigation of Thalamocortical Oscillations In Vivo.” These two posters stood out from among nearly 200 displayed by Harvard researchers.

It is amazing to work with so many talented and wonderful people involved with residency training. Our students are among the best in the country and our faculty are diverse, accomplished and national and international leaders in all areas of psychiatry. We value hearing from our past residents, so please keep us posted on your latest accomplishments and developments. It is an honor and privilege for all of us within the program to have contributed to your careers.