

















Residency Training Program in Psychiatry

# HIGHLAND HOSPITAL

Division of Duke University Medical Center Asheville, North Carolina

# **FACULTY AND STAFF**

# **Highland Hospital**

### **PSYCHIATRY**

Ewald W. Busse, M.D.
J. P. Gibbons Professor and Chairman
Department of Psychiatry
Duke University Medical Center

Charles W. Neville, Jr., M.D., D.M. Sci. Associate Professor and Medical Director

Marie Baldwin, M.D. Assistant Professor

Jack W. Bonner, III, M.D.

Assistant Professor and Chief,
Department of Outpatient Services

Hal Gillespie, M.D.

Assistant Professor and
Director of Training

Harold R. Gollberg, M.D.

Associate and Director, Blue Ridge
Community Mental Health Center

J. Cliff Green, M.D. Associate and Acting Clinical Director

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Associate and Child Psychiatrist

Leo Potts, M.B., B.S., D.P.M. Assistant Professor

Anne Sagberg, M.D. Associate

Thomas Smith, M.D. Associate

### MEDICAL PSYCHOLOGY

Dale T. Johnson, Ph.D.
Assistant Professor and Chief,
Medical Psychology Service

Thomas Faschingbauer, Ph.D. Associate

Duilio Giannitrapani, Ph.D. Associate Professor

Duane Green, Ph.D. Assistant Professor

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Joyce Bracewell, M.S.W.
Associate in Psychiatric Social Work,
Chief, Social Work Services and
Coordinator of Admissions

Thomas J. De Martini, M.S.W.
Instructor and
Coordinator of Outpatient Services

Terrold W. Fox, A.C.S.W. Instructor

Joan Grimes, M.S.W. Instructor

George Ingle, M.S.W. Instructor

Helen G. Johnson, M.S.W. Instructor

Shirley C. Singleton, A.C.S.W. Instructor

Olin D. Wilson, A.C.S.W. Instructor

#### NURSING

Marjorie H. Johnson, R.N. Director

Kathy Gaines, M.N.
Assistant Professor of Nursing and Nurse Clinician

### **ACTIVITIES**

Stephen M. Coe, M.A. Director

#### HOMEWOOD SCHOOL

Frances M. Taylor, B.S.
Principal of Therapeutic Schools

The following individuals are members of the Duke University Medical Center, Department of Psychiatry faculty and may participate in the training of residents depending on elective study taken at the medical center.

Irving E. Alexander, Ph.D. Judith S. Altholz, M.S.W. Marcelina Amaya, M.D.

William B. Anderson, M.D. Kurt Back, Ph.D.
Robert L. Balster, Ph.D.
Kathryn Barclay, M.S.W.
Lloyd J. Borstelmann, Ph.D.
Mary Lee Brehm, Ph.D.
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Betty P. Busko, M.S.S.
Robert C. Carson, Ph.D.
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Jesse O. Cavenar, M.D. Edward Clifford, Ph.D. Hallie M. Coppedge, M.S.W. Elaine K. Crovitz, Ph.D. Herbert F. Crovitz, Ph.D. Lucy T. Davis, Ed. D. Chancellor Driscoll, M.S.W. C. Drew Edwards, Ph.D. Everett H. Ellinwood, Jr., M.D. E. William Erwin, M.D. W. Edwin Fann, M.D. Gerda G. Fillenbaum, Ph.D. Maxine R. Flowers, M.S.W. John A. Fowler, M.D. Robert C. Friedel, M.D. Johnnie L. Gallemore, M.D. Charles D. Gasswint, Ph.D. Cebrun Gaustad, Ph.D. Ila H. Gehamn, Ed. D. W. Doyle Gentry, Ph.D. Daniel T. Gianturco, M.D. John G. Giragos, M.D. Robert L. Green, Jr., M.D. Cesar Guadiaro, M.D. Thomas M. Haizlip, M.D. Patricia D. Hall, M.S.W. Elliott B. Hammett, M.D. Harold J. Harris, M.D. Frederica Harrison, M.S.W. David M. Hawkins, M.D. Eleanor deG. Heath, M.S.W. Mary W. Haynes, Ph.D. Dorothy K. Heyman, M.S.W. Frederick R. Hine, M.D. Mary Huse, Ph.D. Pedro J. Irigaray, M.D. Jacquelyne J. Jackson, Ph.D. J. David Jones, M.D. Charles R. Keith, M.D. Paul M. Kirwin, Ph.D. Richard B. Kramer, Ph.D. Irwin Kremen, Ph.D. Arnold D. Krugman, Ph.D. Maurine B. LaBarre, M.S.W. Martin Lakin, Ph.D. S. H. Leek, M.D.

Charles W. Llewellyn, Jr., M.D. Hans Lowenback, M.D. Richard A. Lucas, Ph.D. John C. McKinney, Ph.D. George L. Maddox, Ph.D. Gail R. Marsh, Ph.D. Frances M. Martin, M.S.W. Demmie C. Mayfield, M.D. Gerard Musante, Ph.D. James L. Nash, M.D. C. Bryan Norton, M.D. David Novak, Ph.D. Walter D. Obrist, Ph.D. Erdman Palmore, Ph.D. Joseph B. Parker, Jr., M.D. Z. Daniel Pauk, M.D. Daniel T. Peak, M.D. Eric A. Pfieffer, M.D. Grace Polansky, M.S.W. Dietolf Ramm, Ph.D. John B. Reckless, M.D., Ch.B. John M. Rhoads, M.D. David W. Robinson, M.D. Kenneth Rockwell, M.D. Susan S. Schiffman, Ph.D. W. Derek Shows, Ph.D. George A. Silver, M.D. Patricia Sinicrope, M.A. Karl Stevenson, M.D. William Suddith, M.S.W. Abraham Sudilovsky, M.D. Larry W. Thompson, Ph.D. Russell F. Tomlinson, Ph.D. Roy V. Varner, M.D. Adriaan Verwoerdt, M.D. Michael R. Volow, M.D. Preston A. Walker, M.D. H. S. Wang, M.D. Lily P. Wang, M.S.W Martha L. Wertz, M.S.W. Alan D. Whanger, M.D. Frances L. Wilkie, M.A. Redford B. Williams, Jr., M.D. William P. Wilson, M.D. Linda C. Wyrick, Ph.D. William K. Zung, M.D.

## CONSULTING STAFF TO HIGHLAND HOSPITAL

### ALLERGY

Claude A. Frazier, M.D.

### ANESTHESIOLOGY

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### DERMATOLOGY

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### GENERAL MEDICINE

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### INTERNAL MEDICINE

E. Emmons Corcoran, M.D.
James T. Littlejohn, M.D.
Louis Lunsford, M.D.
Artis Moser, M.D.
Phillip Russell, M.D.
Fuller A. Shuford, M.D.
Freeman Irby Stephens, M.D.
Zebulon Weaver, III, M.D.

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Robert Lawrence Craig, M.D. John W. Ledbetter, M.D. Millard F. McKeel, M.D. Lawrence S. Van Blaricom, M.D.

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R. Joe Burleson, M.D.
William J. Callison, M.D.
David L. Cappiello, M.D.
Joseph F. Hamilton, M.D.
Charles T. McCullough, M.D.
Wayne S. Montgomery, M.D.
Henry D. Severn, M.D.
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Walter M. Watts, M.D.

#### OTOLARYNOLOGY

Carter Snow Bagley, M.D. E. J. Chapman, M.D. Benjamin R. Olinger, M.D.

#### PATHOLOGY

Carl Biggers, M.D. George R. Lacy, Jr., M.D.

#### PEDIATRICS

Claude A. Frazier, M.D. Lawrence E. Metcalf, M.D.

#### PLASTIC SURGERY

Charles G. Longenecker, M.D. J. Robert Israel, M.D.

#### RADIOLOGY

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#### SURGERY

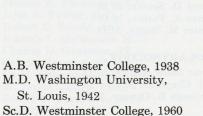
George M. Bilbrey, M.D. Jesse P. Chapman, M.D. Patrick F. Clark, M.D. Robert Perry Crouch, M.D. Bruce J. Franz, M.D. Joseph A. Noto, M.D. Jack Powell, M.D.

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Randall B. Vanderbeek, M.D.

Ewald W. Busse, M.D., Sc.D. J. P. Gibbons Professor Chairman, Department of Psychiatry Duke University Medical Center

St. Louis, 1942





Rotating and Neurology Internship St. Louis City Hospital, 1942-43
Assistant in Neurology Washington University, 1943
Resident in Psychiatry University of Colorado Medical Center, 1946-48
Director, EEG Laboratory Colorado Psychopathic Hospital, 1946-53
Instructor to Professor and Head,
Psychosomatic Medicine University of Colorado, 1946-53
Didactic Psychoanalysis
Professor and Chairman, Department of Psychiatry Duke Hospital, 1953
Director, Center for the Study of

Aging and Human Development . . . . . . . . . . . . Duke University, 1957 Diplomate and Director of the American Board of Psychiatry and Neurology. Certified in Clinical Electroencephalography. Fellow of the American Psychiatric Association, President 1971-72; The American College of Physicians, the Advisory Council of the National Institute of Child Health and Human Development, the Gerontological Society, President 1967-68; the American College of Physicians; the American College of Psychiatry; the American Geriatrics Society; Member in the Institute of Medicine, National Academy of Science, the North Carolina Neuropsychiatric Association, the American Association of Chairmen of Departments of Psychiatry, President-elect, 1972-73; the Southern Psychiatric Association, the Group for the Advancement of Psychiatry, the National Association of Mental Health, Inc.; Listed in Who's Who in America, Who's Who in the South and Southwest, American Men of Science, Outstanding Educators of America, American Men of Medicine; and has received five awards for research—the Edward A. Strecker Award, the Edward B. Allen Award, the Robert W. Kleemeier Award, the William C. Menninger Award, the 1972 Modern Medicine Award for Distinguished Achievement.

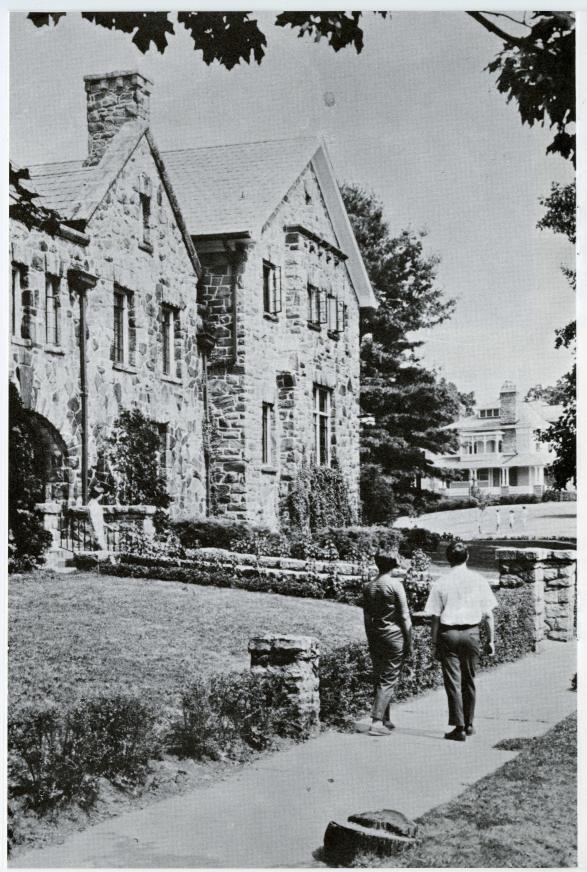


Charles W. Neville, Jr., M.D., D.M. Sci. Associate Professor and Medical Director

B.A. M.D.	Vanderbilt University, 1953 Phi Beta Kappa Vanderbilt University Medical School, 1956 Alpha Omega Alpha
	Downstate Medical Center, State University of New York, 1970
	c Research)
Straight M	edicine Internship Vanderbilt University Hospital, 1956-57
Residency	in Psychiatry McLean Hospital and Department of Psychiatry,
	Harvard Medical School, 1957-59
Residency	in Psychiatry Beth Israel Hospital and Department of
	Psychiatry, Harvard Medical School, 1959-60
	Fellow Harvard University Medical School, 1957-60
Associate i	n Psychiatry Duke University Medical Center, 1964-65
Assistant I	Professor in Psychiatry Duke University Medical Center, 1965-70
Associate I	Professor in Psychiatry Duke University Medical Center, 1970
	rector

Certified in Psychiatry and Neurology, 1965; certified in mental health administration, 1970. Fellow in the American Psychiatric Association. Member of the Association of Medical Superintendents of Mental Hospitals. Member of the Committee on Certification of Administrative Psychiatry.

Member of the American Association for the Advancement of Science, the National Association of Private Psychiatric Hospitals, the New York Academy of Science, the Adolescent Psychiatry Association, the Central Neuropsychiatric Association. Fellow in the Southern Psychiatric Association. Listed in Who's Who in the South.



# Hospital

Established in 1904, by Dr. Robert S. Carroll, Highland Hospital has expanded from a single eleven-patient building to a complex of ten buildings. In 1939, Dr. Carroll gave the hospital to Duke University. In July, 1967, the hospital was fully integrated into the Duke University Medical Center as a division of the Department of Psychiatry. The governing body of Highland Hospital is the Board of Trustees of Duke University.

All psychiatrists, psychologists and social workers at Highland Hospital are full-time and hold academic appointments in the Department of Psychiatry of the Duke University Medical Center. The faculty at Highland is active in teaching psychiatry, psychology and psychiatric social work to medical students, psychiatric residents, student psychologists, physician's associate students and student social workers. Members of the faculty are also involved in psychiatric and psychological research.

Located in a moderate yet stimulating climate and surrounded by over 85 acres of beautiful woodlands, the 134-bed hospital functions as a comprehensive residential treatment center. Hospital services have been expanded to the community through an Outpatient Clinic and Day care Center and an accredited secondary therapeutic school.

Patients of all types are admitted to Highland. The inpatient census breakdown by diagnosis includes schizophrenia, all types; paranoid states; depressive neurosis; anxiety neurosis; personality disorders; drug dependence; transient situational disturbances; major affective disorders; alcoholism; sexual deviation; organic brain syndrome; behavior disorders of adolescence; special symptoms not elsewhere classified and psychosis with brain trauma.

The development of the patient's treatment program is the responsibility of his treatment team which is composed of psychiatrists, psychologists, social workers, nursing staff, activities staff and, where appropriate, teachers from the therapeutic school. The treatment program, utilizing the therapeutic milieu of the hospital in all cases, may also involve individual psychotherapy, group psychotherapy, psychopharmacology, electroconvulsive shock, psychodrama, recreation therapy, occupational therapy, adjunct therapies and the on-grounds schools.

# Library

Highland Hospital's medical library has over 4,200 volumes, including more than 1,000 bound journals. The library receives 240 journals, and another 20 publications come from staff donations. Books and journals which the library does not contain may be requested through Interlibrary Loan. Most requests are filled by the Medical Center Library and Perkins Library at Duke, although the libraries of area general hospitals and other medical centers may be called upon as well.

## **About Asheville**

The Asheville area of North Carolina is part of a large, fertile plateau lying between the Blue Ridge and Great Smoky Mountains. Surrounded by these mountain chains, Asheville is protected from the extremes of summer and winter, yet the seasonal changes offer spectacular contrasts in scenery.

Being the largest city in western North Carolina, Asheville is the service center for 150,000 people. Recreation is a major industry, and the area offers golf, hiking, picnicking, fishing, skiing, mountaineering and camping, music festivals and outdoor dramas.



Duke University Medical Center

# The Residency Program

The three-year residency program is one of two integrated educational programs directed by the Department of Psychiatry of the Duke University Medical Center. The program is approved by the American Medical Association and by the American Board of Psychiatry and Neurology. It is designed to give the resident both didactic training and clinical experience in the broad spectrum of psychiatric treatment methods and techniques. On a secondary level, the program seeks to develop a healthy curiosity and to create the capacity for critical thinking. The resident will treat both hospitalized patients and outpatients, learning to coordinate all the facilities of the hospital (psychiatry, social work, psychology, general medicine), the community mental health centers and the efforts of ancillary personnel in the rehabilitation of his patients. Beyond the basic requirements, the resident is encouraged to pursue any area of interest that will encourage his development as a psychiatrist and as an individual.

Highland Hospital supervises and coordinates the participation of the Blue Ridge Mental Health Center, Oteen V.A. Hospital and Broughton Hospital in the residency training. This offers the resident an opportunity to work within a wide range of patient population and clinical services. The amount of training time in each center depends on the interests and needs of each resident. The Blue Ridge Mental Health Center is housed in a large, modern building only minutes from Highland Hospital. The center's staff of approximately 50 professionals provides the full range of psychological services for the population of a four-county area. The resident is able to work with a wide range of community agencies, professional groups and social service organizations. Broughton Hospital is a 2,217 bed, state-supported psychiatric hospital in Morganton, North Carolina, which offers comprehensive inpatient care. Training and research programs at Broughton as well as the Neurosciences program, are directed by a Duke faculty member. The U.S. Government Veterans Administration Hospital in Oteen, N. C., provides medical care for veterans of the armed forces from Western North Carolina and limited areas of South Carolina, Georgia and Tennessee. The services offered include medical and surgical care, acute psychiatric hospital care, outpatient medical care and dental care.

# First Year Program

The goal in the first year of psychiatric residency is to provide the resident physician with a comprehensive clinical experience in individual therapy and milieu therapy, where the emphasis is on emotional support and interpersonal relationships between nursing staff and patients. He is assigned initially to the inpatient service at Highland Hospital where he admits patients and assumes the responsibility of management, medication and therapy, working closely with the senior staff. The resident also has partial responsibility for patients of staff members. During this year, he will become familiar with psychopathology and will develop his skills in observation, interviewing and treatment. The resident continues to work with some patients after their discharge.

Each resident may work as a co-therapist with a senior staff member in an inpatient group. He attends clinical case conferences and makes a presentation at least once monthly.

During the last six months of the first year, the resident spends one day each week in the Blue Ridge Mental Health Clinic and one day each week in the outpatient service at Highland.

# **Second Year Program**

During the second year, the resident works more intensely with a small group of hospitalized patients and outpatients. He studies patients and their families in greater depth, treating patients for the entirety of their stay and following several patients after discharge. His work in the Mental Health Center continues; however, his experience involves more work with long-term individual therapy cases and therapy groups.

For the last six months of the second year, the resident is assigned to Broughton Hospital. He learns to handle administrative planning and tasks. He assumes a greater degree of responsibility as leader of a therapeutic team and becomes more active in the coordination of hospital services with mental health clinic services.

At the end of the second year, the resident confers with the chairman of the Research Committee who acquaints him with a range of studies currently underway. In most cases, the resident is able to find a project that coincides with his own research interests. If not, a self-remedies study is constructed so that the resident can initiate, carry out and write up a project during his third year.

Ongoing research programs at Highland are chiefly concerned with EEG function, relationships of psychopathology to perceptual processes, studies on the process of psychotherapy, and the effect of an on-grounds school on adolescents.

During the second year the resident will have further didactic training in psychopharmacology and special training in the neurosciences.

# Third Year Program

The goals of the third year are to provide further intensive clinical experience and to individualize training by permitting the resident to follow certain career choices through a program of electives. The resident may spend six months of this year in the main Department of Psychiatry at Duke University Medical Center or at Oteen V. A. Hospital where he has elective rotations or rotations in psychosomatic medicine. During the remaining six months, the resident is at Highland Hospital. He spends two days a week in the outpatient clinic where

he receives experience in treatment modalities including individual psychoanalytically oriented psychotherapy, group therapy, family therapy, milieu therapy and drug therapy. The remainder of his time may be spent in various elective programs, decided on with faculty guidance and subject to approval by the Residency Training Committee.

# **Child Psychiatry**

Since they will already have accumulated a great deal of experience in dealing with adolescents, the program focuses primarily on the diagnosis and treatment of younger children with the objective of providing the resident with an understanding of child psychopathology, the dynamics of child and family interactions and the various treatment techniques utilized in the field. The resident may elect to take this aspect of his training either at Highland Hospital or in the Duke Medical Center in Durham.

# **Community Psychiatry**

Community psychiatry training is done at the Blue Ridge Community Mental Health Center. It enables the resident to become familiar with other institutions and resources in the community. The program includes service to satellite clinics, consultations to local care-giving agencies, school consultations and work with various community organizations. Much of the activity is centered in disadvantaged areas and involves efforts to coordinate and facilitate the care of patients not usually reached by conventional settings such as geriatric patients, alcoholics, delinquent adolescents, unwed mothers, and drug addicts. The program also includes emergency services at the clinic, at St. Joseph's Hospital and at Memorial Mission Hospital. It will involve consultation to various medical and surgical services at Memorial Mission and involvement with the acute unit at St. Joseph's Hospital. The resident is assigned to one of five crisis intervention teams at the clinic which handle "walk-in" cases.

Blue Ridge Community Mental Health Center



## Research

The writing of a scientific report is considered an essential part of training. If a project was not selected during the second year of residency, it will be initiated during the third year. The resident will be able to work closely with members of the Research Committee and cooperating clinical staff members.

# Neurology

The course work in the Neurosciences will be taught during a rotation at one of the three participating facilities—the Duke Medical Center in Durham, Broughton Hospital, or the V. A. Hospital in Oteen. The resident is involved in the evaluation, diagnosis and treatment of patients with diseases of the central nervous system. Included in the neuroscience study are neuroanatomy, neurophysiology (including EEG), neuropathology, neuroradiology with brain scan interpretations, psychopharmacology, and neuropsychology for psychometric testing and interpretation.

# **Psychosomatic Medicine**

This requirement will be met during the third year. It may be elected at Highland Hospital in cooperation with the Oteen V.A. Hospital or Memorial Mission Hospital, or it may be taken during elective time at Durham.

## **Teaching**

Throughout the three-year training program, residents are expected to undertake some teaching responsibility. Third year residents are assigned to assist in the first year program, acting as chief residents and instructors. Both second and third year residents assist in the instruction and supervision of the physician's associate students who train at Highland Hospital and Broughton Hospital. In addition to the experience of teaching and instructing, the resident will become more thoroughly familiar with his own field.

Broughton Hospital nuclear medicine department, where the Pho Gamma camera provides data for dynamic studies of the organs of the body.



# **Psychology**

The Medical Psychology Service provides psychological services for inpatients and outpatients at Highland Hospital and maintains on-going research programs. Residents work closely with the psychologists, becoming acquainted with the contributions of this closely related field.

## **Outpatient Service**

During the elective rotation in the Outpatient Clinic, emphasis is placed on the evaluation and treatment of outpatients and day patients. The resident receives more advanced instruction in individual and group psychotherapy, and he is assigned to certain cases. The OPC staff provides individual supervision and an individual conference may be scheduled whenever an unusual difficulty is experienced in treatment.

# **Psychiatric Social Work Service**

The resident works closely with a member of the social work service throughout training. Emphasis is on working with a patient's family from admission throughout hospitalization, including help with discharge planning. The social worker and the resident meet at least once weekly to discuss the current situation with the patient and his family. In addition, there will be a series of didactic lectures from members of the social work staff, dealing with family therapy and on-going relationships between the patient and his family.

### Curriculum

The following conferences are attended by residents throughout their residency program for all three years:

## **Preceptor Conferences**

A senior psychiatrist is assigned to each resident for a six month tenure. This preceptor is the overall coordinator of what the resident does in the hospital and he may counsel with the resident about any of the problems the resident faces as he assumes the identity of "psychiatrist". The preceptor will also act as a tutor, helping the resident spot weak areas and suggesting make-up work or readings to clarify inadequately covered subjects. At the end of this six month period, the resident is assigned to a secondary supervisor who assumes the preceptor functions. This will provide the resident an opportunity to work under different methods of treatment and theories.

### **Clinical Case Conference**

(1-1/2 hours per week)

This is a hospital-wide case conference attended by staff members. Current clinical cases are reviewed in some detail, including all aspects of the work-up and treatment course.

## Ward Intake and Treatment Planning Conferences

(Inpatient service — 2 hours per week)

These are work conferences attended by members of the clinical team in which cases are reviewed, including all aspects of the patient's problem and treatment course. Behavioral aspects are emphasized and treatment planning is integrated with contributions from all members of the treatment team. In addition, residents confer daily with their unit coordinator.



Veterans Administration Hospital, Oteen, North Carolina

Basic Psychiatry Reading Group



### Outpatient Intake and Disposition Conference

New outpatients referred to the clinic are discussed with further treatment plans and dispositions being made. It is here that the resident may pick up some of his long-term treatment cases.

### **Continuous Case Seminars**

(1-1/2 hours per week)

Residents meet with a senior staff member to discuss an ongoing case or several cases in rotation.

### **Current Literature Review Seminars**

(1 hour per week)

Senior staff and house members present selections on rotation from recent literature.

### **Individual Therapy Supervision**

One hour supervision to every two to three hours of therapy time.

### **Family Therapy Supervision**

The resident acts as a co-therapist with a senior faculty member in a family treatment case. All residents meet for a weekly conference to discuss a continuing case on family therapy.

### Group Therapy and Psychodrama

During the first year each resident acts as a co-therapist with a senior staff member and works with inpatient and outpatient groups. During the last two years, the residents have their own groups, with regular supervision by a staff member. In the second year, the residents have a training group experience in which they participate as group members. A fourth aspect of the group therapy training program will be the examination of a group utilizing audio or video tapes or one-way mirrors for continued observation.

## **Curriculum For First Year Residents**

Reading Groups and Didactic Lectures:

### Miscellaneous

History of Psychiatry Normal Emotional Growth Social Class and Mental Illness

## **Psychiatric Disorders**

Schizophrenia Neurosis Depression Psychosomatic Disorders Drug Abuse Psychopathology

### **Treatment Modalities**

Recognition and Reporting of Psychopathology

Psychopathology Psychiatric Interview Psychological Testing

Introduction of Psychoanalytic Theory

Psychotherapy Behavior Therapy Psychopharmacology

Dreams

Hospital Milieu as a Therapeutic

Modality

Special courses and seminars for first-year residents include:

## **Personality Assessment Course**

(1 hour per week)

This provides an introduction into the techniques and methods of psychoanalytic psychotherapy, as well as providing the resident with information about himself.

### **Basic Psychiatry Reading Group**

(1 hour per week)

### **Basic Psychiatry Lectures**

(4-1/2 hours per week)

## **Interview Techniques Conference**

(1-1/2 hours per week)

Residents take turns interviewing and assessing unfamiliar patients, after which the senior staff member offers comments and makes suggestions for improvement.

### **Hospital Milieu Supervision**

(1 hour per week)

The resident meets with the unit coordinator of the inpatient unit to discuss milieu developments.

### Psychopharmacology Course

(1-1/2 hours per week for 15 weeks)

### **Biological Psychiatry Course**

(1-1/2 hours per week for 10 weeks)

## Curriculum For Second and Third Year Residents

During the last two years of residency, the residents are responsible for planning their own curriculum, organized around special courses offered during the first year. The subjects are explored at greater depth and a wider range of reading material, including historical development, is required for a more thorough understanding. The resident group is responsible for contracting these courses with the particular instructors and for helping to arrange the course sequence. Each course is offered at least every two years.

### Miscellaneous

Basic Behavioral Sciences, including genetics, neurochemistry, neurophysiology, neuroanatomy and the physiology of sleep. Second year at Broughton Hospital.

Human Growth and Development, including concepts of normality

Psychoanalytic Literature, including classical papers to illustrate the step-wide development of the theoretical framework.

Theories of Personality

Clinical Psychology (second year only)

Developmental Psychology

Clinical Electroencephalography (Second year at Broughton)

Ward Programming & Group Process Seminar (first or second years only)

Psychosomatic Syndrome and Nutritional Disorders

Neurophysiology

Psychopathology

Public Speaking Seminar

## **Aspects of Psychiatry**

Existential Psychiatry Adolescent Psychiatry Community Psychiatry Forensic Psychiatry Administrative Psychiatry Geriatric Psychiatry Psychosomatic Medicine Psychiatric Research

### **Treatment Modalities**

Principles of Psychotherapy Psychopharmacology Drug Abuse and Treatment Behavioral Modification Group Therapy Theory Family Therapy Theory Role Theory and Psychodrama Organic Therapies Hypnotherapy

# Eligibility, Housing And Benefits

To be eligible for the Residency Training Program at Highland Hospital, the applicant must be a graduate of an approved medical school. The Education Committee will review all applications and references and a personal interview is required. Accommodations for the resident's visit will be arranged by Highland Hospital.

Applications for residencies are accepted in the fall or winter of the year prior to the next July when residencies commence.

## **Stipends**

For the 1973-1974 academic year:

1st year residency \$11,000 2nd year residency 12,000 3rd year residency 13,000

### Insurance

The hospital provides residents with professional liability insurance. Group health insurance and life insurance are also available through the hospital.

# Vacations, Holidays, and Sick Leave

Residents are entitled to an annual paid vacation of two weeks, ten paid holidays and sick leave up to twelve days per year.

# Housing

A limited amount of housing is available on the hospital campus on a rental basis.

For additional information, contact:

Charles W. Neville, Jr., M.D., D. Med. Sci.

Associate Professor of Psychiatry and Medical Director

Highland Hospital

Asheville, North Carolina 28802

or

Hal G. Gillespie, M.D.

Assistant Professor of Psychiatry and Director of Training

Highland Hospital

Asheville, North Carolina 28802

or call collect:

704/254-3201

All applicants will be considered without regard to Race, Color, Religion, Sex or National Origin.