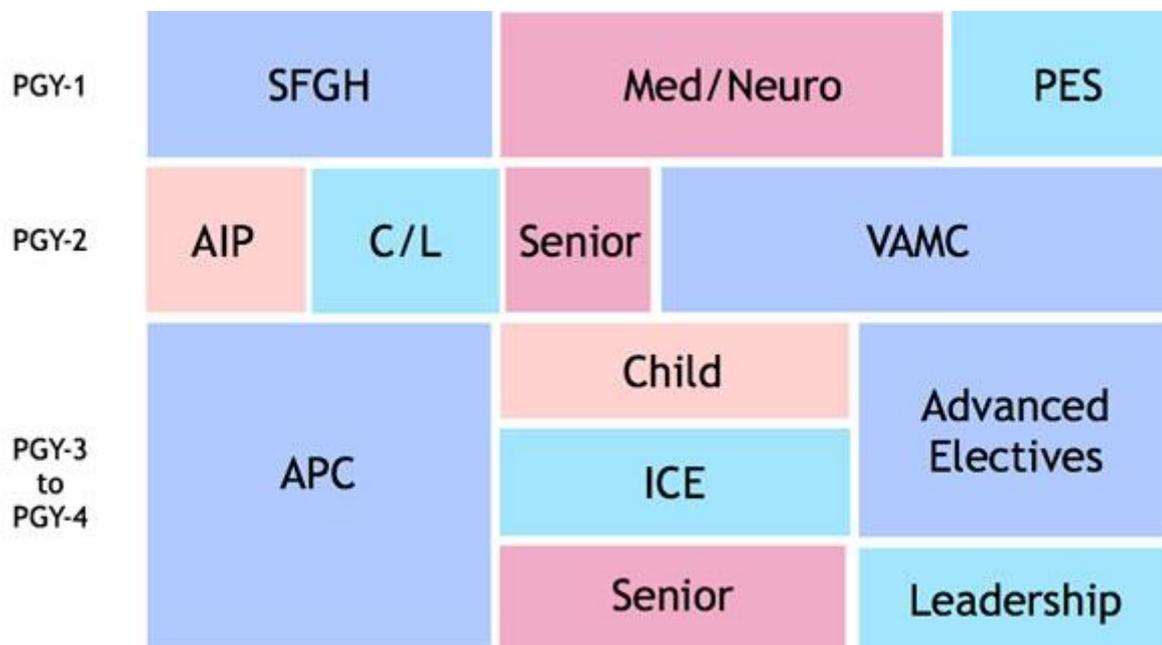


Clinical Experiences



UCSF emphasizes innovation and creativity, and the Adult Psychiatry Residency Program offers a clinical curriculum in which residents become expert clinicians and leaders in the field. The program provides broad exposure to a diversity of patients, modalities, therapies, and environments, while also highlighting longitudinal relationships with patients, faculty, and clinical systems.

The Longitudinal Clinical Experience (see Program Highlights ^[1] for more detail) begins in the first year. Residents are assigned to a half-day clinic where they work in teams with faculty and resident peers (PGY-1 to PGY-4), providing assessment, pharmacotherapy, psychotherapy, and/or management to a cohort of patients in a specific population (e.g.: HIV, PTSD, Women, Geriatric, etc.) that they will follow throughout their four years of residency.

Med/Neuro

Six months of the PGY-1 year is spent completing rotations in medicine and neurology, including:

- Inpatient Medicine (2 months)
- Outpatient Medicine (1 month)
- Inpatient Neurology (1 month)
- Outpatient Neurology (1 month)
- Emergency Medicine (1 month)

These rotations occur at the UCSF Medical Center, Zuckerberg San Francisco General Hospital and Trauma Center, and the San Francisco VA Medical Center (SFVAMC). For those

residents interested in a Child Psychiatry career, one of the months of Inpatient Medicine and Inpatient Neurology can be substituted with Pediatrics and Child Neurology, respectively. Outpatient Neurology is spent at the renowned UCSF Memory and Aging Center, where the experience will emphasize the behavioral and neuropsychiatric aspects of neurology.

Inpatient psychiatry

Four months of the PGY-1 year is spent learning the principles of inpatient psychiatric assessment and treatment at Zuckerberg San Francisco General, providing services to San Francisco's underserved and chronically mental ill population during short-term hospitalizations. Residents rotate through different culturally-focused teams, including African-American, Asian, Latino, Women, and HIV/LGBT, which provides training in cultural, ethnic minority, sexual orientation and gender-related issues. Residents also spend time in the San Francisco County Jail's inpatient psychiatry unit located at Zuckerberg San Francisco General, learning forensic psychiatry.

Skills gained during intern year are further developed during a two month rotation at the Langley Porter Adult Inpatient Program (AIP) during the PGY-2 year. This acute locked inpatient unit services an extremely broad patient population, with ages ranging from late teens to over ninety and all socio-economic classes with a wide range of clinical presentations. The AIP also has an active electroconvulsive therapy (ECT) service, and residents gain direct experience working directly with patients receiving this treatment. Residents also return for one month to SFGH during the PGY-2 year and one month to AIP during the PGY-3 year to develop team management skills, provide near-peer teaching, and leading teams with junior colleagues.

Emergency psychiatry

One month of the PGY-1 year is spent learning emergency psychiatry at Zuckerberg San Francisco General, providing emergency psychiatric services to San Francisco's underserved and chronically mentally ill population.

Consultation/liaison

During the PGY-2 year, residents spend three months performing inpatient consultation/liaison psychiatry (at Zuckerberg San Francisco General or the UCSF Medical Center), working closely with faculty to learn how to evaluate psychiatric manifestations of medical disorders and develop techniques to manage primary psychiatric disorders for patients who are medical hospitalized in collaboration with other disciplines.

San Francisco VA Medical Center (SFVAMC)

Six months of PGY-2 year is spent in a full-time rotation at the SFVAMC, designed to give residents exposure to the principles of outpatient psychiatry evaluation and treatment at an early point in their training. With close supervision in several settings, residents learn a variety of treatment modalities including comprehensive diagnostic evaluations, pharmacotherapy, and psychotherapy. All residents participate in clinics devoted to rapid evaluation, substance abuse, psychopharmacology and specialized PTSD treatment. Psychotherapy training includes individual therapy (Time Limited Psychodynamic Psychotherapy and CBT), group therapy (substance abuse and long term process group), and couples/family therapy. Residents also focus in one specialty outpatient area of interest (including community, mood,

women's mental health, geropsychiatry, HIV, addictions, telepsychiatry, consultation, primary care, research, etc.).

Adult Psychiatry Clinic (APC)

The PGY-3 year is a largely outpatient experience located primarily at the Adult Psychiatry Clinic at Langley Porter Hospital and Clinics (LPPH&C) on the Parnassus Campus of UCSF. Residents provide a variety of psychiatric clinical services in the ambulatory care setting, including intake and assessment in Specialty Clinics and longitudinal psychotherapy and psychopharmacology. Specialty Clinics are half-day clinics organized by diagnostic category or patient population and are designed to provide comprehensive teaching and "real time" supervision. Clinics include Depression, Bipolar Affective Disorder, Anxiety Disorders, Women's Mood, and Hormone, Early Psychosis, Geriatrics, and LGBT Health. Special attention is given to the educational experience of residents in the APC to provide expert training, supervision and support in the application of diverse treatment models, including Cognitive Behavioral Therapy (CBT), Interpersonal Psychotherapy (IPT), Psychodynamic Psychotherapy, Supportive Psychotherapy, Dialectic Behavioral Therapy (DBT), Problem Solving Therapy (PST), Acceptance and Commitment Therapy (ACT), and pharmacotherapy. Emphasis on longitudinal care continues into the PGY-4 year where residents carry cases over from the PGY-3 year.

Child and adolescent psychiatry

PGY-3 residents also spend one half-day per week throughout the year at LPPI in Child and Adolescent Psychiatry, which consists of didactics and clinical experience observing and conducting supervised comprehensive psychiatric evaluations of children, adolescents, and families. In addition, residents do weekly outpatient therapy with a child or adolescent and participate in weekly individual supervision about their case. Seminars teach residents about normal child development, therapy, and childhood psychopathology. Electives in the Tourette's and Pervasive Development Disorders (Autism) Clinic are also available. A limited number of residents interested in obtaining experience working with children and families in a community mental health/public setting may elect an alternative year-long Child Psychiatry rotation at Zuckerberg San Francisco General.

Integrated care experience (ICE)

During the PGY-3 or PGY-4 year, residents serve as clinicians and/or consultants in an integrated care model, in settings such as primary care, obstetrics, pediatrics, oncology, neurology, and others. The experience is highly interdisciplinary and residents have the opportunity to participate in team meetings and clinical encounters emphasizing sequenced and shared visits with other specialties, open access to mental health services, and warm hand-offs between specialty services. Residents rotate for one half-day over the course of one academic year. Sites for this rotation include the High Risk OB (HROB) Service at Zuckerberg San Francisco General, The Psychiatry-OB Clinic at UCSF, the Psychiatry-HIV Clinic at SFVAMC, the Psychiatry-HIV Clinic at UCSF, the Psychiatry-Neurology Clinic at VAMC, the Women's Clinic at the SFVAMC, and the Psychiatry-Primary Care Clinics at the SFVAMC.

Leadership

Residents are expected to develop leadership skills during residency and to be effective agents of change in health care systems. Our leadership curriculum reflects this vision of

creating future leaders in the field, with an emphasis on understanding one's leadership personality and styles and team and group process. At the end of training, residents will have completed several systems/QI projects, served as members on important Residency Training, Department, School of Medicine, and/or University committees; participated as a team leader in a variety of clinical settings, including intensive services and ambulatory care services, and participated in the Department's leadership seminar in the PGY-4 year.

Advanced electives

Elective time exists in the PGY-3 and PGY-4 years. A majority of the PGY-4 year is elective and is designed to ensure that the experiences residents select have a coherent theme. These experiences aim to advance professional development by promoting growth as a leader, an educator, an expert in a specific area, and an outstanding clinician. During the second half of their PGY-3 year, residents (with support from advisors and mentors) develop personalized learning goals for their fourth year and then construct an individualized set of elective experiences to meet those goals. During the fourth year, each resident presents a Grand Rounds talk on an area of special interest. This Senior Talk experience promotes leadership, scholarly inquiry, and professional development. Residents choose from a variety of Senior Resident rotations drawing from several broad areas of concentration (e.g., Community and Public Psychiatry, Outpatient Psychotherapies, Pharmacotherapy, Inpatient Care, Consultation/Liaison, Partial Hospitalization, etc.). Elective options exist across all three of UCSF's training sites. Senior residents assume leadership roles in the administrative and educational processes of the elective rotations, functioning, for example, as team leaders and teachers to junior residents. Within these broad areas, senior residents may participate in a variety of clinical endeavors, while also meeting their overall professional development objectives.

The Research Resident Training Program (RRTP) ^[2] is for trainees clear in their goal to pursue a research career post-residency, including a research fellowship. The RRTP provides active mentorship and support in helping residents become physician-scientists in basic science, translational, clinical, and health services research. Residents in this program have scheduled time devoted specifically to research: up to 5% in the PGY-1 year, up to 20% in the PGY-2 year, up to 35% in the PGY-3 year, and up to 90% in the PGY-4 year.

The training program also allows motivated residents to fast-track into the UCSF Public Psychiatry Fellowship ^[3], in which they work three days a week in a community mental health clinic, attend the same didactics as the PGY-5 fellows, and complete a rigorous program evaluation/quality improvement project by developing a public-academic partnership. Residents continue to satisfy core departmental requirements and complete their fellowship by the conclusion of their PGY-4 year.

Chief Residents

In the spring of each academic year, a group of rising PGY-4s are selected to be Chief Residents for the upcoming academic year. There are six Chief Resident positions, including four site-based Chief Residents (LPPI Intensive Services, LPPI Ambulatory Services, Zuckerberg San Francisco General, and SFVAMC), an Education Chief Resident, and a Research Chief Resident. These residents receive a special opportunity to develop teaching, leadership, and administrative skills and play crucial roles in all aspects of the training program. Chiefs are selected by the Residency Training Program (RTP) faculty, with input from service chiefs. They meet weekly with the Program Director as a group and also

individually with the Site Director at their site. Chiefs also meet regularly with the junior residents at their assigned site.

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Source URL (modified on 11/20/2015 - 12:27pm): <https://psych.ucsf.edu/rtp/clinical>

Links

[1] <https://psych.ucsf.edu/rtp/highlights>

[2] <https://psych.ucsf.edu/rtp/research>

[3] <http://ppf.ucsf.edu/>