

University of Arkansas for
Medical Sciences
Post-Doctoral Fellowship
in Clinical Neuropsychology

2024-2026



Psychiatric
Research Institute

The Setting

University of Arkansas for Medical Sciences

The University of Arkansas for Medical Sciences (UAMS) is Arkansas' only comprehensive academic health center. It is the largest public employer in the state, with more than 10,000 employees in 73 of Arkansas' 75 counties and a regional campus in Northwest Arkansas. UAMS offers 64 baccalaureate, master's, doctoral, professional, and specialist degree programs and certificates through their Colleges of Medicine, Nursing, Pharmacy, Health Professions, Public Health, and graduate school. UAMS is also home to seven institutes, where specialized clinical care and research are conducted, including the Winthrop P. Rockefeller Cancer Institute, Harvey & Bernice Jones Eye Institute, Myeloma Institute, Donald W. Reynolds Institute on Aging, Jackson T. Stephens Spine & Neurosciences Institute, Translational Research Institute, and the Psychiatric Research Institute. UAMS and its clinical affiliates, Arkansas Children's Hospital, and the VA Medical Center, are an economic engine for the state with an annual economic impact of \$3.92 billion. Due to its wide-ranging influence, UAMS is impacting the health care of Arkansans now and in the future.



The Psychiatric Research Institute (PRI) is a state-of-the-art facility that is dedicated to improving the mental health and well-being of residents in Little Rock, the state of Arkansas, and the country through evidence-based treatment, innovative research, and quality training and education. Clinical programs are dedicated to assessing and treating children, adolescents, and adults through a variety of outpatient clinics and inpatient programs, including the Walker Family Clinic, Child Study Center, Center for Addiction Services

and Treatment, Women's Mental Health Program, and STRIVE (Seeking To Reinforce my Identity and Values Everyday), a school-based community outreach program.

In addition to clinical care of psychiatric disorders, research and education are integral to the overall approach of PRI. The institute's focus on evidence-based care takes into consideration the education of future medical personnel, while relying on the work of research scientists to provide innovative forms of treatment. PRI's three research divisions are the Center for Addiction Research, the Division of Health Services Research, and the Brain Imaging Research Center. In addition to the Postdoctoral fellowship in Clinical Neuropsychology, educational programs

include an APA pre-doctoral clinical psychology internship, child/adolescent and adult psychology traumatic stress fellowship, general psychiatry residency, and fellowships in child and adolescent, forensic, addiction, and geriatric psychiatry.

Life in Little Rock

Little Rock is a scenic city sitting on the south bank of the Arkansas River in Central Arkansas. It is the capital and most populous city in Arkansas, with a 2022 population estimate of 204,000, though the Little Rock metropolitan area is ranked 122nd in terms of population with approximately 726,000 residents. The size of Little Rock and surrounding area gives its residents a feeling of living in a large city, with all the amenities accessible to them but also having a small town feel, with quiet shops and unique neighborhoods. In fact, in 2014, Little Rock was ranked #1 in “America’s 10 Great Places to Live” by Kiplinger Personal Finance Magazine.



Little Rock is a major cultural, economic, educational, medical, government, and transportation center within Arkansas, the South and the country. Fortune 500 companies Dillard’s and Windstream Communications are headquartered in Little Rock, along with Axion, Stevens, Inc., American Taekwondo Association, and Heifer International. Little Rock boasts a number of attractions for those who are lovers of art, music, and theater, including the Arkansas Arts Center, Arkansas Repertory Theatre, Robinson Center Music Hall, Wildwood Park for the Arts, Community Theatre of Little Rock, and Ballet Arkansas.



The city is probably most well known for being home of the William J. Clinton Presidential Library and Museum, which was opened in 2004. The archives and library contain 2 million photographs, 80 million pages of documents, 21 million e-mail messages, and nearly 80,000 artifacts from the Clinton presidency. The museum within the library showcases artifacts from Clinton's term and includes a full-scale replica of the Clinton-era Oval Office.

William J. Clinton Presidential Library and Museum

Little Rock is home to a wide variety of other museums, such as the Museum of Discovery, Historic Arkansas Museum, MacArthur Museum of Arkansas Military History, Old State House

Museum, and the Mosaic Templars Cultural Center. Little Rock has a proud history of being on the forefront of the civil rights movement. The Little Rock Central National Historic Site commemorates the desegregation of Central High School in 1957 and the persistence of nine African American students in attending a formerly all-White school.

Outdoor enthusiasts enjoy biking and running on the Arkansas River Trail, which features more than 15 miles of scenic riverfront and the Big Dam Bridge, one of the longest pedestrian and bicycle bridges in North America. Little Rock also has over 60 parks and recreational areas, and Pinnacle Mountain State Park is adjacent to the western side of the city. The most prominent feature of the park is Pinnacle Mountain, which towers over 1,000 feet above the Arkansas River Valley and includes several hiking trails. The park also includes the Arkansas Arboretum, an interpretive trail with flora and tree plantings.



Pinnacle Mountain State Park

Education also is an integral part of Little Rock. It is home to two branches of the University of Arkansas system: the University of Arkansas, Little Rock (UALR) and the University of Arkansas for Medical Sciences (UAMS). Over 9,500 students receive their education at UALR, and the university features over 100 undergraduate degree programs and over 60 graduate degree programs. Athletes participate in Division I athletics in the Sun Belt Conference. UAMS is the only academic medical center in Arkansas and includes the medical school for the University of Arkansas. It also features seven institutions that provide specialized clinical care and research.



Dickey-Stephens Park

Sports are important to the culture of Little Rock and to the state of Arkansas. The Arkansas Travelers, the AA professional minor league baseball affiliate of the Los Angeles Angels, play their home games at Dickey-Stephens Park in North Little Rock. War Memorial Stadium in Little Rock is the home of the Little Rock Rangers Soccer Club, a club which plays in the USL League Two, a national semi-professional league.

Links to Local Information

Little Rock Visitors Bureau – www.littlerock.com

Little Rock Calendar of Events – www.littlerock.com/calendar

Little Rock Neighborhoods – www.littlerock.com/travel-tools/neighborhoods/

Little Rock River Market – www.rivermarket.info/

Fellowship in Clinical Neuropsychology

Overview

The Clinical Neuropsychology Fellowship is designed for residents who intend to pursue a career in academic neuropsychology, with a focus in clinical service, research, and education. The primary objective of the neuropsychology track is to fulfill the requirements set forth by APA Division 40, the Houston Conference guidelines, and the Association of Postdoctoral Programs in Clinical Neuropsychology. The neuropsychology track provides clinical, didactic, and research training to develop a high level of competence in clinical neuropsychology. During fellowship there is exposure to a wide range of patient populations, including classic neurologic disorders and rarer syndromes, using flexible battery to more qualitative approaches for assessing and understanding the neurocognitive profiles of these patients. Successful completion of this fellowship program will meet criteria for future Board Certification in Clinical Neuropsychology. The primary patient population for this track is adults with a variety of neurological, neurosurgical, medical, and psychiatric presentations.

Our two-year fellowship in Clinical Neuropsychology is designed to provide residents with broad and general training experiences in adult neuropsychology within an academic medical setting, while also providing them opportunities for further specialization. It is sponsored by UAMS and the College of Medicine and is one of many training programs within the [Department of Psychiatry](#), including an APA accredited pre-doctoral psychology internship with one track dedicated to Neuropsychology. Training faculty hold secondary appointments in the Departments of Neurology, Neurosurgery, and Humanities, allowing for a wide range of training experiences within the clinics of these departments. The Fellowship training is anticipated to run August 1, 2024, through July 31, 2026.

Mission

The mission of the Clinical Neuropsychology Fellowship program is to train post-doctoral level Residents for the professional practice of clinical neuropsychology in a competent, ethical, and socially relevant manner, in order to serve all patients and promote a culture of equity, diversity, and inclusion.

Training Model and Goals

We adhere to a scientist-practitioner training model in which our emphasis is on developing professional psychologists, who can provide culturally competent clinical services to individuals, while working within the community context of each person. Our goal is to train Fellows so that at the completion of the program, they will be able to demonstrate competency in neuropsychological assessment, and in consultation and multi-disciplinary teamwork. They will be able to provide services to a diverse population that varies by age, socio-economic level,

ethnicity, rural/urban setting, and type and severity of neuropathology. We adhere to the Houston Conference guidelines.

Training Clinics

Walker Family Clinic

The Walker Family Clinic has been offering mental health services to young adults, adults, and geriatric populations since 2008. The clinic was formed by the integration of the UAMS Program for Adults and Program for Young Adults. This clinic serves the referral needs for inpatient units, UAMS outpatient clinical programs, the community of greater Little Rock, and for secondary and tertiary settings from across the state. The patient population for the clinic generally reflects the racial and ethnic breakdown of the Greater Little Rock metropolitan area. Socio-economic status also is diverse; however, many clients come from lower income homes. Staff include psychologists, psychology interns, psychiatrists, psychiatry residents and fellows, licensed clinical social workers, social work interns, licensed professional counselors, and two neuropsychology technicians.

Neuropsychology

Throughout both years the resident will train within the neuropsychology service, which was developed in 2006. The service has developed a strong regional reputation, and patients are referred from across the state and from bordering regions of adjacent states. At present, the neuropsychology service is a referral-based program that provides neurocognitive assessment for a variety of patient populations with referrals primarily coming from the Departments of Neurology and Neurosurgery, as well as from Physical Medicine and Rehabilitation, Family Medicine, Gerontology, Psychiatry, and community and hospital-based clinicians throughout the state. Although the majority of the service is outpatient based, inpatient consults for NPH, Wada procedures, and the University's Level I trauma center are also conducted. Common referral questions focus on diagnostic clarification, neurocognitive and functional abilities within existing conditions, and evaluation for surgical planning with the neuropsychologists playing important roles on multiple interdisciplinary treatment teams including Multiple Sclerosis, Huntington's Disease, Epilepsy Surgery, and Functional Neurosurgery teams. The service is comprised of two board certified neuropsychologists, two early career neuropsychologists, two neuropsychology fellows, one neuropsychology intern, and two dedicated neuropsychology technicians. Residents have the opportunity to conduct testing independently and on occasion to train with the neuropsychology technician to fully experience the range of testing modalities. Our goal is to help residents improve proficiency and self-assurance, with increasing levels of independence throughout the training program so that they leave fellowship with a strong sense of confidence and professional identity.

Clinical Populations

Neurology – The Neurology Clinics are a primary referral source to the neuropsychology service. Primary patient populations from the Neurology Clinics include multiple sclerosis, autoimmune disorders, epilepsy (pre-surgical and general epilepsy-related cognitive disorders), movement disorders (including pre-surgical Parkinson's Disease and essential tremor as well as other movement disorder types), head injury, and stroke. Typical consults are conducted to evaluate the extent to which an individual's illness impacts cognition, emotion, and functionality to 1) assist in differential diagnosis; 2) track disease progression over time, which often informs treatment decisions; and 3) provide recommendations to patients to improve daily functioning. In the case of pre-surgical evaluations, assessments are intended to help decide candidacy, risk, and appropriate treatment targets.

Neurosurgery – The Neurosurgery Clinic is staffed by Neurosurgeon faculty, who specialize in functional neurosurgery, skull-based and vascular neurosurgery, oncology, and spine. The Neurosurgery Department houses the only gamma knife service within the state of Arkansas and is one of the few hospitals in the country that offers skull-based surgery. Common referrals include pre-and post-surgical evaluations for brain tumors, aneurysm, and trauma. In addition, all patients being considered for placement of spinal cord stimulators to control chronic pain are required to undergo a cognitive and emotional screening evaluation with Neuropsychology.

Physical Medicine and Rehabilitation (PM&R) – The PM&R program provides comprehensive physician services to individuals with a variety of chronic injuries and disorders including central nervous system injury, neuromuscular and musculoskeletal disorders, and chronic pain. Typical referrals from PM&R often include the assessment of cognitive and emotional functioning in individuals with acute injuries such as TBI or stroke, or more chronic illness such as multiple sclerosis to determine functional abilities and make recommendations regarding ability to return to work, driving, and other daily activities.

Psychiatry – The neuropsychology service receives referrals for a variety of presenting problems from within the Psychiatry Department including differential diagnosis of cognitive decline (pseudodementia versus dementia) as well as dual diagnosis (cognitive decline, mood disorder and medical comorbidities).

Primary Care and Trauma – As the only level one trauma center for adults and academic medical center Arkansas, the neuropsychology service receives referrals across the state from primary care providers and other medical clinics for a wide variety of referral questions including dementia, general memory loss, concussion, and questions of differential diagnosis.

Gerontology – The Donald W. Reynolds Institute on Aging provides primary care for patients who are 65 years and older, and also houses the Thomas and Lyon Longevity Clinic and Walker Family Memory Clinic. Common referrals often include patients with suspected neurodegenerative processes, with the goal of differential diagnosis, treatment planning, and recommendations for safety and support.

Specialty Areas of Focus – Multidisciplinary Teams

Deep Brain Stimulation (DBS) – The Neuromodulation Program at UAMS was formulated in 2010 under the direction of Dr. Erika Petersen, functional neurosurgeon in the Department of Neurosurgery. Over the proceeding years, the program has grown exponentially and developed a strong regional and national reputation; indeed, in 2012 UAMS was identified as the most rapidly-growing center for DBS. We currently rank in the top 50 most active sites nationally. UAMS is one of only 38 centers in the country with an active program for implementing DBS in severe, treatment refractory obsessive-compulsive disorder. This multidisciplinary team is comprised of two functional neurosurgeons, three Movement Disorder specialty Neurologists, Neuropsychology, and Ethics. This collaboration has led to active research programming, with a mission to improve pre-surgical evaluation procedures and post-surgical outcomes. Neuropsychology is an integral component to the Neuromodulation Program; all individuals being considered for DBS implantation regardless of diagnosis (including Parkinson's disease, essential tremor, and dystonia) undergo comprehensive neuropsychological assessment.

Epilepsy – The Clinical Epilepsy Division of the Department of Neurology is comprised of a multidisciplinary team of clinicians, including neurology, neurosurgery, radiology, and neuropsychology, who work together to find the most appropriate epilepsy treatment for each patient. The UAMS Epilepsy service is the only adult level 4 NEAC accredited center in the state of Arkansas. Neuropsychology serves an integral role within this team by providing neurocognitive evaluations for individuals with epilepsy. Neuropsychology is consulted to assist with diagnosis, cognitive and functional impact, treatment recommendations, and as part of the epilepsy surgical team. All individuals being considered for surgical intervention undergo presurgical evaluations with neuropsychology for the purposes of identifying areas of dysfunction that may support the seizure focus, and for determining cognitive, or other, risks of surgery in the individual. Neuropsychology is consulted in cooperation with Interventional Radiology and Neurology. In some cases Wada testing or functional mapping is requested, which are directed by the Neuropsychology team. These results are discussed during the biweekly epilepsy surgical team meetings, and if the patient is approved for surgery, a follow-up postsurgical evaluation is conducted 12 months post-surgery.

Tumor – Neurosurgery regularly treats benign and malignant brain tumors through medication, surgery, radiation therapy, and chemotherapy. UAMS is also the only facility in Arkansas offering non-invasive gamma knife treatment for brain tumors. Neuropsychology is regularly present at brain tumor surgical planning meetings and is consulted for a variety of reasons including pre-treatment baseline evaluations, post-treatment evaluations for functional assessment, and ongoing monitoring of cognitive abilities and emotional functioning for individuals with chronic or recurrent tumors.

Level I Trauma – The Trauma Neuropsychology Consult was established in July 2022 to provide neuropsychological services to Level I Trauma patients admitted to UAMS. Patient populations include adult Trauma Surgery patients admitted to the Trauma service after polytrauma, SCI, TBI, stroke, and other injuries with a neurological focus such as patients admitted with a history of movement disorders, dementia, delirium, or neurodevelopmental diagnoses. The role of the

neuropsychology team is to provide both inpatient assessment and intervention services to patients and their families during their stay. Those services include assessment of cognition and mood, psychological intervention, patient and family psychoeducation, in-room rehabilitation, and an emphasis on maximizing recovery to include referral to a range of outpatient resources. Our service focuses on a singular goal – to identify rehabilitation needs early and to implement rehabilitation services in a timely manner. We also aim to address psychological distress and agitation to minimize obstacles to meaningful engagement in acute care rehabilitation efforts. In addition, we serve to support identification and supportive management of delirium for trauma patients. Finally, we provide consultation for the Trauma Team to promote understanding of nuanced neuropsychological symptoms associated with history and or current injury.

MS Multidisciplinary Clinic – In 2021, an integrated multidisciplinary clinic was launched to provide patients diagnosed with Multiple Sclerosis (MS) wrap-around care for symptom management and treatment planning. Neuropsychology serves in an integral role alongside Neurology, Speech and Language Pathology, Nursing, and Physical Therapy. Each patient seen in the clinic undergoes a brief cognitive evaluation designed to evaluate MS-related cognitive changes, provide information to the treatment team to improve communication, and make recommendations for cognitive and/or psychological interventions. The team meets throughout the day, providing consultation to one another and working collaboratively to build individual treatment plans. The clinic is held bimonthly at the Freeway Building, home to UAMS Epilepsy and specialty Neurology clinics.

Huntington's Disease (HD) Multidisciplinary Clinic – In 2023, the UAMS Neuropsychology team joined our Neurology colleagues in their HD Center of Excellence. Our role on this multidisciplinary team is to provide serial and abbreviated assessment to monitor symptoms common in HD; including cognition, mood, and impulsivity. Additionally, assessment is aimed at providing specific information to the team regarding neuropsychological limitations in functional independence, safety, and engagement in other therapies. Training opportunities include assessment, consultation, and research. The team consists of Neurology, Neuropsychology, Social Work, Physical Therapy, Speech and Language Pathology, and Nursing.

Outpatient Therapy

If desired, neuropsychology residents may elect to continue their training in the area of treatment, including cognitive rehabilitation and/or individual or group behavioral medicine. Supervision is based on the developmental level of resident, who will have flexibility in the number and types of cases seen.

Cognitive Rehabilitation

Overview of Setting: In 2019 a multi-tiered Cognitive Rehabilitation Program was initiated within the Walker Family Clinic to provide individual and group therapy services to restore cognitive functioning for adults with neurologic conditions.

Patient Population: The program includes individual cognitive rehabilitation for patients with acquired brain injury or epilepsy and rotating cognitive rehabilitation groups; offered at different times throughout the fellowship. Group intervention includes a cognitive rehabilitation

intervention for patients with MS-related cognitive changes, a grant supported community group intervention for TBI, and group Cognitive Stimulation Therapy (CST) for mild to moderate forms of dementia. Treatment populations continue to expand with program growth.

Core Training Opportunities: In this 6month rotation, fellows have the opportunity to provide direct individual cognitive rehabilitation focused on empirically-supported manualized interventions and recommended techniques for acquired brain injury. For fellows interested in providing intervention to patients with epilepsy, a two-day training opportunity is available, which includes training certification. In group settings, interns may either facilitate or co-facilitate (depending on experience) cognitive rehabilitation targeted at mild cognitive impairment in the movement disorder clinic (MDC) for patients diagnosed with MS or in an open group format for patients diagnosed with TBI. Fellows will also have the unique opportunity to provide CST, an evidenced-based treatment for dementia in a group setting. Each of these tiers provides ample exposure to new training, direct patient care, multidisciplinary interaction, and the option of research throughout the rotation. The amount of time spent on this rotation is flexible and based on the fellow's interest in other rotations. Individual rehabilitation is flexible during the week; however, group intervention requires availability on Wednesday and/or Thursday afternoons.

Optional Training Opportunities: In addition to providing individual and group cognitive rehabilitation, interested fellows can gain experience in program development. Due to the rapid growth to meet patient needs across the state, opportunities for implementation of evidenced-based rehabilitation, program evaluation, development of updated manualized treatment, and interdisciplinary consultation and training of other providers are also available.

Supervision: Fellows have weekly individual supervision focused on their cases within this rotation. Dr. Fullen is the primary supervisor for this rotation. Availability for supervision is flexible throughout the week.

Didactics

Didactic opportunities unique to the neuropsychology fellowship are offered in addition to the general didactics that are scheduled for interns and fellows across the three tracks. They include the following:

- UAMS Neuropsychology Seminar (weekly)
- UAMS Neuroanatomy Seminar (biweekly)
- DBS Surgical Conference (monthly)
- Epilepsy Surgical Conference (biweekly)
- Neuro-Oncology/Gamma Knife Conference (weekly)
- Brain Cutting Conference (weekly or as scheduled)
- Neurology Grand Rounds (weekly)
- Movement Disorders Video Conference (as scheduled)
- Geriatric Cognitive Disorders Case Conference (monthly)
- Other Didactic Opportunities in conjunction with Neurology and Neurosurgery Residents as applicable

- BIRC Journal Club and other lectures as available

Research

Because UAMS is an academic medical setting, the Psychiatric Research Institute/Department of Psychiatry has multiple opportunities for research. Neuropsychology residents will be required to engage in research while completing their training program. This experience is designed to afford residents the opportunity to participate in neuropsychologically-focused research of their choosing from multiple ongoing research endeavors.

Current Research Opportunities:

Fellows will have access to four databases, which include neuropsychological test results for individual project development. These databases include a clinic-wide database and four specific databases for the following patient populations: individuals who are being evaluated for and who have undergone DBS for treatment of a movement disorder, individuals who are being evaluated for and who have undergone surgical intervention for treatment of intractable seizures, patients assessed in our Multidisciplinary MS Clinic, and individuals assessed for Traumatic Brain Injury.

In addition, the Cognitive Connectome project was established in 2012 as an initiative to enhance fMRI's translation into clinical care by mapping normative variance in the neural encoding of cognition. Healthy participants completed functional neuroimaging tasks and clinical neuropsychological assessment spanning eight cognitive domains: motor, visuospatial, language, learning, memory, attention, working memory, and executive function. The fMRI tasks include direct replications of neuropsychological instruments (such as the Judgment of Line Orientation task) as well as conceptual replications (such as the Tower of London and Tower of Hanoi tasks). To date, the Cognitive Connectome project has generated a whole brain atlas derived from task-based fMRI activity, the data from which has been used for a number of resident led research projects.

Other options may be available depending on the interests and funding of faculty members, so Fellowship applicants are encouraged to inquire about ongoing research projects that may compliment their scientific goals and objectives.

Supervision Opportunities

Fellows have the opportunity to serve as supervisors across both years of fellowship:

- The first-year neuropsychology fellow works with an undergraduate research extern who spends the year working within the Neuropsychology service for graduation credits. The

first-year fellow helps to design the training curriculum for the extern and mentors the extern through an independent research project.

- During the second year the fellow provides clinical supervision to the neuropsychology intern through a tiered supervision model.

Faculty

Chrystal Fullen, Psy. D.

Assistant Professor

Our Lady of the Lake University - 2019

Clinics: Walker Family Clinic, Freeway Clinic

Clinical interests: Traumatic and other acquired brain injuries, MS, cognitive rehabilitation, integrated neuropsychological assessment and intervention

Research interests: Program evaluation, efficacy of evidenced based rehabilitation models, assessment of executive functioning, and technological advancements in rehabilitation.

Jennifer Gess, Ph.D., ABPP/CN

Professor

Director, Psychology Training

Georgia State University – 2001

Clinic: Walker Family Clinic

Clinical interests: Epilepsy, brain injury, movement disorders, brain neoplasm, dementia

Research interests: Post-surgical cognitive outcome, the development of fMRI as a clinical tool



Lee Isaac, Psy.D.

Assistant Professor

Director, Neuropsychology

La Salle University – 2020

Clinics: Walker Family Clinic

Clinical interests: Geriatrics, neurodegenerative conditions, Parkinson's Plus syndromes

Research interests: Diagnostic specificity in the assessment of older adults

G. Andy James, Ph.D.

Professor

University of Florida- 2005

Research Location: Brain Imaging Research Center

Research Interests: Dr. James's research focuses on refining functional MRI methodology to better model how the brain encodes individual variance in cognition, thus translating this technology to clinical decision making.

Jennifer Kleiner, Ph.D., ABPP/CN

Professor
Director, Division of Psychology
Vice Chair for Faculty Affairs
University of Buffalo – 2004
Clinic: Walker Family Clinic
Clinical interests: Movement disorders, multiple sclerosis, dementia, brain tumors, brain injuries
Research interests: Presurgical evaluation for deep brain stimulation, normal variance in fMRI and neuropsychology

Applying to Fellowship

Eligibility Requirements

- On track for successful completion of APA accredited internship in Clinical Psychology, with specialty training in Clinical Neuropsychology prior to start of Fellowship.
- On track for successful completion of APA accredited doctoral program in clinical psychology (preferred) or counseling psychology prior to start of Fellowship. Dissertation must be completed prior to the start of fellowship.

Post-application requirements

- Personal interview (via remote platform) occurring in January 2024
- Successful completion of the neuropsychology matching program

Post-match requirements

- Pass criminal background checks by Arkansas State Police and FBI, including fingerprinting
- Pass pre-employment drug screen (Interns also subject per UAMS policy to random drug screens during internship)

Application Procedure

Application materials should be emailed to Dr. Jennifer Gess, Director of Psychology Training, at gessjenniferl@uams.edu

- Cover Letter
- Current CV
- Three letters of reference, one of which must be from internship
- Documentation of dissertation status and completion of dissertation by start of fellowship
- Two de-identified reports

The deadline for completed applications is **December 1, 2023**.

Interviews

Interviews will take place remotely during the month of January 2024. We will contact applicants to schedule an interview once all materials are reviewed.

Stipend and Fringe Benefits

Benefits: The current salary is \$48,000 for the first year and \$50,000 for the second year. Health insurance is available for families or single individual at a reasonable rate. All fees associated with EPPP and the licensure process (preparation materials, fees, etc.) are covered in full by the department. The resident will also receive some support for conference attendance with successful acceptance of a presentation. Vacation, sick leave, and professional leave are standard. The resident will have their own office with up to date technology support.

Psychology trainees are considered Medical School House Staff and participate in all fringe benefits allotted to Medical Interns and Residents as set forth by UAMS and Arkansas Children's Hospital. These include, but are not limited to, paid professional liability insurance coverage, paid hospitalization insurance policy for the intern, plus benefits at nominal cost for dependents.

Contact Information

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