



COLLEGE OF MEDICINE
The UNIVERSITY of OKLAHOMA

OUHSC CLINICAL NEUROPSYCHOLOGY POSTDOCTORAL RESIDENCY PROGRAM

Neuropsychology Faculty

Jim Scott, Ph.D., ABPP-CN
Neuropsychology Program Director
405-271-8001 ext. 47653
405-213-4588 Cell
Jim-Scott@ouhsc.edu

Christopher Copeland, Ph.D.
Neuropsychologist
405-271-8001 ext. 47602
Christopher-Copeland@ouhsc.edu

Daniel Heyanka, Ph.D., ABPP-CN
Neuropsychologist
405-271-8001 ext. 47747
Daniel-Heyanka@ouhsc.edu

Juliette Galindo, Ph.D., ABPP-CN
Neuropsychologist
405-271-8001 ext. 46160
Juliette-Galindo@ouhsc.edu

Indrani K. Thiruselvam, Ph.D., ABPP-CN
Neuropsychologist
405-271-8001 ext. 47603
Indrani-KThiruselvam@ouhsc.edu

Jessica Holster, Ph.D.
Pediatric Neuropsychologist
405-271-8001 ext. 47751
Jessica-Holster@ouhsc.edu

Scott Roye, Ph.D.
Neuropsychologist
405-271-8001 ext. 47645
Scott-Roye@ouhsc.edu

Neuropsychology Postdoctoral Residents

Jordan Hoffmeister, Ph.D.
1st Year Resident
jordan-hoffmeister@ouhsc.edu

OUHSC Clinical Neuropsychology Residency

University of Oklahoma Health Sciences Center
Department of Psychiatry & Behavioral Sciences
Oklahoma City, Oklahoma 73104
(405) 271-8001, Ext. 47680

Jim Scott, Ph.D., ABPP-CN,
Director Residency in Neuropsychology
Program Coordinator: Demaree-States@ouhsc.edu

The OUHSC Residency in Clinical Neuropsychology is a two-year specialty training program which includes didactic, clinical, and research activities. The program conforms to the Houston Conference Guidelines for Training in Clinical Neuropsychology. It is also a member of APPIC. The program currently has two full-time resident positions that are funded by OU Health. The faculty includes 7 full-time neuropsychologists. Three (3) of the 7 neuropsychologists are Board Certified in Clinical Neuropsychology.

The Residency in Neuropsychology is one of the oldest and most established training programs in the country. Our first Resident graduated in 1979. Approximately 80% of the graduates of this program have gone on to achieve diplomate status from the American Board of Professional Psychology.

Application and Selection Information

Applicants must have completed all requirements of an APA/CPA-approved doctoral program in Clinical or Counseling psychology and a one-year APA accredited clinical internship. Applications will also be accepted from individuals who have completed all requirements of a university based *APA-approved program of postdoctoral education for retraining in clinical or counseling psychology*. The program must conform to the guidelines established by the APA Council of Representatives. Applications may be considered from graduates from outside the United States or Canada, on a case-by-case basis. We cannot accept candidates from School Psychology programs as we cannot provide appropriate degree congruent supervision or experiences to make that student eligible for licensure.

The program is a full time 24 month program. All requirements for the Doctoral degree must be completed before the two year Residency can start. Residents may under some circumstances be allowed to participate in Residency activities prior to defending their dissertation, but any participation prior to completing all degree requirements cannot be counted toward meeting Residency requirements and will necessitate extending the Residency time to fulfill the 24 month requirement. The **start date of the Residency in Neuropsychology is the last working day of August** of the given year. Verification of completion of all degree requirements is required by your degree granting institution's Director of Training and/or Departmental Chair or Registrar's Office (transcripts).

As a member of the APPCN, neuropsychology applicants must register with National Matching Services, Inc. It is recommended applicants register with National Matching Services by January of the year the applicant wishes to apply. Each applicant is to submit a complete set of application material on the APPA-CAS System. In order to submit your application on the APPA-CAS System please [click here](#).

The following materials will be needed in order to complete the application process and be reviewed:

1. A letter of interest, clearly including a discussion of career goals.
2. A dissertation completion [status form](#) signed by your dissertation chair or Department Chair doctoral Training Verification form.
3. Three letters of recommendation.
4. A current curriculum vitae.
5. Two sample de-identified neuropsychological reports.
6. A copy of your graduate school transcript.

The deadline for the submission of application material is January 3, 2024. A Pre-Interview application review committee will review each application. Given the typically large number of applications we receive, we must limit the number of applicants who are offered an interview. All interviews are on an invitation-only basis. We will be conducting virtual interviews. After receiving your application material we will review all applicants and inform you of your status and whether you are invited for an interview. The Post interview selection committee will meet and rank applications for the National Matching Service process.

The Setting

The Clinical Neuropsychology Residency is offered through the University of Oklahoma Health Sciences Center (OUHSC) Department of Psychiatry and Behavioral Sciences. The program is administered through the OUHSC Department of Psychiatry and Behavioral Sciences. The OUHSC Department of Psychiatry and Behavioral Sciences and affiliated training agencies are located together in a large medical complex.

In addition to the Clinical Neuropsychology Residency, the educational programs of the department of Psychiatry and Behavioral Sciences include a Clinical Psychology Residency, General Psychiatry Residency, a Pre-doctoral Clinical Psychology Internship, a Pediatric Psychiatry Fellowship, and undergraduate medical education. The department offers all students, whether they be psychology residents, psychiatric residents, or medical students, many opportunities and interactions with other professionals in mental health service and other interdisciplinary providers across all settings.

Accreditation Status

The University of Oklahoma Health Sciences Center, Department of Psychiatry and Behavioral Sciences currently has three training programs: Pre-doctoral Internship in Clinical Psychology, Postdoctoral Residency in Clinical Psychology and a Postdoctoral Residency in Clinical Neuropsychology. The Postdoctoral Residency in Clinical Psychology and Postdoctoral Residency in Clinical Neuropsychology should have full accreditation status reinstated after the APA Site Visit that should be conducted by February 2024. The Postdoctoral Residencies (Clinical and Clinical Neuropsychology) have been accredited since 2002 and would have maintained APA-Accreditation had there not been a delay in Site Visits due to Covid-19.

Philosophy, Aim and Competencies

The Neuropsychology Residency site include the OUHSC hospitals and clinics. The Residency is consistent with the overall training goals of the OUHSC, which is committed to providing quality training to all health professionals. The OUHSC is also committed to ensuring students in all health disciplines are fully prepared,

both academically and clinically. Because the OUHSC is a training facility for a variety of healthcare providers, the Residency program fits well with the overall culture of the institution. The training culture includes an ongoing emphasis on the provision of clinical services, involvement in and understanding of research, and providing a challenging and supportive teaching and learning environment.

Aims and Competencies

Our program subscribes to the scientist-practitioner model of training. The Residency program selects individuals for the subspecialty of Neuropsychology. In addition to the broad training in Clinical Psychology, training also provides a focus on developing advanced clinical skills within the area of Clinical Neuropsychology as well as experience in research methodology. The dual focus on clinical and research training is consistent with the program's adherence to the scientist-practitioner model.

Additionally, the program conforms to the Houston Conference Guidelines on Specialty Education and Training in Clinical Neuropsychology. Science provides the backbone for our clinical programs and activities. The majority of our faculty members are involved in research projects in their clinical areas. Much of the resident's clinical and research training takes place in the same setting. Residents have experiences in assessment, intervention, and consultation. Our major aim is to prepare residents for advanced practice in clinical neuropsychology. In accordance with the Houston Conference Guidelines our program is "designed to provide clinical, didactic and academic training to produce an advanced level of competence in the specialty of clinical neuropsychology and to complete the education and training necessary for independent practice in the specialty".

The aim of the Clinical Neuropsychology Residency program is to provide the Residents with advanced skills and competencies necessary to function independently as licensed health service psychologists. As a result of the training received, Residents at the end of training will be able to perform at an advanced level in the following competency areas:

1. Demonstrate skills in assessment sufficient to practice at an advanced level.
2. Demonstrate skills in psychological treatment/intervention sufficient to practice at an advanced level.
3. Demonstrate advanced practice skills in the provision of consultation to providers in related disciplines and function effectively in consulting roles across settings.
4. Demonstrate an advanced understanding and awareness of individual and cultural diversity and integration of these issues into professional practice.
5. Demonstrate advanced knowledge related to the integration of science and practice in clinical psychology in addition to research and methods through scholarly activity.
6. Complete the clinical training and supervisory experiences necessary for applying for or obtaining state or provincial license or certification for the independent practice of psychology (or to obtain a certificate of proficiency in specific areas of practice as applicable). Demonstrate advanced professionalism with patients and colleagues and in professional situations independently across settings and contexts. This includes an understanding of professional conduct, ethics and law, and professional standards for providers of psychological services sufficient to practice at an advanced level.

In addition to the primary aim and competencies for Clinical Psychology, the Clinical Neuropsychology Specialty has a primary aim of producing graduates prepared for independent practice in the specialty area of Clinical Neuropsychology.

At the completion of the 2-year residency, Neuropsychology Residents will be able to perform the following specialty area competencies at an advanced level of competency in addition to the competencies noted above (1-7):

1. Demonstrate advanced understanding of brain-behavior relationships across the lifespan, including the neuropsychology of behavior, behavioral neurology, neuroanatomy, and neuropathology.
2. Demonstrate advanced knowledge of methods of measurement and psychometrics relevant to psychology and clinical neuropsychology.
3. Demonstrate skill in neuropsychological assessment including information gathering, interpretation, and report writing sufficient to practice at an advanced level.
4. Demonstrate skill in teaching and supervision sufficient to practice at an advanced level.
5. Complete the specialty clinical and supervisory experiences sufficient for eligibility for board certification by the American Board of Professional Psychology in Clinical Neuropsychology.

Training Settings

The training setting for the Clinical Neuropsychology Residency is in the Department of Psychiatry and Behavioral Sciences and most of our referrals come from Neurology, Neurosurgery and Oncology with other referrals coming from a wide array of providers at the HSC, state and regionally. A resident will work with several different clinical neuropsychology supervisors over the course of their training. The specific activities, the time spent with each supervisor, and the portion of a year spent in each setting are identified at the beginning of a year in the Resident's Training Plan (RTP), which is written by the resident with faculty guidance. The training plan will provide the resident an opportunity to expand on the Clinical Aims and Competencies (1-7 above) and Neuropsychology Specialty Aims and Competencies (level three competencies 1-5 above) listed above in order to develop a detailed plan for how they will meet the expectations for each competency.

Opportunities for assessment, intervention/psychotherapy, and consultation exist within all major training settings. The relative amount of each type of activity for each resident is based upon the resident's prior experience and training needs. All Residents will have some experience in all three types of activities.

As indicated above, the residency consists of (a) general and neuropsychology core didactics; (b) required and elective (optional) clinical placements; and (c) research and other departmental or related activities.

OUHSC Neuropsychology Lab

Neuropsychology Supervisors are James G. Scott, Ph.D., ABPP-CN, Christopher Copeland, Ph.D., Juliette Galindo, Ph.D., Daniel Heyanka, Ph.D., ABPP-CN, Jessica Holster, Ph.D., Indrani K. Thiruselvam, Ph.D., and Scott Roye, Ph.D. Dr. Holster is a pediatric neuropsychologist who also provides supervision in the clinic. Clinical Neuropsychology services are primarily outpatient, but limited inpatient experiences are available,

particularly with Wada and brain mapping procedures. Populations include primarily adults and older adolescents. Some pediatric neuropsychological assessment experiences are available with Drs. Holster. Typical referrals are obtained from physicians within the University Medical Center and from other hospitals and physician groups in the Oklahoma, North Texas, Southwest Missouri, and Northwest Arkansas areas.

Patient populations at OUHSC include the gamut of neuropsychology cases and include those with neuropsychiatric disorders, known and suspected neurodegenerative dementias of various types, mild cognitive impairment, brain tumors, stroke, traumatic brain injury, multiple sclerosis, toxic exposure, epilepsy and chronic pain. In addition to the above experiences, a unique opportunity exists to be involved in:

1. Kidney donor evaluations and solid organ pre-transplant evaluations.
2. Pre- and post-surgical DBS evaluations.
3. Pre- and post-surgical epilepsy evaluations.
4. Pre and post-surgical evaluations with adult brain tumor patients and participation in intraoperative brain mapping.
5. Wada testing.

The OUHSC Neuropsychology Laboratory is well equipped with 6 testing labs and a broad array of assessment instruments. Two full-time psychometricians are housed within the clinic in order to provide testing support. A personal computer is available in the laboratory for use in administering and/or scoring some assessment instruments. Most scoring is completed through an automated worksheet.

Residents at OUHSC can expect to be involved in completing the clinical and collateral interviews, test administration and scoring, integrative report writing, consultation, patient feedback, treatment planning, and brief supportive therapy involving adjustment to disability and/or cognitive rehabilitation. Additionally, each trainee has their own personal office with computer and other essential office equipment.

SUMMARY OF RESIDENCY ACTIVITIES

The following represents a concise summary of the clinical activities, requirements, and didactics included in the OUHSC Clinical Neuropsychology Residency Program. *In total, you will complete 2000 hours during each year of residency and you will accumulate over 1000 hours of face-to-face contact during the residency. Most residents evaluate between 110-120 patients each year.*

Design of Residency: The residency in neuropsychology is designed to provide extensive didactic training, clinical assessment, treatment experiences in neuropsychology, and development of research skills. Residency activities include both general and specific elements. Residents have the opportunity to choose certain clinical and research activities to fit with their goals and interests which is implemented and determined by their training plan. Additionally, residents work closely with one or more faculty members to develop and execute at least one research project or paper each year.

Resident Training Plan (RTP): We will provide you with an outline to complete a training plan that will serve as a guide for all of the clinical, research, and didactic experiences you will complete during residency. This training plan will help you meet the seven Clinical Competencies and five Neuropsychology Specialty Competencies contained within our program. We have several samples to help guide this progress.

Clinical: You will be scheduled to see three clinical cases each week with your supervisors. You are responsible for testing one patient each week (except during Medical Neuroscience course and Clerkship) and writing three reports (except during Clerkship). In all, you will likely average 12-14 hours of face-to-face clinical contact each week and another 25-30 hours of clinical documentation, research, and didactic activities.

Supervision: Residents will have two hours of regularly scheduled face-to-face supervision on a weekly basis. You will likely have additional informal supervision beyond this, but a minimum of two hours must be scheduled in an individual format with your clinical supervisors each week.

Didactics: You will spend a significant portion of your residency completing regularly scheduled didactic activities each week throughout the residency. Two additional required didactics are offered at certain times during the residency. Medical Neuroscience course (fall of the 1st year) and 4-week Neurology Clerkship (spring of the 2nd year). Didactics include:

- A. Neuroscience course with Medical Students – (10 weeks **October -December**)
- B. Neuropsychology Case Conference (1.0 hour weekly)(required)
- C. Neurology Chairman’s Morning Report (1.0 hour weekly)(recommended but optional)
- D. Neurology Rounds (1.0 hour weekly)(recommended but optional)
- E. Neurosurgery Rounds (1.0 hour monthly)(Optional)
- F. Psychiatry & Behavioral Sciences Grand Rounds (2.0 hours monthly) (75% attendance required)
- G. Clinical Neurology Clerkship (1 month **during second year**)(Required unless granted variance)
- H. Professional Development Seminar (3 hours monthly)(required)
- I. ABPP Preparatory Didactic (2-3 hours monthly)(recommended but optional)
- J. Research Meetings (2 hours monthly) (recommended but optional)
- K. Directors’ Meetings (30 minutes twice per month)

Research: Each year you will complete a research project. You will also have a research supervisor. Past projects that have been published are included in this packet. Other projects that would count towards this requirement aside from peer review studies include completing scholarly literature review with Discussion, completing a research grant application, performing a scholarly metanalysis or other scholarly project that is approved by the training committee faculty.

By the end of your Postdoctoral Fellowship, you will have completed all of the formal course work and clinical rotations of our Medical Students at graduation.

Didactics Description

A. Neuroscience course with Medical Students – (10 weeks during Fall Semester)

The neuroscience course is attended by the first year residents along with the 2nd year medical students. The class is in session approximately 3-4 hours each day and includes a brain dissection/gross anatomy lab experience. During this 10 week experience, residents continue to see cases with their supervisors, but the 1 day per week testing requirement is suspended during this time. While lectures are recorded and can be viewed at any time, residents are encouraged to attend class on a daily basis.

B. Neuropsychology Case Conference (1.0 hour weekly)

Neuropsychology case conference is attended by the core neuropsychology faculty, neuropsychology interns, neuropsychology residents and other trainees on rotation. Residents are typically expected to present twice each year with the 2nd year residents also taking on administrative duties associated with scheduling presenters. Presenters typically include neuropsychology faculty, neurology faculty, residents, and interns.

C. Neurology Chairman's Morning Report (1.0 hour weekly)

Morning report is facilitated by the Chair of Neurology and essentially works like a min-fact finding session with the neurology residents and attendings. This is primarily an observational experience for our residents and interns, but provides insight into how neurologists conceptualize cases from a medical perspective. This is often one of the favorite didactics of the residents.

D. Neurology Rounds (1.0 hour weekly)

This didactic is a lecture type experience that occurs weekly and is facilitated by neurology. There are a vast number of speakers from neurology, radiology, neuropsychology, and neurosurgery and is a well-attended didactic experience.

E. Neurosurgery Rounds (1.0 hour monthly-Optional)

Neurosurgery rounds occurs on a monthly basis. Given some topics fall outside of the purview of neuropsychology, this is an optional seminar.

F. Psychiatry & Behavioral Sciences Grand Rounds (2.0 hours monthly; 75% attendance required)

Psychiatry rounds occurs on the 2nd and 4th Thursdays. Topics include those relevant for psychiatrists, psychologists, and social workers with topics addressing issues related to clinical work, education, ethics, teaching and research.

G. Clinical Neurology Clerkship (1 month during second year)

The clerkship is a month long experience that takes place within neurology during which all other neuropsychology related activities are suspended so that one might immerse themselves in the clerkship experience. Activities including learning the neurologic exam, education and training on interpreting structural imaging, understanding the principles of lesion location, and gaining an understanding of the role of neurology in the medical setting. Residents will take all quizzes and exams and are expected to attend and participate in all assigned activities.

H. Professional Development Seminar (3 hours monthly)

This seminar is attended by the psychology interns, clinical psychology residents, and neuropsychology residents. It is comprised of topics related to professional issues, ethics, licensure, and cultural diversity.

I. ABPP Preparatory Didactic (2-3 hours monthly)

This is a didactic attended by only the residents and neuropsychology faculty. The purpose is to engage in a discussion of assigned readings that may assist in preparing residents for the written portion of the board exam.

J. Research Meetings (2 hours monthly)

Residents will meet with faculty to discuss ongoing research projects, solicit feedback from the group, and assist one another with establishing timelines for project completion.

K. Directors' Meetings (30 minutes twice monthly)

This is an opportunity for the residents and director to discuss clinical, research, and didactic activities on a weekly basis.

Current Research Projects and Recent Publications

The Neuropsychology Section in the Department of Psychiatry maintains a clinical database with over 12,000 subjects and many smaller databases from previous studies with specific populations. With appropriate IRB approval, these databases are available to trainees to explore and to facilitate research. Additionally, trainees have the option of proposing prospective studies to their supervisor and obtaining IRB approval for original data collection. Additional supervision is provided during weekly face-to-face supervision with either the program director or other individual neuropsychology supervisors.

Current/Recent Trainee Projects:

- 1) The effects of trait anxiety on cognitive decline among older adults with and without neurocognitive disorders.
- 2) Factor analysis of the Texas Functional Living Scale to further examine its psychometric properties and latent structure in a mixed clinical sample [accepted for publication].
- 3) Additionally, our research lab has been building a line of research looking at outcomes of neuropsychological services; collaboration on development of a novel approach to feedback delivery to patients.
- 4) A prospective study in which we are collecting data to test the effectiveness of the novel feedback tool, including how it may help improve patient comprehension, satisfaction, and adherence to recommendations.
- 5) Development of a provider survey associated with the feedback tool including provider perceptions of its usefulness.

Publications:

- Hoffmeister, J. R., **Roye, S.**, Copeland, C. T., & Linck, J. F. (2023). Adaptive Functioning Among Older Adults: The Essence of Information Processing Speed in Executive Functioning. *Archives of Clinical Neuropsychology*, acad031.
- Roye, S.**, Calamia, M., & Robinson, A. (2022). Examining patterns of executive functioning across dimensions of psychopathology. *Journal of Behavior Therapy and Experimental Psychiatry*, 101778.
- Roye, S., Linck, John, F.**, Hoffmeister, Jordan, & Copeland, Christopher, T. (2022). The Influence of Processing Speed, Attention, and Inhibition on Texas Functional Living Scale Performance. *Archives of Clinical Neuropsychology*, 1-9.
- Glen, T., Hostetter, G., Roebuck-Spencer, T. M., Garmoe, W. S., **Scott, J. G.**, Hilsabeck, R. C., ... & Espe-Pfeifer, P. (2020). Return on investment and value research in neuropsychology: A call to arms. *Archives of Clinical Neuropsychology*, 35(5), 459-468.
- Maietta, J. E.** (2022). *Cognitive Testing for Sport Concussion: The Immediate Post-Concussion Assessment and Cognitive Testing (ImPACT)* (Doctoral dissertation, University of Nevada, Las Vegas).
- Maietta, J. E.**, Barchard, K. A., Kuwabara, H. C., Donohue, B. D., Ross, S. R., Kinsora, T. F., & Allen, D. N. (2021). Influence of special education, ADHD, autism, and learning disorders on ImPACT validity scores in high school athletes. *Journal of the International Neuropsychological Society*, 27(5), 461-471.
- Tibbs, J. J.** (2021). *Alcohol Use and History of Traumatic Brain Injury in College Students: An Analysis of Neuropsychological and Behavioral Factors* (Doctoral dissertation, The University of Nebraska-Lincoln).
- Lowe, D.A., Nguyen, C.M.**, Copeland, C.T., & Linck, J.F. (2019). Factor analysis of the Texas Functional Living Scale in an outpatient clinical sample. *Archives of Clinical Neuropsychology*
- Nguyen, C.M., Lowe, D.A.**, Copeland, C.T., Heyanka, D.J., & Linck, J.F. (2019). Contribution of executive functioning to instrumental activities of daily living in older adults. *Applied Neuropsychology*.
<https://doi.org/10.1080/23279095.2018.1550408>
- Linck, J.F., **Copeland, C.T.**, Lokhande, A., Baranskaya, I., et al. (2017). Delirium and Dementia: Bedside assessment of confusional states, *Psychiatric Annals*, 47(4), 177-183.
- Carter, K.R.**, Scott, J.G., Adams, R.L., & Linck, J.F. (2016). Base rate comparison of suboptimal scores on the RBANS effort scale and effort index in Parkinson's disease. *The Clinical Neuropsychologist*, 30(7), 1118-1125.
- Copeland, C.T., Mahoney, J.J., Block, C.K.**, Linck, J.F., Pastorek, N.J., Miller...& Sim, A.H. (2016). Relative utility of performance and symptom validity tests. *Archives of Clinical Neuropsychology*, 31(1), 18-22.
- Heyanka, D.J., Thaler, N.S.**, Linck, J.F., Pastorek, N.J., Miller, B., Romessor, J., and Sim. A. (2015). A factor analytic approach to the validation of the Word Memory Test and Test of Memory Malingering as measures of effort and not memory. *Archives of Clinical Neuropsychology*, 30(5), 369-376.

Resident Stipends, Benefits, and Support

The stipend for 1st year resident is currently \$50,000 and \$52,000 for the 2nd year resident. Stipend levels are contingent on annual budgetary approval. Health insurance is available free of charge. Liability coverage is provided by the University Tort Claims Act. Residents receive 13 days of sick leave, 15 days annual leave and 5 days of academic leave.

Training Plan and Evaluation Procedures

The majority of didactic, research, and clinical activities are within the Clinical Neuropsychology specialty area. The Resident, working with a faculty supervisor, develops a Training Plan within the first month of the residency. As the Neuropsychology Training Director, Dr. Scott must approve this plan. The sections of the Training Plan correspond to the list of competencies for the program. Within each competency, the resident will document specific activities they will engage. The Resident's Training Plan (RTP) specifies clinical activities for the year, where these activities will take place, and the duration of training at each site. Didactics, including seminars, conferences and directed readings, are listed.

The topic area and a timeline for the Resident's research are also specified. Evaluations are completed by the training faculty every six months however Residents are provided feedback on their progress continuously through weekly supervision. The evaluations correspond to the 7 clinical and 5 specialty competencies of the Neuropsychology Residency listed above. Copies of the evaluations are available in the Policy and Procedure manual for the program and the faculty are required to review the evaluation with the resident upon completion of each six month segment of the residency.

Psychology Training Faculty (PTF)

Training is provided by a large number of psychologists who comprise a group known as the Psychology Training Faculty (PTF). The PTF are a diverse group of licensed psychologists, all with appointments to the training faculty within the Department. All training faculty hold an appointment (primary or secondary) in the Department of Psychiatry and Behavioral Sciences. Approximately 32 full-time psychologists belong to the PTF and participate in the training programs.

Neuropsychology Core Training Faculty

While residents will have exposure to a number of other psychology and non-psychology faculty through various didactic, clinical, and research activities, the following represent the core faculty involved in training for the Neuropsychology residents.

Christopher Copeland, Ph.D.

Dr. Copeland is a neuropsychologist and Assistant Professor in the Department of Psychiatry and Behavioral Sciences. His clinical interests are in neuropsychological assessment of neurodegenerative disorders, movement disorders, cerebrovascular disorders, and traumatic brain injury. He is involved in clinical and research supervision of residents in neuropsychology.

Juliette Galindo Ph.D.

Dr. Galindo is a Neuropsychologist and Assistant Professor in the Department of Psychiatry and Behavioral Sciences. Her clinical interests are in neurocognitive assessment of neurological populations, with a specialized

interest in stroke and acquired brain injury. She has an additional interest in training advocacy and improving supervision competencies. Dr. Galindo conducts evaluations in both inpatient and outpatient settings. She is involved in clinical and research supervision of residents in neuropsychology. She also lectures in the resident didactic series.

Daniel Heyanka, Ph.D., ABPP-CN

Dr. Heyanka is a neuropsychologist and Assistant Professor in the Department of Psychiatry and Behavioral Sciences. His clinical interests are in neuropsychological assessment and diagnosis of neurodegenerative disorders, brain tumors, movement disorders, cerebrovascular disorders, and traumatic brain injury. He has a special interest in the neuropsychological evaluation of patients prior to and following brain tumor surgery and treatment, as well as involvement in intra-operative brain mapping during tumor resection surgery.

Jessica Holster, Ph.D.

Dr. Holster is an Associate Professor and Clinical Neuropsychologist in the Department of Psychiatry and Behavioral Sciences at OUHSC. She has amassed extensive pre- and post-doctoral training in neuropsychology among patients across the lifespan. Her current focus is in pediatric neuropsychology; she primarily provides clinical services to children and adolescents with a variety of developmental and neurological disorders in inpatient and outpatient settings. As an educator, Dr. Holster participates in the training of Psychiatry and Psychology interns and residents. She is active in research as well.

Indrani Thiruselvam, PhD, ABPP-CN

Dr. Thiruselvam is a board-certified neuropsychologist and Clinical Assistant Professor at OU Health. Her clinical interests are in the evaluation of adults with neurological, medical, and neurodevelopmental disorders and she is part of OU Health's multidisciplinary memory care clinic. She supervises neuropsychology trainees and lectures in various didactics.

Scott Roye, Ph.D.

Dr. Roye is a clinical neuropsychologist and Assistant Professor in the Department of Psychiatry and Behavioral Sciences. His clinical interests are in adult neuropsychological assessment of neurodegenerative disorders, movement disorders, cerebrovascular disorders, and traumatic brain injury. He also has a special interest in pre- and post-surgical evaluations for patients with epilepsy. He is involved in clinical and research supervision of neuropsychology residents.

Jim Scott Ph.D., ABPP-CN

Dr. Scott is a Professor in the Department of Psychiatry and Behavioral Sciences, Vice-Chair and Director of Clinical Psychology training Programs, and a neuropsychologist in the Adult Neuropsychological Assessment Laboratory. He is also the Clinical Neuropsychology Resident Director. His clinical interests are in assessment of neurosurgical and neurological populations. He also has interest in forensic and completes evaluations in this area. He is involved in clinical and research supervision of residents in neuropsychology. He also lectures in the resident didactic series.