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To help you enhance your understanding and use of our tools, we have developed resource centers and training opportunities for a number of specialties and topics.

While you're at NAN, stop by our booth to see how the most comprehensive selection of assessments can be right at your fingertips.

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<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome from the Program Chair</td>
<td>4</td>
</tr>
<tr>
<td>Board of Directors</td>
<td>6</td>
</tr>
<tr>
<td>Conference Committees</td>
<td>7</td>
</tr>
<tr>
<td>Exhibitors &amp; Sponsors</td>
<td>8</td>
</tr>
<tr>
<td>Schedule-at-a-Glance</td>
<td>10</td>
</tr>
<tr>
<td>General Information</td>
<td>12</td>
</tr>
<tr>
<td>Workshop Information</td>
<td>15</td>
</tr>
<tr>
<td>Registration Form</td>
<td>32</td>
</tr>
</tbody>
</table>
On behalf of the NAN Board of Directors and the 2018 Program Committee, I am excited to welcome you to the 38th Annual Conference of the National Academy of Neuropsychology! We look forward to seeing you in New Orleans, Louisiana October 17 - 20, 2018. The NAN Program theme this year is Becoming Agents of Change. Highlighting this theme, we have prepared a forward-looking program filled with pioneering speakers to showcase innovations in clinical neuropsychological science and practice. There will also be opportunities for networking and time to enjoy the city of New Orleans!

You will not want to miss our opening keynote. Dr John Ratey is author of 11 books, including the groundbreaking ADHD series “Driven to Distraction” and most recently “Go Wild”. He will discuss the neuroscience of exercise and its effectiveness in forestalling the brain’s aging process and treating psychiatric disorders. The Distinguished Lifetime Contribution to Neuropsychology Award will be presented to Dr. Bryan Kolb, whose textbook “Fundamental of Human Neuropsychology” is now in its seventh edition. Dr. Kolb will discuss his revolutionary work related to neuroplasticity in the brain. Our esteemed NAN President, Dr. Cheryl Silver, will discuss aspects of ecological validity in the measurement of executive functions in children during her Presidential Address. We are also honored to have Dr. Ronald Ruff as our closing keynote. Dr. Ruff has contributed significantly to the profession of neuropsychology and will challenge us to move forward diagnosing and treating both our patient’s cognitive and emotional residuals.

Embodying the NAN program theme, take advantage of opportunities to learn about telehealth best practices (Dr. Maheu), novel technologies (Dr. Parson), and the value of digital medicine (Dr. Milani) in enhancing care delivery and assessment. Discover mechanisms for using naturalistic assessment (Drs. Chaytor & Robertson), biobehavioral measurement (Dr. Cohen), neuroimaging (Dr. Bigler) and evidence-based neuropsychology (Drs. Bowden, Davis, Meade, & Simpson) in clinical practice. Learn about expanding roles of neuropsychologists through collaborative care models (Drs. Parsley & Petranovich), teleneuropsychology, the military, and prescription authority (Drs. Kraft, Alley, & Wingler). Make sure to attend the diversity talks on implicit bias (Drs. Carter and Suarez) and conducting evidence-based bilingual neuropsychological assessments (Drs. Diaz-Santoz, Suarez & Cagigas). Other exciting workshops designed to provide up to date research and practice information on themes of importance to our profession and society include topics covering concussion (Dr. Iverson), chronic pain and opioids (Dr. Robinson), medicolegal aspects of pain psychology (Dr. Bianchini), providing testimony that sticks (Dr. Postal), contemporary ethical decision-making dilemmas (Dr. Gottlieb), dementia prevention (Drs. Locke & Farias), symptom validity testing in children (Dr. Harrison), and typical and atypical brain development (Drs. Settles, Hauck, Heller & Gleason).

Dr. Antonio Puente will provide his highly anticipated yearly update talk on developments in coding and reimbursement. This year, we are pleased that Drs. Neil Pliskin and Puente will also provide an expanded 3-hour interactive workshop on understanding and working with new testing codes. We are fortunate that Dr. Vaile Wright from the American Psychological Association will provide us with an update on the efforts being led by the Center for Medicare and Medicaid to shift to new reimbursement mechanisms. Representatives from the ABPP-ABCN (Dr. Stringer), ABN (Drs. Cooper & Wilhelm), and ABPdN (Dr. Dodzik) will also be providing workshops on the board certification process.

You will also find a series of five one-hour Paper Sessions. Themes for this year include: aging and dementia; assessment, pediatrics, executive function and adult concussion. Annual Grand Rounds presentations will allow adult and pediatric clinical neuropsychologists to conceptualize and discuss unique and interesting cases. The annual Student Luncheon, led by Drs. Monica Rivera-Mindt, Audrina Mullane and Lawrence Pick, will include an interactive format with the theme of developing multicultural competencies as a trainee. The Student Committee will host a student and post-doc social event and the Women in Leadership will host their annual networking event.

Our host for this year’s conference is the Sheraton New Orleans Hotel, located steps away from the famed French Quarter and New Orleans’ major attractions (i.e., Bourbon Street, Café du Monde, Jackson Square), great restaurants, and incredible music! Specific information about the hotel can be found at www.sheratonneworleans.com. Conference registration information, travel and tourism details are provided online at www.nanonline.org.

This year’s program would not be possible without the 2018 Program Committee and the support of NAN President Cheryl Silver, Executive Director William Perry, the Board of Directors, Poster Chair Chad Johnson, the Student Committee, and Student Volunteers (lead by Kristin Wilmoth and Sandra Burmaster). I would also like to extend my deepest appreciation to the dedicated staff at the NAN Office.

We look forward to seeing you in New Orleans in October!

Maureen Schmitter-Edgecombe, Ph.D.
2018 Program Chair
Use the CEFI Adult with confidence and gain accurate results regardless of brain trauma, cognitive impairment, or Alzheimer’s disease.

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<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>President (2018)</td>
<td>Cheryl H. Silver, Ph.D.</td>
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<tr>
<td>President-Elect (2019)</td>
<td>Tresa Roebuck Spencer, Ph.D.</td>
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<td>Beth C. Arredondo, Ph.D.</td>
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<td>Secretary (2018-2020)</td>
<td>Kristin Triebel, Psy.D.</td>
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<td>Member at Large (2016-2018)</td>
<td>Maureen O’Connor, Psy.D.</td>
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<td>Member at Large (2017-2019)</td>
<td>Karin JM McCoy, Ph.D.</td>
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<td>Member at Large (2018-2020)</td>
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<td>Past President (2017)</td>
<td>John Meyers, Psy.D.</td>
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<td>Past President (2016)</td>
<td>Laura Lacritz, Ph.D.</td>
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<td>Past President (2015)</td>
<td>Grant Iverson, Ph.D.</td>
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<td>Executive Director</td>
<td>William Perry, Ph.D.</td>
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</tbody>
</table>
Program Committee
Maureen Schmitter-Edgecombe, Ph.D. (Chair)
Chriselyn Tussey, Psy.D. (Program Chair-Elect)
Martin Rohling, Ph.D. (Past Program Chair)
Maureen O’Connor, Psy.D. (Board Liaison)
Robert Annett, Ph.D.
Melanie Chandler, Ph.D.
Ben Hill, Ph.D.
Justin Miller, Ph.D.
Sara Sullivan, Ph.D.

Continuing Education (Education Committee)
Julie Horwitz, Ph.D. (Chair)
Maureen O’Connor, Psy.D. (Board Liaison)
Laura Boxley, Ph.D.
Kathleen Goodall, Ph.D.
Carey Mintz, Ph.D.
Michelle Prosje, Ph.D.
Erin Reynolds, Psy.D.
Pooja Vekaria, Ph.D.
Martin Woon, Ph.D.
Cara Bussell, MA (Trainee Member)

Posters & Student Awards
Chad Johnson, Ph.D. (Poster Chair)
Sara Lippa, Ph.D. (Past Poster Chair)

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HappyNeuron
Meyers Neuropsychological Services
Oxford University Press
WPS

(This is not a complete list of those who will be exhibiting, rather it is a list of those organizations who have signed up as of our print deadline.)
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The SPECTRA is unique among existing assessment instruments in that it measures psychopathology at three levels of specificity, allowing clinicians to collect valuable clinical information on a wide range of psychiatric conditions.

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- **Brief**—contains only 96 items.
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SCHEDULE-AT-A-GLANCE

WEDNESDAY, OCTOBER 17
CE Workshop (2 CE)  
7:00 am - 9:00 am  
1. Stringer - ABCN Test Prep
Continental Breakfast  
7:30 am - 9:00 am
CE Workshops (3 CE)  
9:00 am - 12:00 pm  
2. Chaytor & Robertson - Ecological & Naturalistic Assessment  
4. Settles - Childhood Brain Development Trajectories
Student Luncheon  
12:00 pm - 1:00 pm  
5. Developing Multicultural Competencies
CE Workshops (2 CE)  
1:00 pm - 3:00 pm  
6. Iverson - Concussion: Recovery & Sequelae  
8. Schoenberg - Adult Grand Rounds
Welcome & NAN Business Meeting  
3:30 pm - 4:30 pm
CE Workshop (1 CE)  
4:30 pm - 5:30 pm  
9. Puente - CPT Update
Keynote Address (1 CE)  
5:30 pm - 6:30 pm  
10. Ratey - Exercise & the Brain
Women in Leadership Networking Event  
7:30 pm - 9:30 pm

THURSDAY, OCTOBER 18
CE Workshop (2 CE)  
7:00 am - 9:00 am  
11. Cooper & Wilhelm - ABN Test Prep
Continental Breakfast  
7:30 am - 9:00 am
CE Workshops (3 CE)  
9:00 am - 12:00 pm  
12. Parsey & Petranovich - Neuropsychology & Integrated Care Models  
13. Bigler - Integrating Neuroimaging in Practice  
Poster Session A  
12:00 pm - 1:30 pm
Exhibit Hall Open  
12:00 pm - 3:30 pm
CE Workshops (1.5 CE)  
1:30 pm - 3:00 pm  
15. Milani - Reengineering Healthcare Delivery  
16. Robinson - Chronic Pain & Opioid Epidemic
Paper Sessions (1 CE)  
1:30 pm - 2:30 pm  
17. Aging & Dementia  
18. Assessment  
2:45 pm - 3:45 pm  
19. Pediatrics  
20. Executive Function
CE Workshops (1.5 CE)  
3:30 pm - 5:00 pm  
21. Carter & Suarez - Understanding Implicit Bias  
22. Postal - Neuropsychological Testimony that Sticks
Paper Session (1 CE)  
4:00 pm - 5:00 pm  
23. Adult Concussion
CE Workshop (1 CE)  
4:00 pm - 5:00 pm  
24. Wright - Medicare: MIPS/MACRA Reporting
President’s Address (1 CE)  
5:30 pm - 6:30 pm  
25. Silver - Executive Functioning in Children
President’s Reception  
6:30 pm - 8:00 pm
Poster Session B  
7:00 pm - 9:00 pm
Exhibit Hall Open  
7:30 am - 9:00 am  
8:00 pm - 9:00 pm
Student & Post-Doc Social Event

FRIDAY, OCTOBER 19
CE Workshop (2 CE)  
7:00 am - 9:00 am  
26. Dodzik - ABPdN Test Prep
Continental Breakfast  
7:30 am - 9:00 am
CE Workshops (3 CE)  
9:00 am - 12:00 pm  
27. Parsons - Clinical Neuropsychology & Technology  
28. Bianchini - Pain in Medicolegal Context  
*  
Special Interest Group Meetings  
12:00 pm - 1:30 pm
Exhibit Hall Open  
12:00 pm - 3:30 pm
CE Workshops (2 CE)  
2:00 pm - 4:00 pm  
30. Gottlieb - Ethical Decision Making  
31. Locke & Farias - Interventions to Delay Dementia  
32. Fastenau - Pediatric Grand Rounds
Awards Ceremony  
4:30 pm - 5:00 pm  
Naugle
Distinguished Lifetime Contribution to Neuropsychology Award Address (1 CE)  
5:00 pm - 6:00 pm  
33. Kolb - Plasticity in the Developing Brain

SATURDAY, OCTOBER 20
Continental Breakfast  
7:30 am - 9:00 am
CE Workshops (2 CE)  
8:30 am - 10:30 am  
34. Maheu - Telehealth Best Practices: Assessment  
35. Bowden - Using Evidence-Based Neuropsychology  
36. Harrison - Validity Testing and Children
Keynote Address (1 CE)  
11:00 am - 12:00 pm  
37. Ruff - Future of Neuropsychology
Exhibit Hall Open  
7:30 am - 9:00 am  
8:00 pm - 9:00 pm

*Courses with a diversity or ethics theme
Concussion is an ever-evolving discipline.

Want to provide best-in-class concussion care to your patients? The resources on this site can help you stay current on the best practices in concussion management.

This easy-to-search database contains independent and peer-reviewed studies that help clinicians validate their use of ImPACT Applications’ concussion assessment tools.
CONTINUING EDUCATION (CE)
The National Academy of Neuropsychology is approved by the American Psychological Association to sponsor continuing education for psychologists. NAN maintains responsibility for the program and its content. CE Credit will be awarded on the basis of one credit per one hour of instructional time. A maximum total of 29 CE credits may be earned. There will be no CE credits offered for participation in the Student Luncheon or the special interest group meetings. NAN is committed to providing educational programs of the highest quality. Participants who are dissatisfied with a NAN educational program are encouraged to seek an appropriate resolution as outlined in NAN's Grievance Policy (available from the NAN Office). CE letters will be available electronically after the conference.

ETHICS & DIVERSITY CONTENT
The APA does not accredit CE sessions as ethics or diversity sessions per se, nor does NAN as an APA CE provider. Whether a CE session meets requirements for ethics or diversity training is a distinction made by state authorities regulating the practice of psychology who require on-going ethics or diversity training for license renewal. It is typical for such regulators to require that ethics or diversity training be received in a CE-accredited session (NAN is an APA CE provider) and then to examine the content of the specific CE session to make sure that it meets their requirements for ethics or diversity training. Consequently, NAN recommends that attendees consult with their individual regulatory authority in advance if ethics or diversity credit is desired. For your convenience, NAN has marked courses with a diversity or ethics theme (#) so that you may follow up with appropriate state authorities.

AUDIO RECORDING
Audio recordings of many of the workshops will be available for purchase following the conference.

CODE OF CONDUCT AND BEHAVIOR POLICIES
We value the participation of each member of the NAN community and want all attendees to have an enjoyable and fulfilling experience. Accordingly, all attendees, guests, speakers, exhibitors, and volunteers are expected to show respect and courtesy to others at all times. All communication and behavior, in person, online, or otherwise, should be appropriate for a professional environment. Those violating these rules may be asked to leave the conference with or without a refund at the sole discretion of the conference organizers.

STUDENT & POST-DOCTORAL RESIDENT REGISTRATION
NAN values its commitment to the professional development of students, interns, and post-doctoral residents. Pre-doctoral student members with a letter verifying their student status will pay a discounted $150 for general registration. Registration for verified pre-doctoral non-member students is $200. NAN post-doctoral resident members with a letter of verification from a supervisor pay a reduced rate of $275. Please note that individuals registered as students will not receive credit for CE courses.

GUESTS OF ATTENDEES
Guest badges are available for purchase during the registration process. Badges for adults are $75 and children are $25. A guest badge permits access to the food and beverage functions at the Annual Conference, including continental breakfast on Wednesday, Thursday, Friday, and Saturday, as well as the President's Reception on Thursday evening. Guest badges for adults and children do not permit access to conference sessions or the exhibit hall outside of the designated reception time. Guests without a badge will be asked to leave. Guests are required to abide by the Code of Conduct and Behavior Policies.
**COURSE HANDOUTS**
In an effort to be environmentally responsible, NAN is trying to reduce the amount of paper we use at our conferences. Again this year, course handouts will be available to attendees electronically prior to the conference. **No printed course handouts will be distributed at course sessions.**

**BADGE POLICY**
After checking in at the Conference Registration desk, your badge is your pass to all scheduled conference activities. You must wear your badge to be admitted to workshops, the exhibit hall, and poster sessions. You will be denied entry if you do not display your badge.

**PHOTO RELEASE AND CONSENT STATEMENT**
Please note: Your registration for a National Academy of Neuropsychology program includes your acceptance and agreement to the following photo release and consent statement:

I give permission to the National Academy of Neuropsychology to take photographs of me while I am engaging in neuropsychology education workshops. I also grant the right to edit, use and re-use said products for any and all educational, public service, marketing and outreach purposes selected by the National Academy of Neuropsychology. I release any and all rights, titles and interest I may have in said photographs, movies, video tapes, website productions, finished pictures, reproductions, copies or negatives of the same in connection with such uses.

**CANCELLATION POLICY**
A 50% refund is possible for written cancellation requests postmarked and mailed by **September 14, 2018** to NAN at 7555 East Hampden Avenue, Suite 525, Denver, CO 80231. Cancellations will not be accepted by phone. **Refunds will not be issued for cancellations requested after September 14, 2018.** No refunds are given for cancellations on-site.

**TRANSPORTATION INFORMATION**

- **Local Airport:** Louis Armstrong New Orleans Airport (MSY)
  - Travel Distance from Hotel: 15 miles

- **Shuttle:** Airport Shuttle
  - For reservations please call (504) 522-3500
  - Approximately $30 USD each way

- **Taxis:** Taxi service is readily available at the airport on the first level of the terminal.
  - Approximately $30 USD each way

- **Hotel Parking:** Valet Parking only, $46 USD daily

- **Streetcar:** The four distinct lines, each originating Downtown, provide easy transit along Canal Street, St. Charles Avenue, and the Riverfront.
  - One-way: $1.25 USD
  - One-day: $3.00 USD

**HOTEL INFORMATION**
Situated in downtown New Orleans, the Sheraton New Orleans Hotel is within walking distance of Bourbon Street, the Riverwalk, the Port of New Orleans and much more. Moreover, the hotel’s proximity to the historic Canal Street streetcar line ensures travelers can easily venture out to experience all parts of the city, including the Garden District and Magazine Street. Booking a room in the room block at the Sheraton New Orleans Hotel is an important way to support NAN and ultimately keep overall meeting costs and registration prices as low as possible. Staying “within the block” is also more convenient and helps you stay connected with the informal activities and networking opportunities that occur at the headquarters hotel during the conference.

**Reservations:** Once you have registered for the Annual Conference, you will be provided with the necessary code to book your hotel reservation either online or by phone at the conference rate of $254 plus applicable taxes and fees. The deadline to make a reservation is **September 24, 2018 at 5pm CT.**
The American Board of Professional Neuropsychology (ABN) has been granting board certification in clinical neuropsychology since 1982. ABN encourages the pursuit of excellence and recognizes competence in skills relevant to the practice of clinical neuropsychology. The ABN’s credentialing process involves a credential review, written examination, work sample, and oral examination. Our mentors are available throughout this process to assist applicants and answer questions. ABN applicants are required to fulfill all core skills and knowledge competencies guidelines as defined by the Houston Conference, though they may be allowed specified areas of flexibility in methods and time frames of doing so. Diplomates enjoy a collegial, welcoming atmosphere, with ample opportunity to participate in leadership activities, including helping the Board of Directors advance the mission of the Board through sitting on a committee, or running for a position on the Board. There is also opportunity to help ABN in its collaborative efforts with other neuropsychology organizations.

Please visit us on the web at ABN-Board.com, or come by the ABN booth for additional information, and to meet members of the Board of Directors.

The Academy of the American Board of Professional Neuropsychology (AABN), a division of the ABN, is NOW RECRUITING post-doctoral neuropsychology training programs to join our consortium of other recognized training sites. Recognized programs have access to a large cache of didactic materials and information to augment the post-doctoral training experience, and to help fellowship programs meet the Houston Conference training guidelines. In addition to access to AABN’s archives of didactic materials, fellows in the program will be provided with support from AABN in the form of evaluation and monitoring of progress during training. The training experience is structured to prepare students for board certification in neuropsychology. The development and implementation of AABN was designed to strengthen the field of clinical neuropsychology by setting standards for post-doctoral training thereby fostering education, and the public’s confidence in the field of clinical neuropsychology. AABN is helping to fill the gap in number of available training programs in comparison to the number of applicants seeking fellowships.

The AABN Postdoctoral Residency Programs in Neuropsychology Training are structured to closely follow Houston Conference Guidelines on training and education in neuropsychology, the American Psychological Association’s Society for Clinical Neuropsychology (SCN), and the Association of Psychology Postdoctoral Internship Centers (APPIC) postdoctoral membership.

For more information, or to talk to a current AABN post-doctoral fellow or faculty member please visit us at the American Board of Professional Neuropsychology booth, or visit us on the web at www.aabnonline.com
**WEDNESDAY, OCTOBER 17**

7:00 am - 9:00 am  
**CE Workshop (2 CE)**

**Course 1**  
**Preparing for the ABPP Board Certification Examination in Clinical Neuropsychology: Everything You Wanted to Know but Didn’t Know Who to Ask**

Anthony Y. Stringer, Ph.D.  
Department of Rehabilitation Medicine, Emory University

This workshop is designed to familiarize potential candidates for board certification with the policies and procedures of the American Board of Clinical Neuropsychology (ABCN) Examination and to provide advice on study and preparation. The history of the development of board certification will be reviewed, current procedures described, and the process of examination explained. Myths about the ABCN Examination will be dispelled and replaced with factual data drawn from the many decades the examination has been administered. Participants will have ample opportunity to ask questions and raise any concerns that may be acting as barriers to seeking board certification; as Past President of ABCN, previous Chair of the ABCN Credential Review Committee, writer and evaluator of items for the ABCN Written Exams, previous Practice Sample Reviewer and Examiner for all three parts of the ABCN Oral Examination, and past Chair of the ABCN Ethics and Diversity Committees which together draft the Ethics part of the Oral Examination, Dr. Stringer is uniquely qualified to answer and address any questions or concerns related to the board certification process. At the end of this workshop, participants should be thoroughly familiar with the ABCN exam process and feel prepared to take the next step toward board certification in neuropsychology.

As a result of attending this presentation, the participant will be able to:

1. Summarize each phase of the ABCN board certification examination.
2. Distinguish between myths and facts about the board certification examination.
3. Explain the necessary qualifications for meeting credential review criteria for board certification.
4. Discuss and utilize strategies and study techniques to prepare for the examination.
5. Describe and utilize strategies that help candidates to succeed at each examination phase.

7:30 am - 9:00 am  
**Continental Breakfast**

9:00 am - 12:00 pm  
**CE Workshops (3 CE)**

**Course 2**  
**Ecological Validity and Naturalistic Assessment: Research Update and Clinical Applications**

Naomi Chaytor, Ph.D.  
Elson S. Floyd College of Medicine, Washington State University

Kayela Robertson, Ph.D.  
VA Puget Sound Health Care System

This course will provide a clinically relevant summary of the literature in two related constructs: Ecological Validity and Naturalistic Assessment. The first part of the course will be an overview of ecological validity and its role in clinical neuropsychology. Ecological validity is the degree of agreement between neuropsychological test performance and real world performance. Research regarding ecological validity, including current controversies and unanswered questions in the field, will be reviewed. The clinical implications of this literature will be explored via case vignettes of common clinical scenarios. Attendees will be given practical ways to translate research findings into routine clinical practice across clinical contexts. The second part of the course will explore naturalistic assessment, or the measurement of behavior in real-world environments. We will present a broad overview of current approaches to naturalistic assessment, including structured real world tasks, virtual reality, and smart home passive sensor systems. Research on how these naturalistic assessment tasks relate to traditional cognitive tests will be reviewed. We will highlight the ways in which this research has informed our understanding of functional limitations secondary to cognitive impairment within a variety of neurologic conditions. Case examples will be used to demonstrate the importance of collecting data in real-world environments to complement traditional neuropsychological assessment and inform recommendations.

As a result of attending this presentation, the participant will be able to:

1. Describe the differences between ecological validity and other forms of test validity.
2. Apply and use ecological validity research findings to help inform clinical neuropsychological practice.
3. Analyze and critique the utility of naturalistic assessment, as well as delineating the strengths and weaknesses of varying approaches.

**Course 3**  
**Roads Less Traveled: Emerging Practices in Neuropsychology**

Malissa Kraft, Ph.D.  
Edith Nourse Rogers VA Hospital

Glenn Ally, Ph.D.  
VA Puget Sound Health Care System

Ilaina Wingler, Ph.D.  
Chief, Mental Health Strategy, Air Force Medical Operations Agency (AFMOA)
In keeping with the conference theme of Becoming Agents of Change, we recognize that many neuropsychologists will find themselves or need to find themselves innovating new ways to practice beyond the traditional paper/pencil assessment, diagnosis, and recommendation-based practice of the present and past. In this workshop, a panel of speakers will present on novel practices in neuropsychology. Dr. Ally will discuss how he has integrated prescriptive authority into the practice of neuropsychology, Dr. Wingler the role of the neuropsychologist in military practice and leadership, and Dr. Kraft her practice in teleneuropsychology. Panelists will give a brief history of their area/field of practicing neuropsychology, a description of what they do, empirical evidence for the work that they do and its impact, and the forecast for the future and how the role may evolve. Helpful tips on getting started in any of these areas will also be provided.

As a result of attending this presentation, the participant will be able to:

1. Describe the current state of teleneuropsychology and discuss empirical evidence for its use with patients in underserved areas.
2. Discuss advantages, disadvantages, and ethical concerns brought about by adding prescription authority to the practice of neuropsychology.
3. Describe the history, current role, and future directions for the neuropsychologist in the military, in both leadership and practice.

**Course 4**

**Early Childhood Brain Development: A Clinical View of Exceptions to Typical Brain Developmental Trajectories**

Lisa D. Settles, Psy.D.
Tulane University School of Medicine
Tulane Institute of Infant and Early Childhood Mental Health

Margaret J. Hauck, Ph.D.
Department of Psychiatry and Behavioral Science, Tulane University School of Medicine

Sherryl Heller, Ph.D.
Tulane University School of Medicine
Tulane Institute of Infant and Early Childhood Mental Health

Mary Margaret Gleason, M.D.
Tulane University School of Medicine

Brain development is a complex and delicate dance that relies on the interactions of biology, genetics, and environmental factors. Areas of the brain develop asynchronously across the first few decades of life. Our understanding of how brain development influences changes in behavior, and how changes in behavior affect brain development, is less known and some have argued it is poorly understood. Myriad biological and genetic factors, along with assistance from environmental factors, contribute to “typical” brain development. When one of these factors is impaired, it can lead to devastating effects on the brain, and in turn learning, behavior, and emotional and physical health can be compromised. However, we do know the brain is, at times, a resilient organ following acute insults. In this course, we will discuss typical brain development in the early childhood period and will subsequently begin to examine how brain development can go awry and affect clinical presentation in children who are born prematurely, exposed to maltreatment, or diagnosed with a neurodevelopmental disorder.

As a result of attending this presentation, the participant will be able to:

1. Describe typical brain development in the early childhood period.
2. Recite the effects of prematurity on brain development.
3. Identify cumulative effects of early adversity on brain development.
4. Discuss brain development in individuals with neurodevelopmental disorders.

12:00 pm - 1:00 pm

*Student Luncheon
*Attendance is limited to students and post-docs only*

**Course 5**

**Developing Multicultural Competencies as a Trainee**

Monica Rivera-Mindt, Ph.D.
Professor of Psychology, Fordham University

Audrina Mullan, Ph.D.
Clinical Neuropsychologist, Samaritan Health Services

Lawrence Pick, Ph.D.
Professor of Psychology, Gallaudet University

The NAN Student and Post-Doctoral Resident Committee, in collaboration with the NAN Culture & Diversity Committee and the Hispanic Neuropsychological Society (HNS), will be hosting the Student Luncheon at the NAN conference. This year’s panel will consist of three esteemed neuropsychologists, Monica Rivera Mindt, Ph.D., Audrina Mullan, Ph.D., and Lawrence Pick, Ph.D., speaking to their experience of working with diverse and underserved populations, including: racial/ethnic minorities, those residing in rural communities, and D/deaf, hard of hearing, deaf-blind, and limited language and communication populations. The overarching goal of this year’s Student Luncheon is aimed at encouraging trainees to start thinking about how they may approach developing expertise in providing neuropsychological services to underserved groups in their communities and in the future. We will look forward to accomplishing this goal by having our panelists speak to their experience in developing multicultural competencies in clinical and research spheres, while also making time for Q&A.
1:00 pm - 3:00 pm

CE Workshops (2 CE)

**Course 6**

**The Spectrum of Concussion: Recovery Time, Treatment and Rehabilitation, and Possible Long-Term Effects on Brain Health**

Grant L. Iverson, Ph.D.
Department of Physical Medicine & Rehabilitation, Harvard Medical School
MassGeneral Hospital for Children™ Sports Concussion Program
Traumatic Brain Injury Program, Home Base, A Red Sox Foundation
Massachusetts General Hospital Program

Concussion has received enormous attention from the medical and scientific communities as well as extensive media coverage and public-policy interest. Although much has been learned, there remain critical unanswered questions relating to the clinical care, treatment, and ultimate wellbeing of student and professional athletes. This workshop will review the spectrum of concussion, from acute effects to possible long-term effects on brain health. Topics covered will include: (i) comorbidity factors that influence athletes’ trajectories of recovery from concussion; (ii) factors relating to fast and slow recoveries; (iii) improving assessment, treatment, and rehabilitation; (iv) examining possible long-term effects of multiple concussions on later-in-life brain health; and (v) a critical review of chronic traumatic encephalopathy.

As a result of attending this presentation, the participant will be able to:

1. Delineate anticipated recovery times for those who sustain a sport-related concussion.
2. List factors or characteristics associated with a slower recovery from concussion.
3. Develop and compile more personalized treatment and rehabilitation plans for those who are slow to recover.
4. Describe and critique what is known (and not known) about risks for long-term effects of multiple concussions, including accelerated aging, neurodegenerative diseases, and chronic traumatic encephalopathy.

**Course 7**

**Ambulatory Biobehavioral Measurement for Clinical Neuropsychology: Moving Beyond “Proof of Concept”**

Alex S. Cohen, Ph.D.
Department of Psychology, Louisiana State University

Recent innovations promise to reshape assessment of cognition in the next decade. These innovations include: 1) the availability of relatively inexpensive technologies for producing continuous streams of “biobehavioral” data; 2) the use of ambulatory data collection methods to expand the “boundaries” of assessment beyond the clinic setting; and 3) the advancement of methodological and statistical procedures for analyzing these “big data” streams. Collectively, these innovations can provide low-cost and time-efficient procedures translatable to a wide array of settings. Despite promise, these technologies have failed to move beyond a “proof of concept” stage. In part, this struggle reflects a reliance on traditional psychometric properties (i.e., reliability and validity) which ignore critical test parameters central to other disciplines, such as informatics, engineering, and computational and biomedical sciences. This talk focuses on “resolution,” which concerns the degree to which changes in a signal can be detected and quantified. Evaluating resolution requires a radically different approach to psychometrics and a focus on data scalability and integration across complex multi-dimensional sources. In the 21st century, technological and methodological advances hold the promise to revolutionize cognitive measurement. Yet, unlocking this potential will require a rethinking of traditional psychometrics.

As a result of attending this presentation, the participant will be able to:

1. Summarize key innovations in “biobehavioral” measurement relevant to clinical neuropsychology.
2. Identify key obstacles to implementing biobehavioral technologies within clinical neuropsychology.
3. Discuss and apply solutions for overcoming these key obstacles to advance biobehavioral measurement for clinical science.

**Course 8**

**Adult Grand Rounds**

Moderator:
Mike R. Schoenberg, Ph.D.
University of South Florida Morsani College of Medicine

Discussants:
Clea Evans, Ph.D.
Methodist Rehabilitation Center
Gregory Lee, Ph.D.
Barrow Neurological Institute
Robin Hilsabeck, Ph.D.
Dell Medical School
The University of Texas at Austin

Neuropsychological evaluation and intervention for adults necessitates knowledge of developmental history, the effects of aging on nervous system function, and the potential impact of other systemic medical illnesses, psychiatric conditions, and environmental, educational, and cultural effects on known or suspected neurologic dysfunction. It is critical in evidence-based neuropsychological practice for the clinician to integrate the best clinical research to guide assessment and interpretation in order to maximize patient outcomes. Adult Grand Rounds is a presentation designed to provide information about the necessary components of assessment and treatment planning via the format of case studies. These cases were selected to represent varied neuropsychological issues, and presentations will be followed by an opportunity for questions and discussion.

As a result of attending this presentation, the participant will be able to:

1. List the neuropsychological features of N-type calcium channel antibody-mediated autoimmune encephalitis.
2. Describe the evidence base for neuropsychological assessment and differential diagnosis in patients with features of Nonverbal Learning Disorder and discuss how neuropsychological services can benefit patients’ treatment and quality of life.

3. Describe an evidence-based neuropsychological assessment approach for assessing cognitive problems following cardiopulmonary failure among individuals with greater than expected neurocognitive deficits but retained function in activities of daily living.

Grand Rounds
A Case of Autoimmune Encephalitis Dementia
Willis P

A Case Study on Young-Adult Patient with Nonverbal Learning Disability
Olsen D, Fallows R

Hindsight is 20/20: Integrated Care Models, Confirmatory Bias, and the Man Who Lost His Identity
Miller J

3:30 pm - 4:30 pm
Welcome & NAN Business Meeting

4:30 pm - 5:30 pm
CE Workshop (1 CE)
Course 9
The New Testing Codes for 2019: An Introduction to a Paradigm Shift of Historical Importance
Antonio E. Puente, Ph.D.
University of North Carolina Wilmington

Recent changes to CPT require a drastically different conceptual framework which significantly revamps not only how to understand the process of testing but how to bill and be reimbursed accordingly. During this presentation, the historic changes will be introduced, including presenting the codes and discussing the use of the codes with and without technicians. Documenting for these codes will also be discussed, as well as how to bill them. The possible impact of the changes on professional neuropsychology will be considered. (Note: A longer version of this one-hour introduction will also be presented later in the program.)

As a result of attending this presentation, the participant will be able to:
1. Compare and contrast the prior testing codes with the new ones.
2. Discuss the foundation and theoretical framework for the new codes.
3. Apply the codes in a step-by-step process.

5:30 pm - 6:30 pm
Opening Keynote Address (1 CE)
Course 10
Exercise: A Daily Tonic to Get the Brain to Its Fullest Potential-and Keep It There
John J. Ratey, MD
Clinical Associate Professor of Psychiatry, Harvard Medical School

This lecture will present evidence supporting the effectiveness of physical exercise to help regulate the brain and psyche. I will discuss the neuroscience of exercise and how exercise helps to forestall the brain’s aging process. I will present evidence showing that exercise is an effective treatment for depression and provide guidelines to help prescribe an effective exercise regimen for your patients. In addition, I will alert participants to the fact that exercise and play are now being studied as a treatment or adjunct for most psychiatric diagnoses, and with good reason; in Attention-Deficit/Hyperactivity Disorder and the anxiety disorders, exercise has been recognized as a treatment on its own, and certainly we see it as one of the strongest co-treatments. I will also present data that exercise is perhaps the magic potion to help improve our ability to learn and remember, making us the most efficient learner we can be.

As a result of attending this presentation, the participant will be able to:
1. Utilize the principles of exercise science to guide treatment of adult and pediatric patients.
2. Negotiate and write an effective exercise prescription for every patient.
3. Discuss the research supporting the use of exercise in treating patients with a variety of psychiatric disorders.
4. Describe the use of exercise and play in helping caregivers and their patients prevent cognitive decline and lower the risk of developing Alzheimer’s disease.

7:30 pm - 9:30 pm
Women in Leadership Networking Event

The Women in Leadership (WIL) Committee is pleased to invite you to the WIL Networking Event in New Orleans entitled “The Complexity and Power of Negotiating Across Cultures” presented by Anya Ledford. Ms. Ledford is the Executive Director of PROGRESS and Director for Diversity and Inclusion at Carnegie Mellon University. She is an expert on multiple factors influencing women’s long-term career success. The WIL Networking Event is a wonderful opportunity for conference attendees to network as we continue to support women who have become leaders within our profession and encourage those who are seeking greater opportunities for leadership. Complimentary hors d’oeuvres and beverages for purchased will be served. Reduced fees are available for student members. Purchase your tickets early as space is limited!
Evaluate **Attention Disorders** and **Neurological Functioning**
Across the Lifespan.

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THURSDAY, OCTOBER 18

7:00 am - 9:00 am
CE Workshop (2 CE)

Course 11
American Board of Professional Neuropsychology Board Certification Preparation Workshop
Paula Cooper, Ph.D.
Paula Cooper, LLC
Karen L. Wilhelm, Ph.D.
WakeMed Health and Hospitals

The American Board of Professional Neuropsychology (ABN) is dedicated to the pursuit of excellence in the practice of clinical neuropsychology. Incorporated in 1982, ABN has developed a background review and examination process that evaluates competency within the field of clinical neuropsychology for the purposes of board certification. This special topic presentation will first review ABN’s history, mission, and current professional activities, but will primarily focus on reviewing all phases of the ABN boarding process, including the application itself, the written examination, work sample submissions, and the oral examination. The format for this special topic presentation will include a formal presentation as well as the opportunity for questions and answers. The presentation will close with a brief review of ABN’s postdoctoral training consortium, the Academy of the American Board of Professional Neuropsychology.

As a result of attending this presentation, the participant will be able to:
1. Describe the mission of the American Board of Professional Neuropsychology.
2. Explain the benefits of becoming boarded with the American Board of Professional Neuropsychology.
3. List the steps of the boarding process with the American Board of Professional Neuropsychology.

7:30 am - 9:00 am
Continental Breakfast
Exhibit Hall Open

9:00 am - 12:00 pm
CE Workshops (3 CE)

Course 12
Working Better Together: Integrated Care Models and the Role of Neuropsychology
Carolyn Parsey, Ph.D.
Department of Neurology, University of Washington School of Medicine
Christine Petranovich, Ph.D.
Department of Rehabilitation Medicine, Children’s Hospital Colorado

In the past decade, there has been a rise in integrated health care approaches that connect disciplines in patient-centered teams. Research has shown that effective implementation of a collaborative care model improves outcomes for chronic care patients and addresses mental health stigma while reducing overall cost of care. In this workshop, participants will learn about the origins of, empirical findings surrounding, and rationale for collaborative care models. The core principles of collaborative care and practicalities for implementation will be reviewed. The utility of neuropsychologists on integrated teams in various settings, including both adult and pediatric clinics, will be discussed. Benefits of and challenges to team-based patient care will be addressed.

As a result of attending this presentation, the participant will be able to:
1. Explain the rationale for, and benefits of, collaborative practice.
2. Discuss the differences between interdisciplinary, multidisciplinary, and transdisciplinary teams.
3. Describe the core principles of a Collaborative Care model.
4. Analyze and critique the role of the neuropsychologist within a collaborative care team.

Course 13
Integrating Neuroimaging with the Clinical Practice of Neuropsychology
Erin D. Bigler, Ph.D.
Professor of Psychology and Neuroscience, Brigham Young University

With 21st century technology permitting a host of quantitative as well as qualitative analyses of brain scans, especially magnetic resonance imaging (MRI), it is time to more systematically integrate information extracted from neuroimaging into the clinical practice of neuropsychology. Neuropsychology began in an era where the primary focus of neuroimaging findings was based solely on lesion detection. However, especially over the last decade, important developments in automated image analysis, open access region-of-interest neuroimaging databases with healthy typical-developing individuals as well as those with specific diseases/disorders, and commercially available quantitative neuroimaging programs have brought a new level of sophistication to the type of information that can be extracted from a scan and its potential clinical utility for neuropsychology. With emerging applied literature demonstrating how such findings relate to
neuropsychological outcome, it is becoming more important that this information be incorporated into neuropsychological practice. How to achieve this will be an area of concentration of this presentation. With evolving cognitive neuroscience and neuroimaging techniques to explore neural networks in ways not imaginable a decade ago, how network neuroscience applies to clinical neuropsychology will be a major focus of this presentation. Basic methods of image analysis, including volumetrics, surface and shape analyses, connectivity assessment using diffusion tensor imaging (DTI), and network detection with resting state functional connectivity mapping based on fMRI methods will all be discussed. Fundamentals of classic lesion detection will also be reviewed, but with an emphasis on how lesions disrupt networks.

As a result of attending this presentation, the participant will be able to:

1. Describe various methods for traditional identification of different kinds of lesions and abnormalities within a scan, based on standard clinical review of the images.
2. Demonstrate a basic knowledge of neuroimaging quantification techniques and how to conduct them.
3. Extract clinically relevant information from commercially available programs as well as those that are open source.

Course 14
Understanding and Working with the New Testing Codes
Neil H. Pliskin, Ph.D.
University of Illinois College of Medicine
Antonio E. Puente, Ph.D.
University of North Carolina Wilmington

In this presentation, the history, foundation, and evolution of the neuropsychological testing codes will be presented. The reason the new testing codes had to be revamped will be presented prior to outlining the theoretical and practical foundation of the new codes. Then, the codes will be presented, including the new numbers, definitions, and limitations. Documentation suggestions will be presented. RVUs and their implication for revenue streams will be considered. Finally, discussion of the long-term effect of the changes on the practice of clinical neuropsychology will be presented. Vignettes will be discussed.

As a result of attending this presentation, the participant will be able to:

1. Discuss the history, foundation, and evolution of the neuropsychological testing codes.
2. Use the codes to capture service provision appropriately, and demonstrate effective accompanying documentation, and billing.
3. Describe the implications of the new testing codes for changes in the practice of professional neuropsychology and on traditional revenue streams.

Course 15
Reengineering Healthcare Delivery: Optimizing Outcomes in Chronic Disease and Hospital Care
Richard V. Milani, MD
Chief Clinical Transformation Officer
Professor of Medicine, Ochsner Clinical School
University of Queensland School of Medicine

This presentation will review the impact of chronic disease on healthcare from a national and global health perspective and will discuss the failings of current healthcare delivery structures. We will describe the need for reengineering of care delivery to take advantage of newer technologies to achieve healthcare’s triple aim of improving the patient experience, improving health of populations, and reducing the per capita cost of health care. We will evaluate the impact of this new model of care delivery on disease outcomes, patient ability to manage their health and healthcare, and patient satisfaction. We will also explore the unintended and often unrecognized impact of routine hospitalization on patient outcome and the importance of circadian rhythms in health and disease. We will describe the role of artificial intelligence in predicting in-hospital events and discuss the impact of interventions that utilize this knowledge to promote new models of care delivery in the inpatient setting.

As a result of attending this presentation, the participant will be able to:

1. Explain the impact of health behaviors and social determinants in chronic disease outcomes.
2. Discuss the value of digital medicine in enhancing care delivery and patient self-management.
3. Discuss the value of altering the hospital environment of care.
4. Discuss the potential for artificial intelligence in improving hospital outcomes.

Course 16
Chronic Pain and the Opioid Epidemic: What Health Service Psychologists Need to Know
Richard C. Robinson, Ph.D.
Department of Psychiatry, The University of Texas Southwestern Medical Center at Dallas

Chronic pain is a debilitating condition that impacts over 100 million in the US and costs over $500 billion each year in direct and indirect costs. Despite increasing medical expenditures, the prevalence of chronic pain continues to rise. Beginning in the late 1990’s, the use of chronic opioid therapy grew to levels that have led to an epidemic despite a limited evidence base for its efficacy. Furthermore, growing evidence shows the deleterious impact of chronic pain and chronic opioid therapy on multiple areas of functioning. Given the prevalence of both chronic pain and chronic pain...
aspects of assessment, from new technologies to improved psychometric properties. The first paper looks at differences in driving performance on specific factors of driving risk in college-aged individuals with ADHD when compared to normal controls. The second paper investigates assumptions of computerized measures that are assumed to measure the same constructs as classic paper-and-pencil neuropsychological tests. The third paper expands the validity of a measure of risk for medication nonadherence and compares its performance to self-rating measures in epilepsy patients. The fourth paper applies an existing two-factor model of the Immediate Post-Concussion Assessment and Cognitive Test (ImPACT) for evaluation of test-retest reliability at 12-month and 24-month intervals. The final paper investigates the associations of ADHD and poor sleep, as well as the interaction of these variables, on baseline preseason cognitive performance on ImPACT.

As a result of attending this presentation, the participant will be able to:

1. Describe the specific weaknesses seen in ADHD during driving simulation.
2. Explain differences in computerized versus pencil-and-paper performance on tasks purported to measure the same construct.
3. Discuss the validity of an assessment tool for assessing risk in medication nonadherence when compared to self-reports of adherence in a diverse epilepsy population.
4. Identify risk factors for confounded baseline performance on ImPACT.

Papers

Attention-Deficit/Hyperactivity Disorder and Driving: Self-Reported Behaviors and Simulator Performance
Bernstein J, Calamia M, Roey S, De Vito A

What are Computerized Neurocognitive Assessment Tools (NCATs) Actually Measuring? Using Principal Component Analyses to Compare NCATs to Traditional Neuropsychological Tests

Assessment of Medication Management Capacity in Ethnically Diverse Adults with Intractable Epilepsy
Margolis S, Gonzalez J, Spindell J, Mohamadpour M, Grant A, Nakhutina L

Retest Reliability of the Immediate Post-Concussion Assessment and Cognitive Test Using a Two-Factor Theory with Various Interval Schedules
Ribery C, Rindge M, Daniel M, Pitkanen E

The Impact of ADHD and Short Sleep Duration on Preseason Symptom Reporting in Adolescent Student Athletes
Terry D, Cook N, Maxwell B, Zafonte R, Berkner P, Iverson G

and chronic opioid therapy, it is critical that health service psychologists develop an understanding of the nature of pain, and the impact of chronic pain and chronic opioid therapy on emotional and cognitive functioning.

As a result of attending this presentation, the participant will be able to:

1. Discuss the extent, causes, and impact of the current opioid epidemic.
2. Describe the neuroscience of pain.
3. Summarize the impact of pain and chronic opioid use on cognitive functioning.

Course 17
Paper Session: Aging and Dementia

This collection of papers includes topics relevant to both healthy aging and dementia interests. The first paper describes four neurocognitive domains relevant to the study of advanced Parkinson’s disease derived from exploratory factor analysis. The second paper investigates the possible relationship of alcohol abuse on earlier onset of dementia symptoms in Alzheimer’s disease. The third paper looks at the association of physical activity and cognition in normal aging using accelerometry for calculation of physical activity level. The fourth paper in the session looks at possible risk factors associated with Alzheimer’s disease and Lewy Body Disease. The final paper investigates neurocognitive measures that may predict expected financial capacity as a multidimensional construct of independence.

As a result of attending this presentation, the participant will be able to:

1. List and explain neurocognitive domains most impacted by advanced Parkinson’s Disease.
2. Identify health and risk factors for quality of life in both healthy aging and early onset Alzheimer’s.
3. Describe risk factors associated with different dementia disease processes.
4. Identify key factors that contribute to financial capacity.

Papers

History of Alcohol Misuse is Associated with an Earlier Onset of Alzheimer’s Disease
Becker J, Schaffert J, LoBue C, Adinoff B, Cullum C

The Neurocognitive Domains of Advanced Parkinson’s Disease
Matusz E, Brown D, Barrett M, Sperling S

Exploring the Dose-Response Effect of Physical Activity and Cognition in Healthy Aging Older Adults
Osuna J, Mestre Z, Wierenga C, Zlatar Z

Risk Factors for Earlier Onset of Dementia in Pure Alzheimer’s Disease, Mixed Alzheimer’s with Lewy Bodies, and Pure Lewy Body Disease: Autopsy-Confirmed Cases from the National Alzheimer’s Coordinating Center
Schaffert J, LoBue C, Lacritz L, Wilmoth K, Nguyen T, Didehbani N, Fields L, Cullum C

Cognitive Contributors to Financial Capacity in Older Adults
Sunderaraman P, Omollo S, Ho S, Stern Y, Cosentino S

Course 18
Paper Session: Assessment

The current collection of papers covers various novel aspects of assessment, from new technologies to improved psychometric properties. The first paper looks at differences in driving performance on specific factors of driving risk in college-aged individuals with ADHD when compared to normal controls. The second paper investigates assumptions of computerized measures that are assumed to measure the same constructs as classic paper-and-pencil neuropsychological tests. The third paper expands the validity of a measure of risk for medication nonadherence and compares its performance to self-rating measures in epilepsy patients. The fourth paper applies an existing two-factor model of the Immediate Post-Concussion Assessment and Cognitive Test (ImPACT) for evaluation of test-retest reliability at 12-month and 24-month intervals. The final paper investigates the associations of ADHD and poor sleep, as well as the interaction of these variables, on baseline preseason cognitive performance on ImPACT.

As a result of attending this presentation, the participant will be able to:

1. Describe the specific weaknesses seen in ADHD during driving simulation.
2. Explain differences in computerized versus pencil-and-paper performance on tasks purported to measure the same construct.
3. Discuss the validity of an assessment tool for assessing risk in medication nonadherence when compared to self-reports of adherence in a diverse epilepsy population.
4. Identify risk factors for confounded baseline performance on ImPACT.

Papers

Attention-Deficit/Hyperactivity Disorder and Driving: Self-Reported Behaviors and Simulator Performance
Bernstein J, Calamia M, Roey S, De Vito A

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Retest Reliability of the Immediate Post-Concussion Assessment and Cognitive Test Using a Two-Factor Theory with Various Interval Schedules
Ribery C, Rindge M, Daniel M, Pitkanen E

The Impact of ADHD and Short Sleep Duration on Preseason Symptom Reporting in Adolescent Student Athletes
Terry D, Cook N, Maxwell B, Zafonte R, Berkner P, Iverson G
2:45 pm - 3:45 pm
Paper Sessions (1 CE)

Course 19
Paper Session: Pediatrics

Paper topics in this session cover test sensitivity, disease processes, academic measures, post-concussive symptom profiles, and post-concussion anxiety as related to children and adolescents. The first paper in this session addresses variable findings and methodological concerns in the existing literature of academic outcomes following pediatric stroke. The second paper presents six case studies investigating neuropsychological deficits and patterns of performance in children with childhood central nervous system vasculitis. The third paper compares performance on the Halstead Category Test between psychiatrically hospitalized children with and without fetal alcohol exposure, comparing exposed children to both cognitively unimpaired children and children with non-alcohol-related cognitive disorders. The fourth paper investigates the differences in cognitive, emotional, and physiological symptoms in mild traumatic brain injury based on cause of injury. The final paper investigates the relationship of anxiety to prolonged recovery from sports-related concussion.

As a result of attending this presentation, the participant will be able to:

1. List and discuss methodological problems in current studies of academic function following pediatric stroke.
2. Describe the neurocognitive profile of childhood central nervous system vasculitis.
3. Discuss the sensitivity and use of the Halstead Category Test in differentiating performance between children with and without fetal alcohol exposure.
4. List post-concussive symptoms and explain the impact of anxiety in post-concussive syndromes.

Papers

Measures of Academic Functioning in Youth with Pediatric Stroke: A Systematic Review
Champigny C, Kahiami L, Desrocher M

Childhood Primary CNS Vasculitis: A Series of Case Studies
Holder C, Shay N

Halstead Category Test Sensitivity to Brain Disturbances in Fetal Alcohol Exposed and Cognitively Disordered Children
Sperbeck D, Craig P, Zelig M, Shaw R

Differences in Persistent Post-Concussive Symptoms Following Motor Vehicle Accident Versus Sports Injury in Adolescents
Tarkenton T, Wilmoth K, Hynan L, Didehbani N, Silver C, Cullum M

Post-Concussive Anxiety Symptoms Predict Later Recovery in Adolescent Student Athletes
Wilmoth K, Curcio N, Tarkenton T, Didehbani N, Hynan L, Miller S, Bell K, Cullum C

Course 20
Paper Session: Executive Function

The topics in this session cover both assessment and interventions involving executive functions. The first paper builds upon a previously-identified association between executive functions and weight loss to investigate if executive function training can improve weight loss outcomes. The second paper expands the use of a school- and home-based cognitive-behavioral intervention for children with an autism spectrum disorder to an electronically delivered service and explores this as a viable alternative to in-person training. The final paper addresses the interaction of executive functioning and daily life complexity in medication management for older adults.

As a result of attending this presentation, the participant will be able to:

1. Discuss the impact of executive functions on weight loss performance and explain the strengths and limitations of introducing executive function training to improve outcomes.
3. Explain the interaction of executive function and daily life complexity in medication management.

Papers

Executive Function Training to Improve Weight Loss
Galioto R, Britton K, Gunstad J, Rathier L, Pera V, Tremont G

Randomized Controlled Trial of e-Unstuck On-Line Parent Training Modules Versus In-Person Training
Kenworthy L, Childress D, Verbalis A, Armour A, Werner M, Travel M, Anthony L

Self-Reported Complexity of Daily Life Moderates the Association Between Executive Functioning and Daily Medication Management in Community Dwelling Older Adults

3:30 pm - 5:00 pm
CE Workshops (1.5 CE)

Course 21
Understanding Implicit Bias: Leading the Way Forward*

Evelyn R. Carter, Ph.D.
Office of Equity, Diversity and Inclusion, University of California, Los Angeles

Paola Suarez, Ph.D.
Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles

Implicit bias is the result of our implicit attitudes, which are introspectively unidentified, or inaccurately identified, traces of past experiences that lead to favorable or unfavorable reactions toward objects or people. These attitudes can be shaped by prevalent stereotypes, personal experiences, how and where we were raised, etc. Many times we are unaware of our automatic associations between certain groups and different stereotypes. Nevertheless, existing empirical evidence indicates that implicit bias has measurable consequences for how we see, treat, and evaluate people. Thankfully, our implicit biases are relatively malleable. Bias
be able to:

As a result of attending this presentation, the participant will mitigate its effects on our everyday interpersonal interactions. Focus on the mind science of implicit bias and discuss ways to mechanisms thereby preventing our implicit biases from stereotypical associations and external accountability bias reduction, as are strategies that lessen automatic bias (Perry et al., 2015), is an important first step toward awareness, or personal sensitivity to one’s expression of bias. As a result of attending this presentation, the participant will be able to:

1. Define implicit bias and explain how it is measured.
2. Discuss the consequences of implicit bias for our interpersonal interactions broadly, and within mental health care specifically.
3. Analyze, address, and change their own individual biases.
4. Explain how to recognize and address micro-aggressions in order to foster a more inclusive and diverse environment.

**Course 22**

**Testimony That Sticks: Disrupting Academic Communication and Setting the Truth on Fire in Neuropsychological Testimony**

Karen Postal, Ph.D.
Harvard Medical School
Lifespan Private Practice

How do we create access to complex, highly technical neuropsychological opinions that are outside of jurors’ framework of understanding in a way that is engaging, understandable, and, to quote Faulkner, sets the truth on fire? This workshop shares the fruits of four years of in-depth interviews with seasoned forensic neuropsychologists, attorneys, and judges, presenting compelling analogies, metaphors, and succinct explanations of assessment processes and findings as well as principles of productive expert testimony for direct and cross examination. At its heart, the workshop is about disrupting the academic communication style learned in our years of scientific training that results in a net loss of our ability to communicate clearly and simply about the neuroscience we love. It is about shedding jargon, giving ourselves permission to allow emotion to creep back into our language, freeing up our body language, and using vivid, clear language that allows us to create moments of genuine, productive communication with jurors and other triers of fact.

As a result of attending this presentation, the participant will be able to:

1. Identify traditional academic communication patterns that limit access to our opinions on the stand and utilize more effective communication strategies.
2. Shift the communication goal on the stand from “explaining neuropsychological assessment results” to “setting the truth on fire” by using vivid, accessible analogies and metaphors that allow jurors to connect with and utilize our testimony in their difficult work of deciding a case.
3. Explain, from the perspectives of attorneys and judges, what makes an outstanding neuropsychology expert witness.
4. Describe the difference between “winning” as an expert and being productive on the stand.

4:00 pm - 5:00 pm

**Paper Session (1 CE)**

**Course 23**

**Paper Session: Adult Concussion**

The topics in this paper session cover a variety of concussion-related assessment and outcome questions based on study of military populations. The first paper investigates possible underestimation of impairment following concussion when controlling for WAIS-IV FSIQ, due to the impact concussion may have on working memory and processing speed components for the overall composite. The second paper looks at the question of graded return to physical activity following concussion in a population that differs from the typical athlete populations studied and investigates symptom load and recovery following the use of low levels of activity in the early phases of recovery once past the 72-hour mark. The third paper in this session investigates the risk for chronic psychiatric symptoms and greater neurobehavioral dysfunction, despite similar neuropsychological performance, for veterans suffering from the common comorbidity of mild traumatic brain injury and post-traumatic stress disorder. The final paper in this session investigates the association of comorbid mild traumatic brain injury and post-traumatic stress disorder with increased concentrations of peripheral tau.

As a result of attending this presentation, the participant will be able to:

1. Describe the risk of underestimating concussion severity when controlling for WAIS-IV FSIQ in assessment of premorbid function and subsequent impairment.
2. Discuss the impact of low level physical activity on concussion recovery.
3. Identify the areas of increased risk for individuals suffering comorbid mild traumatic brain injury and post-traumatic stress disorder.
4. Describe the association of comorbid mild traumatic brain injury and post-traumatic stress disorder with increased levels of peripheral tau.

**Papers**

**Commonly Used IQ Measures and Their Suitability in Predictive Models of Cognitive Impairment After Concussion**

Ahrens A, Cole W, Schwab K

Changes in Activity Level and Symptom Recovery from Acute Mild Traumatic Brain Injury


Long-Term Neuropsychological and Neurobehavioral Outcomes in Combat Veterans with and Without Mild TBI and PTSD

Merritt V, Jurick S, Keller A, Hoffman S, DeFord N, Jak A

Mild Traumatic Brain Injury and Comorbid Post-Traumatic Stress Disorder is Associated with Peripheral Tau Concentrations

Workshop Information

4:00 pm - 5:00 pm
CE Workshop (1 CE)

Course 24
All You Want to Know about Medicare and Quality Reporting
C. Vaile Wright, Ph.D.
American Psychological Association

The world of health care is changing for providers, including psychologists and other mental and behavioral health specialists, with more emphasis being placed on tracking outcomes on patients in order to get reimbursed. But to do this, psychologists need access to outcome measures that accurately capture the mental and behavioral health problems that patients face. This presentation will focus on efforts by the Center for Medicare and Medicaid Services (CMS) to shift to new reimbursement mechanisms to replace fee-for-service. Specifically, the 2015 Medicare Access and CHIP Reauthorization Act established two payment reform models within Medicare’s Quality Payment Program: the Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models. An overview of how changes in Medicare will affect psychologists in 2019 and beyond will be presented, with a focus on reimbursement issues and quality reporting under MIPS. The presentation will also discuss resources being developed by APA and APAPO to help psychologists successfully participate in value-based payment programs.

As a result of attending this presentation, the participant will be able to:
1. Describe the benefits and barriers to measuring quality in professional practice.
2. Summarize the Merit-based Incentive Payment System (MIPS) and apply the relevant aspects of the law to professional practice.
3. Explain the role a data registry plays in the future of professional psychological practice and psychological science.

5:30 pm - 6:30 pm
President’s Address (1 CE)

Course 25
Ecological Validity and the Measurement of Executive Functioning in Children
Cheryl H. Silver, Ph.D.
President, National Academy of Neuropsychology

The objective of this presentation is to summarize the issue of ecological validity as it applies to the measurement of executive functioning in children. Topics will include comparing and contrasting information obtained from performance-based tests and parent rating scales. The audience will be invited to consider informant bias in ratings of child behaviors. Methods that could be used to increase ecological validity of child behavior assessment will be discussed.

As a result of attending this presentation, the participant will be able to:
1. Explain the challenges of measuring executive functioning in children.
2. Discuss the differences between measurement of executive functioning using performance-based tests vs. rating scales.
3. Describe at least one methodology that could be used to increase ecological validity of executive functioning measurement in children.

6:30 pm - 8:00 pm
President’s Reception
Poster Session B
Exhibit Hall Open

8:00 pm - 9:00 pm
Student Social Event
*Attendance is limited to students & post-docs only

Friday, October 19

7:00 am - 9:00 am
CE Workshop (2 CE)

Course 26
American Board of Pediatric Neuropsychology: Examination Preparation
Peter Dodzik, Psy.D.
Fort Wayne Neurological Center

The American Board of Pediatric Neuropsychology (ABPdN) is the only board certifying body devoted exclusively to assessing competence to practice pediatric neuropsychology. In this workshop, which is designed to familiarize the potential candidate with policies and procedures of the ABPdN examination and to provide advice on study and preparation, current officers of ABPdN will discuss details regarding the board certification process. The history of the development of board certification in pediatric neuropsychology will be reviewed, current procedures described, and the process of examination explained. Attendees will be provided details regarding each stage of the process, including the application, threshold training requirements, the written examination, and the professional work sample. Suggestions regarding preparation for the written examination, including a recommended reading list, will be provided. Workshop attendees will be provided with details regarding oral examination, which comprises an examination of scope of training, professional work sample, and fact-finding cases. Presenters will also discuss strategies for selecting a case for the professional work sample. In order to aid prospective applicants in understanding the specific scoring criteria, the workshop presenters will discuss the scoring criteria for each segment of the ABPdN examination. The workshop will review the establishment of the American Academy of Pediatric Neuropsychology, Journal of Pediatric Neuropsychology, and the national conference. Audience members will be encouraged to provide comments and ask questions of the presenters.
As a result of attending this presentation, the participants will be able to:

1. Explain the inception, rationale, and maturation of the American Board of Pediatric Neuropsychology (ABPdN) and the American Academy of Pediatric Neuropsychology and discuss the benefits of membership.
2. Describe the application process for board certification with ABPdN, including specific information regarding qualifications in training, scope of practice, and professional development.
3. List the requirements of the practice sample submission process and utilize this information to assist with case selection, report style, and format.
4. Discuss the development, validation, and revision of the Written Examination, as well as item content and study resources.
5. Prepare for the oral examination process and explain the roles of the examiners, ethical code of conduct, and structure of the evaluation.

7:30 am - 9:00 am
Continental Breakfast
Exhibit Hall Open

9:00 am - 12:00 pm
CE Workshops (3 CE)

**Course 27**

**Clinical Neuropsychology and Technology: What’s New and How We Can Use It**

Thomas D. Parsons, Ph.D.
Department of Psychology, University of North Texas

Although today’s neuropsychological assessment procedures are widely used, neuropsychologists have been slow to embrace technological advancements. The neuropsychological assessment procedures most commonly in use represent a technology that has barely changed since the first scales were developed in the early 1900s. Furthermore, clinical neuropsychologists are increasingly asked to make predictions about the impact of a given patient’s neurocognitive abilities and disabilities on everyday functioning. After a brief review of current neuropsychological assessments, this workshop will explore novel technologies (e.g., virtual reality environments) which hold promise for enhancing neuropsychological assessments.

As a result of attending this presentation, the participant will be able to:

1. Describe the history of computerized testing and explain how these developments shaped the present status of automated assessment.
2. Discuss the ways current and developing technologies can enhance traditional methods of neurocognitive assessment going forward.
3. Delineate ways in which virtual environments and scenario-based assessment can enhance the evaluation of patient capabilities and provide data with increased ecological relevance.

4. Explain the need for incorporating computational neuropsychology and data analytics to address diagnostic and assessment issues.

**Course 28**

**Pain Psychology for Neuropsychologists: An Updated Review of Empirical Literature on the Psychologically Complicated Pain Patient Seen in a Medicolegal Context**

Kevin J. Bianchini, Ph.D., FACPN
Jefferson NeuroBehavioral Group

Neuropsychologists are commonly called upon to perform evaluations of patients who present primarily with physical injury and pain (versus primarily a neurocognitive presentation). This workshop is designed to help improve neuropsychologists’ knowledge of the scientific foundation for assessments of pain patients. Participants will develop a working knowledge of how a variety of psychological factors negatively impact important outcomes (including symptom complaints and return to work) in patients whose primary complaint is physical injury/pain. Participants will also be able to understand empirically based risk factors that help identify when psychological factors are complicating pain outcomes. The modern peer-reviewed literature on psychological complications, psychological risk factors, and pain will be reviewed. Assessment strategies for identifying at-risk patients will also be reviewed.

As a result of attending this presentation, the participant will be able to:

1. Identify classes of psychological variables that modify reports of pain.
2. Summarize the literature on the effect of incentive on the outcome of workers with pain.
3. Describe the effects of pre-morbid and concurrent psychological factors on outcomes in psychologically complicated pain patient populations.
5. Identify empirically-supported strategies for the assessment of pain patients and discuss the relevance of these for evidentiary challenges.

**Course 29**

**Unpacking Linguistic Competence in Neuropsychology: Bridging Science to Clinical Practice in the Assessment of Bilingual Individuals**

Mirella Diaz-Santos, Ph.D.
University of California, Los Angeles

Paola Suarez, Ph.D.
Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, School of Medicine

Xavier E. Cagigas, Ph.D.
Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, School of Medicine

As a result of attending this presentation, the participants will be able to:

1. Explain the inception, rationale, and maturation of the American Board of Pediatric Neuropsychology (ABPdN) and the American Academy of Pediatric Neuropsychology and discuss the benefits of membership.
2. Describe the application process for board certification with ABPdN, including specific information regarding qualifications in training, scope of practice, and professional development.
3. List the requirements of the practice sample submission process and utilize this information to assist with case selection, report style, and format.
4. Discuss the development, validation, and revision of the Written Examination, as well as item content and study resources.
5. Prepare for the oral examination process and explain the roles of the examiners, ethical code of conduct, and structure of the evaluation.

7:30 am - 9:00 am
Continental Breakfast
Exhibit Hall Open

9:00 am - 12:00 pm
CE Workshops (3 CE)

**Course 27**

**Clinical Neuropsychology and Technology: What’s New and How We Can Use It**

Thomas D. Parsons, Ph.D.
Department of Psychology, University of North Texas

Although today’s neuropsychological assessment procedures are widely used, neuropsychologists have been slow to embrace technological advancements. The neuropsychological assessment procedures most commonly in use represent a technology that has barely changed since the first scales were developed in the early 1900s. Furthermore, clinical neuropsychologists are increasingly asked to make predictions about the impact of a given patient’s neurocognitive abilities and disabilities on everyday functioning. After a brief review of current neuropsychological assessments, this workshop will explore novel technologies (e.g., virtual reality environments) which hold promise for enhancing neuropsychological assessments.

As a result of attending this presentation, the participant will be able to:

1. Describe the history of computerized testing and explain how these developments shaped the present status of automated assessment.
2. Discuss the ways current and developing technologies can enhance traditional methods of neurocognitive assessment going forward.
3. Delineate ways in which virtual environments and scenario-based assessment can enhance the evaluation of patient capabilities and provide data with increased ecological relevance.
Neuropsychologists are frequently called upon to provide clinical services to the over 20% of the U.S. population who speaks a language other than English. However, practical guidance on conducting evidence-based neuropsychological assessments within a bilingual theoretical model remains scarce. We describe clinical cases seen at our outpatient training clinic that illustrate the discrepant diagnostic outcomes, as well as differences in treatment recommendations, that arise when a bilingual theoretical model, relative to a mainstream monolingual model, is systematically applied. We discuss the specific processes and techniques that we use in an effort to bridge current theory with applied clinical practice within these case examples, including the use of language dominance testing for test selection, appropriate norm selection, data interpretation, and treatment recommendations. Results from these case examples demonstrate the benefits in diagnostic decision making and treatment recommendations when objectively assessing language dominance and proficiency in bilingual patients. Finally, we will present a “mock supervision” to exemplify the mechanics of bridging the science and its limitations with clinical practice following the process approach to bilingual neuropsychological assessments. In summary, our goal for the workshop is to unpack the linguistic and cultural nuances featured in a bilingual neuropsychological assessment and to highlight the improvement in diagnosis and treatment recommendations when biopsychosocial principles are systematically utilized in assessing bilingual individuals.

As a result of attending this presentation, the participant will be able to:

1. Describe the neurocognitive and neuroanatomical correlates of bilingualism and explain the limitations of our goal-standard neuropsychological tools and norms when assessing bilingual individuals.
2. Assemble a linguistically competent neuropsychological protocol based on objective measures of language proficiency and fluency.
3. Analyze a datasheet summary using a bilingual neuropsychological framework.
4. Utilize a bilingual neuropsychological framework to optimize clinical outcomes.

12:00 pm - 1:30 pm
Special Interest Group Meetings
(all registrants welcome)
* Aviation Psychology
* Hispanic Neuropsychological Society
* VA Neuropsychology Group
* Post-Doc/Internship Conversation Hour

12:00 pm - 1:30 pm
Poster Session C

12:00 pm - 3:30 pm
Exhibit Hall Open

2:00 pm - 4:00 pm
CE Workshops (2 CE)
is not sufficient evidence to justify a public health campaign, but it is “appropriate for...health care providers to include mention of the potential cognitive benefits of these interventions.” With this workshop, we plan to provide an overview of the data surrounding behavioral interventions to support cognition in at-risk older adults and those with MCI, and to share our individual research work and clinical experiences implementing interventions in these populations.

As a result of attending this presentation, the participant will be able to:

2. Describe current evidence surrounding multi-dimensional interventions for support of healthy cognitive aging in at-risk older adults.
3. Analyze how this evidence can be put into practice with interested patient populations.

**Course 32**

**Pediatric Grand Rounds**

Moderator:
Philip S. Fastenau, Ph.D.
Case Western Reserve University / University Hospitals
Cleveland Medical Center

Discussants:
Allyson G. Harrison, Ph.D., C. Psych.
Queen's University
Karen Postal, Ph.D.
Harvard Medical School
Lifespan Private Practice
Scott Hunter, Ph.D.
University of Chicago Medicine

Neuropsychological evaluation and intervention with children necessitates knowledge of the developing central nervous system as well as an understanding of potential sequelae of developmental disorders, brain disease, and traumatic injury. Another critical component is the choice of valid assessment instruments for children and adolescents. Pediatric Grand Rounds is a presentation designed to provide information about these assessment components via case studies. These cases were selected to represent varied neuropsychological issues, and presentations will be followed by an opportunity for questions and discussion.

As a result of attending this presentation, the participant will be able to:

1. Integrate developmental history, psychosocial history, medical history, and neuropsychological data in complex pediatric case presentations and utilize this integrative framework in conceptualizing cases and drawing diagnostic conclusions.
2. Discuss the complex interplay of prenatal, developmental, academic, and psychosocial factors following in utero alcohol exposure.
3. Describe how methotrexate (MTX) therapy/neurotoxicity and resulting stroke can affect neurological, neuropsychological, and emotional/behavioral functioning in children and adolescents with acute lymphoblastic leukemia (ALL).

4. Explain the neurological and cognitive manifestations of demyelination and subcortical pathology in childhood.

**Grand Rounds**

Fetal Alcohol Syndrome in the Context of Multiple Etiological Factors
Lennox J

Neuropsychological Functioning Following Methotrexate Neurotoxicity Stroke in an 11-Year-Old Female with Acute Lymphoblastic Leukemia
Katz L, Sunquist M, Garaguzzo A, Scott M, Hunter S

Case Study of Cockayne Syndrome, Type 3 in 15-Year-Old Female
Mission P, Kessler-Jones A

4:30 pm - 5:00 pm
Awards Ceremony

5:00 pm - 6:00 pm
Distinguished Lifetime Contribution to Neuropsychology Award Address [1 CE]

**Course 33**

**Principles of Plasticity in the Developing Brain**

Bryan Kolb, Ph.D.
Department Neuroscience, University of Lethbridge

Neocortical development represents more than a simple unfolding of a genetic blueprint but rather represents a complex dance of genetic and environmental events that interact to adapt the brain to fit a particular environmental context. As the brain develops it progresses through a series of stages beginning prenatally and continuing through gestation, infancy and childhood, adolescence, and well into the third decade. The developing normal brain shows a remarkable capacity for plastic changes in response to a wide range of pre-conceptual, prenatal, and postnatal experiences. This review will examine the many ways in which early experiences, including environmental events such as sensory stimuli, early stress, noise, perinatal injury, psychoactive drugs, parent-child relationships, peer relationships, intestinal flora, diet, and poverty, alter brain development. This sensitivity of the brain to early experiences has important implications for understanding neurodevelopmental disorders as well as the effect of behavioral and medical interventions in children and adolescents and on the development of public policy.

As a result of attending this presentation, the participant will be able to:

1. Delineate the processes of brain development.
2. List and describe factors that influence normal brain development.
3. Explain the impact of perinatal complications on brain development and discuss implications for populations at risk, including women living in poverty.
This presentation offers a general overview of the ethical risk management issues in telebehavioral health with a particular focus on psychological assessment. On one hand, uninformed assessment professionals have been avoiding telepsychology as if it is illegal or unethical. On the other hand, some are unwittingly flocking to clients/patients through their own websites or offering their services through Internet-based provider networks which directly link to consumers. Both positions can harm those who entrust licensed professionals with their care. This program will serve as a quick overview of telebehavioral health laws, regulations, and ethics as required for clinicians by state boards and the American Psychological Association ethical codes. Legal issues to be covered will include licensure, informed consent, mandated reporting, malpractice carriers, HIPAA, HITECH, privacy and confidentiality. Ethical issues to be covered will include boundaries, privacy and confidentiality, competence and client/patient education techniques. Practical issues will cover preventing and handling emergencies when they occur. The presenter will define telebehavioral health terminology, introduce basic concepts, review the research history, outline risks and benefits and provide an introduction on best practices. Meta-analyses will be reviewed as per data accumulated by Hilty and colleagues (2014), Godleski and colleagues (2013) and others. The recently published telebehavioral health competencies will be outlined. More specific to assessment and neuropsychology, a current reference list for psychological assessment will be made available to participants. They will also be given access to more than 1,000 evidence-based references of direct relevance to telepsychology.

As a result of attending this presentation, the participant will be able to:

1. Outline at least two key federal or state legal issues of direct relevance to telehealth in the United States and Canada.
2. Describe at least two key ethical issues of direct relevance to telehealth as identified by the American Psychological Association.
3. Identify several leading researchers in technology-related neuropsychological assessment.
4. Discuss at least one foundational outcome study of direct relevance to neuropsychological assessment using telehealth.

Over recent decades, best practice in clinical neuropsychology has evolved from eminence-based to evidence-based practice (Chelune, 2017). Many clinicians, although aware of the evolution, aren’t certain about how to implement this change in everyday practice. This CE session will show you how to integrate key evidence-based techniques into clinical thinking to assist clinicians in operationalising evidence-based neuropsychology in the real world, shifting it from something theoretical to a practical part of everyday consultations. The CE session will use the technique of Critically Appraised Topics (CATs) to show how to find, evaluate, and, most importantly, apply the best available evidence directly to your patient. Presenters will demonstrate how to make explicit estimates of patient-relevant diagnostic probability or treatment benefit. After a general explanation of the common principles of CATs using readily available resources, we will present three examples of critical appraisals using case studies, showing how the CAT process influenced the decision making of the clinician. The case studies will focus on decision making around three common referral questions. The first case examines the CAT process influenced the decision making of the clinician. The real world, shifting it from something theoretical to a practical part of everyday consultations. The CE session will show you how to integrate key evidence-based techniques into clinical thinking to assist clinicians in operationalising evidence-based neuropsychology in the real world, shifting it from something theoretical to a practical part of everyday consultations. The CE session will use the technique of Critically Appraised Topics (CATs) to show how to find, evaluate, and, most importantly, apply the best available evidence directly to your patient. Presenters will demonstrate how to make explicit estimates of patient-relevant diagnostic probability or treatment benefit. After a general explanation of the common principles of CATs using readily available resources, we will present three examples of critical appraisals using case studies, showing how the CAT process influenced the decision making of the clinician. The case studies will focus on decision making around three common referral questions. The second considers how cognitive ability predicts return to work for a 50 year old commercial pilot, and the third evaluates whether modifications to CBT are appropriate for a younger person with cognitive impairment. We will show how the use of CAT techniques maximizes the opportunity for neuropsychologists to be agents of change in their patients’ lives.

As a result of attending this presentation, the participant will be able to:

1. Use the resources provided in this practical CE session to produce your own critical appraisal on a clinical topic of interest.
2. Describe the steps involved in undertaking a critical appraisal of a clinical question.
3. Apply the information gained from a critical appraisal to the diagnostic or treatment decision you are facing.
4. Demonstrate and discuss how information derived from a critical appraisal enhances your answers to your patient’s challenges.
Course 36
No Kidding: Validity Testing in the Assessment of School-Aged Children and Adolescents
Allyson G. Harrison, Ph.D., C. Psych.
Associate Professor, Queen’s University

One critical issue faced by assessors when evaluating school-aged individuals is determining the credibility of test performance and symptom complaints. This question is becoming more important given the secondary gains that currently exist for individuals diagnosed with a neurological disorder who require academic accommodations or treatment with stimulant medication. Subjective clinical evaluation of test-taking effort is flawed, thus requiring use of objective, standardized measures when assessing school-aged individuals. This workshop will acquaint participants with the topic of Performance Validity Tests (PVTs) and Symptom Validity Tests (SVTs) as they relate to the assessment of school-aged children and adolescents. Areas of focus will include: professional guidelines/position statements; reasons why clinicians must not rely on subjective impression alone when determining effort and validity of obtained test scores; and research on use of validity tests in this population, including which tests have the best empirical support for which age ranges and why some are insensitive to feigning or low effort in specific situations. The talk will conclude with illustrative case examples in which PVT/SVT failure had a direct impact on case conceptualization and how this was taken into account in improving diagnostic decisions and treatment recommendations.

As a result of this presentation, the participant will be able to:
1. List and describe the performance and symptom validity measures validated for use with children and adolescents.
2. Describe the difficulty evaluating the credibility of a patient’s performance when focused only on scores obtained on traditional psychometric tests.
3. Explain at least three reasons why a pediatric client might perform poorly on measures of test-taking effort.
4. Assess the appropriateness of existing Performance and/or Symptom Validity Tests for specific referral questions.

11:00 am - 12:00 pm
Keynote Address (1 CE)

Course 37
Where Do We Go From Here: The Future of Neuropsychology
Ronald M. Ruff, Ph.D.
Clinical Professor of Psychiatry, University of California San Francisco

In my 1999 NAN Presidential address nearly 20 years ago, I challenged my colleagues to change their primary focus on neuropsychological localization; since the development of Computer Tomography neuropsychologists have no longer been needed for the localization of brain tumors. Instead, I advised my colleagues that our patients would benefit far more if we focused on comprehensive assessment of all cognitive constructs, including verbal and visuospatial assessments of attention, memory, learning and problem solving. Secondly, I emphasized that we as clinicians needed to not only quantify both the weaknesses and strengths of each patient’s cognitive abilities, but that the time had come for us to develop treatments for cognitive remediation. In this talk, the progress that has been made in these areas over the past two decades will be briefly summarized. However, the primary focus of my 2018 follow-up talk will be to insist that neuropsychologists expand their assessment to capture – similar to the cognitive domains - the patients’ emotional residuals in a more refined manner. Thus, our neuropsychological discipline needs to move forward to focus on both diagnosing and treating our patient’s cognitive and emotional residuals.

To achieve an understanding of the emotional changes, administering 1 or 2 psychiatric tests (e.g., MMPI, Millon) is insufficient since these do not capture the losses following a brain injury. Thus, new tests must be developed to capture pre- and post-morbid emotional functioning that yields the necessary comparisons. Finally, I will address specific ways in which psychotherapy needs to be modified for patients with acquired brain damage – because our psychotherapeutic treatment methods developed for psychiatric illnesses are insufficient and at times even contraindicated.

As a result of this presentation, the participant will be able to:
1. Identify the full range of cognitive functions that need to be assessed in patients with acquired brain damage.
2. Discuss the weaknesses that remain in our cognitive assessments.
3. Identify limitations of using tests designed to capture psychiatric/emotional problems to assess individuals with significant brain damage.
4. Explain why the benefits of psychotherapy can vary in patients with different severity levels of cognitive impairment.
5. Develop efficacious treatments for the cognitive and emotional residuals of patients with varying presentations.
**Static Course Offerings:**
Audio recordings from previous NAN course offerings. Listen at your own pace, complete the short exam, and earn 3 CE credits.

- Lifespan Issues in Moderate-Severe Traumatic Brain Injury
- Understanding Autism Spectrum Disorders from a Neuropsychological Perspective
- Psychological Factors Associated with Concussion
- More topics to choose from online!

**Fall Online Course Offerings:**
Intensive, instructor-led courses completed over 12 to 15 weeks broken into manageable modules featuring lectures, case studies, discussion, and short exams.

- Behavioral & Cognitive Neurology (24 CE Credits)
- Clinical Neuroanatomy (30 CE Credits)
- Applications of Brain Imaging in Clinical Neuropsychology

**Upcoming Live Webinars:**
Convenient 1.5 CE credit presentations addressing current trends in neuropsychology with the opportunity for Q&A with the presenter.

- Short- and Long-Term Outcomes After Pediatric Traumatic Brain Injury
- Clinical Neuropsychology and Technology: What’s New and How We Can Use It
- Review and Update on Adult Performance Validity Testing

**Recorded Webinars:**
Miss one of the live webinars? The webinar recording will be available with the audio and PowerPoint presentation. Complete the short exam for 1.5 CE credits.

- Frontotemporal Dementia: The Behavioral Phenotype
- Chronic Traumatic Encephalopathy (CTE)
- Driving and Neuropsychology
- Alzheimer’s Disease vs. Alzheimer’s Diseases
- Neuropsychology in Sports-Related Concussion
- Neuroimaging for Neuropsychologists
- Neuropsychological Validity Testing
- Medically Unexplained Illnesses
- Effects of Alcohol on Cognitive Functioning
- DSM-5 and its Impact on Neuropsychological Assessment
- More topics to choose from online!

**Book Series:**
You can earn 7 CE credits per book in the NAN Book Series by reading one of the designated books and completing an online quiz.

- Civil Capacities in Clinical Neuropsychology: Research Findings and Practical Applications, Edited by George Demakis
- Secondary Influences on Neuropsychological Test Performance, Edited by Peter Arnett
- Neuropsychological Aspects of Substance Use Disorders: Evidence-Based Perspectives, Edited by Daniel N. Allen and Steven Paul Woods

**VISIT WWW.NANONLINE.ORG FOR MORE INFORMATION**

The National Academy of Neuropsychology is approved by the American Psychological Association to sponsor continuing education for psychologists. The National Academy of Neuropsychology maintains responsibility for this program and its content.
PERSONAL INFORMATION: This information will appear on your name badge exactly as you provide it. Please print legibly or type.

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GENERAL REGISTRATION FEE: Please select the appropriate option below. After October 12, you must register online.

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<th>Option</th>
<th>Postmarked by September 21</th>
<th>After September 21 Onsite or Online</th>
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<td>Women in Leadership Networking Event</td>
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Guest Names: _________________________________________________________

Please note: While there is no charge for these programs, we do require those wishing to attend to register, due to room capacities & fire code regulations. To receive CE credit, you must be scanned in and out of a course and have attended at least 75% of the session. You cannot register in advance for more than one course in competing timeslots.

WEDNESDAY, OCTOBER 17

CE Workshop (2 CE) 7:00 am - 9:00 am
- 1. Stringer - ABCN Test Prep

CE Workshops (3 CE) 9:00 am - 12:00 pm
- 2. Chaytor & Robertson - Ecological & Naturalistic Assessment
- 4. Settles - Childhood Brain Development Trajectories

CE Workshops (2 CE) 1:00 pm - 3:00 pm
- 6. Iverson - Concussion Recovery & Sequelae
- 8. Schoenberg - Adult Grand Rounds
- Welcome & NAN Business Meeting 3:30 pm - 4:30 pm

CE Workshop (1 CE) 4:30 pm - 5:30 pm
- 9. Puente - CPT Update

Keynote Address (1 CE) 5:30 pm - 6:30 pm
- 10. Ratey - Exercise & the Brain
Please note: While there is no charge for these programs, we do require those wishing to attend to register, due to room capacities & fire code regulations. To receive CE credit, you must be scanned in and out of a course and have attended at least 75% of the session. You cannot register in advance for more than one course in competing timeslots.

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</thead>
<tbody>
<tr>
<td>Membership Dues</td>
<td>2018 $____</td>
</tr>
<tr>
<td>(Student - $50, Post-Doc - $75, all others - $150)</td>
<td></td>
</tr>
<tr>
<td>TOTAL ENCLOSED</td>
<td>$____</td>
</tr>
</tbody>
</table>

PAYMENT METHOD:

NAN does not accept purchase orders, Discover, or American Express

- Check (Please make check payable to NAN)
- Visa
- MasterCard

Credit Card #: __________________________

Exp. Date: _______ / _______ Card Security Code (on back of card): ___________

Name of Cardholder: ____________________________________________

Signature: __________________________________________

Cancellation Policy:

A 50% refund is possible for written cancellation requests postmarked and mailed by September 14, 2018 to NAN at 7555 East Hampden Avenue, Suite 525, Denver, CO 80231. Cancellations will not be accepted by phone. Refunds will not be issued for cancellations requested after September 14, 2018. No refunds are given for cancellations on-site.

Send Completed Registration Form and Payment to:
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Phone: (303) 691-3694 | Fax: (303) 691-5983 | www.nanonline.org | Questions? Contact office@nanonline.org
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Hilton San Diego Bayfront
San Diego, CA