

**Postdoctoral Fellowships in  
Psychology  
Johns Hopkins All Children's Hospital  
Training Year 2024-2025**

**TRAINING BROCHURE**



**JOHNS HOPKINS**  
M E D I C I N E

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**JOHNS HOPKINS  
ALL CHILDREN'S HOSPITAL**



## **All Children's Vision, Mission, and Values**

### **Vision**

Creating healthy tomorrows... for one child, for All Children.

### **Mission**

To provide leadership in child health through treatment, education, advocacy and research.

- Treatment - Deliver quality services with compassion and commitment to family-centered care
- Education - Provide educational programs for our patients, families, employees and healthcare professionals
- Advocacy - Provide leadership in promoting the well-being of children
- Research- Develop, support and participate in clinical, basic and translational research

### **Values**

- Honesty and Integrity
- Inspiration and Hope
- Collaboration and Teamwork
- Inquiry and Innovation
- Compassion and Respect
- Responsibility and Safety

### **Value Statement**

"There is only one child in all the world, and that child's name is All Children"

--Carl Sandburg

### **Program Mission and Goals**

The psychology postdoctoral fellowship at Johns Hopkins All Children's Hospital (JHACH) seeks to recruit, train, and enhance the best and brightest as they attain expertise in pediatric and child clinical psychology. It is the goal of the program to prepare fellows with the necessary clinical and research skills for independent practice. The fellowship program at JHACH is designed to meet the postdoctoral supervised practice requirements for licensure within the state of Florida. Additionally, at the completion of fellowship, the fellow will have obtained the necessary requirements to pursue board certification in clinical child and adolescent psychology. We achieve this through direct teaching, evidence-based care, and scholarly inquiry, research via a scientist-practitioner model, informed professional development, and multidisciplinary collaboration.

The psychology fellowship program is comprised of two primary tracks (1) Pediatric Psychology and (2) Autism and Neurodevelopmental Disabilities.

**Pediatric Psychology.** This track focuses primarily on pediatric psychology, enhancing the fellows' breadth and depth of knowledge across a variety of illness groups. **Fellows can apply for specialization in:**

- **consultation-liaison and hematology/oncology/bone marrow transplant,**
- **consultation-liaison and pain psychology**
- **consultation-liaison and eating disorders**
- **hematology/oncology/bone marrow transplant with an emphasis on PCIT in pediatric oncology.**

Fellows will be expected to gain expertise in both inpatient and outpatient clinical work.

The hematology/oncology program at JHACH offers world class treatment to children, adolescents, and young adults with a variety of blood and cancer diagnoses. As part of the fellow's hematology/oncology rotation, the fellow will be expected to build competence working with patients who receive chemotherapy, radiation, surgical intervention, chronic blood transfusions, and/or bone marrow transplant.

The consultation-liaison rotation includes opportunities to train with a wide variety of acute and chronic illness and injury groups and an equally diverse group of medical providers. The consultation-liaison rotation is designed to train fellows how to efficiently assess patients, provide recommendations to patients, families, and medical providers, and deliver brief evidence-based interventions.

The pain rotation is designed to enhance a fellow's understanding and treatment of chronic pain in outpatient, inpatient, and multidisciplinary clinic settings. Interested parties have the possibility of learning several biofeedback modalities.

The eating disorder rotation uniquely combines interdisciplinary clinic experiences, with inpatient consultation for patients with known or suspected eating disorders admitted for medical stabilization, and outpatient therapeutic services (e.g., individual, FBT, group (RO\_DBT)).

The PCIT in pediatric oncology position includes engagement in grant-funded intervention trial evaluating cultural adaptations to PCIT in pediatric oncology. Opportunities for outpatient clinics, inpatient work, and psycho-diagnostic clinic with youth who have hematological/oncological disorder and/or a history of bone marrow transplant exist.

**Autism and Neurodevelopmental Disabilities.** This track focuses on training fellows in early detection, differential diagnosis, and intervention for children with neurodevelopmental disabilities such as Autism Spectrum Disorder, Intellectual Disability, Global Developmental Delay, Attention Deficit/Hyperactivity Disorder, Learning Disorders, disruptive behavior disorders, Language Disorder, and less frequently, internalizing disorders. Focus is placed on evidence-based assessment to support differential diagnosis and treatment recommendations. The position will include both inpatient and outpatient clinical experiences and the opportunity to become an integrated member on an interdisciplinary evaluation team within the JHACH Autism Program. Additional opportunities will include participating in interventions targeting core skill deficits using evidence-based approaches (e.g., behavioral parent training, group-based social skills training, and one-on-one behavioral treatment with a focus on caregiver acquisition of skills).

## **Setting**

Johns Hopkins All Children's Hospital provides expert pediatric care for infants, children, adolescents, and young adults with some of the most challenging medical problems in our community and around the world. Named a top 50 children's hospital by U.S. News and World Report, Johns Hopkins All Children's Hospital provides care in more than 43 pediatric medical and surgical subspecialties.

Johns Hopkins All Children's Hospital campus is located in Saint Petersburg, Florida. The hospital consists of 259 beds, with more than half devoted to intensive care level services. The hospital is made up of a 97-bed Level IV NICU, 22-bed Cardiovascular ICU with adjoining cardiac surgery and catheterization suites, a 28-bed PICU, 28-bed Neurosurgery and Surgery Unit, 56-bed Pediatric Medicine floor, 28-bed Vincent Lecavalier Pediatric Cancer and Blood Disorders Center, and a 28-bed Pediatric Emergency center. The Outpatient Care Center provides outpatient specialty care and includes a dialysis unit and infusion center. The Child Development and Rehabilitation Center houses psychology, neuropsychology, psychiatry rehabilitation services including physical medicine and rehabilitation, speech/language therapy, occupational therapy, physical therapy, audiology, and developmental pediatrics.

At Johns Hopkins All Children's Hospital, the Psychology Service provides psychological and neuropsychological clinical services to national and international patients ranging in age from infancy through young adulthood.

## **Program Administrative Structure**

Johns Hopkins All Children's Hospital Psychology Service is located in the Center for Behavioral Health of the Institute for Brain Protection Sciences. The Institute for Brain Protection Sciences is led by Dr. George Jallo, neurosurgeon. The Center for Behavioral Health is led by Dr. Mark Cavitt, psychiatrist. The Psychology and Neuropsychology Service are chaired by Dr. Jennifer Katzenstein, neuropsychologist.

## **Overview of Program**

Johns Hopkins All Children's Hospital serves as the primary children's hospital for Florida's central west coast. Divided into four institutes, the Institute for Brain Protection Sciences, Cancer and Blood Disorders Institute, Heart Institute, and Maternal Fetal Medicine Institute, the hospital serves the most medically complex children. Johns Hopkins All Children's Hospital is an academic partner with Johns Hopkins School of Medicine, providing the highest quality educational and research opportunities.

The Psychology Service is an integral part of the Center for Behavioral Health of the Institute for Brain Protection Sciences. As part of the mission of our program, we seek to train and educate

the best and brightest trainees, and provide top-notch experiences and supervision, providing skills for independence in an academic medical center. Fellows have access to the Johns Hopkins Welch Medical Library, as well as both Johns Hopkins and Johns Hopkins All Children's Hospital ancillary academic materials.

### **Postdoctoral Fellowship Training**

The Postdoctoral Fellowship in Psychology at JHACH is a full-time, 2000-hour program that is designed to be completed in 12 consecutive months of training. The program aims to prepare fellows for successful practice in child clinical and pediatric psychology through a structured series of didactics, supervised clinical experiences, and research opportunities. The psychology fellows will share some didactic and professional development time with the JHACH pediatric neuropsychology fellows and will interact with the JHACH predoctoral interns as umbrella supervisors. Additional fellows may also join the training program, funding permitting.

The psychology fellows will spend approximately 70% of their time providing psychological clinical services, as outlined below. Additionally, approximately 20% of their time is dedicated to research/professional activities and 10% didactics. In addition to each fellows' major rotation, the fellows participate in minor rotations, as part of their Personalized Education Plan (PEP). Fellows may select from additional training experiences dependent on interest, feasibility of scheduling, and support of primary supervisors. Time allotment for licensure to ensure independent success following the completion of fellowship.

### **Pediatric Psychology Fellowship**

The pediatric psychology fellowship offers positions for the upcoming training year:

- (1) consultation-liaison and hematology/oncology
- (2) consultation-liaison and pain psychology
- (3) consultation-liaison and eating disorders
- (4) hematology/oncology/bone marrow transplant with focus on PCIT in pediatric oncology

The pediatric psychology fellowship provides fellows with the clinical, didactic and supervisory experiences necessary to excel in the field of pediatric psychology. The training year is structured utilizing a semester system where fellows participate in their major rotations (as delineated by specialization (e.g., for (1) consultation-liaison and hematology/oncology, (2) consultation-liaison and pain psychology and (3) consultation-liaison and eating disorders – fellows' time is relatively balanced in general consultation-liaison service (C/L)/general pediatric psychology cases and either (1) hematology/oncology, (2) pain psychology, or (3) eating disorders. The program also offers fellows the opportunity to engage in two six-month minor rotations for additional learning experiences. For fellows in the (1) consultation-liaison & hematology/oncology, (2) consultation-liaison and pain psychology specializations and (3) consultation-liaison and eating disorder tracks, minor rotations are chosen in partnership with the fellowship

supervisors. Opportunities for minor rotations may include emphasis in hematology/oncology, pain, gender minority youth, neonatal intensive care, diabetes, and other subspecialty areas. For the fellow selected for the (4) hematology/oncology/BMT with focus on PCIT in pediatric oncology position, the minor rotation includes experiences in inpatient care and multidisciplinary hem/onc outpatient clinics. Fellows are expected to produce a minimum of 1-2 scholarly works (dependent on specialization and in discussion with primary supervisors) during the fellowship year, which can include published manuscript/s, grant application/s, and/or national conference poster/s. Existing databases are available and encouraged; however, strongly motivated fellows may choose to collect their own pilot data during the fellowship year in support of a future grant application.

### Sample Training Plan – C/L and Hematology/Oncology

	<b>Rotation 1</b>	<b>Rotation 2</b>
<b>Major</b>	Hematology/Oncology and General Consult-Liaison	Hematology/Oncology and General Consult-Liaison
<b>Minor</b>	Neonatal Intensive Care	Pain
<b>Research Goals</b>	Identify idea for grant, identify appropriate funding mechanism, write draft of grant proposal	Obtain supervisor feedback about grant proposal, incorporate edits, and submit grant application
<b>Required Didactics</b>	Psychology Seminar; Pediatric Grand Rounds; Inpatient Consultation table rounds; Psychosocial Rounds (CVICU/Hospital); Hematology/oncology psychosocial rounds; Supervision seminar	Psychology Seminar; Pediatric Grand Rounds; Psychosocial Rounds (CVICU/Hospital); Inpatient Consultation table rounds; Hematology/oncology psychosocial rounds; Supervision seminar
<b>Professional Development</b>	EPPP Studying or research	Apply for licensure and take EPPP Complete early ABPP registration

### Sample Training Plan – C/L and Pain Psychology

	<b>Rotation 1</b>	<b>Rotation 2</b>
<b>Major</b>	Pain and General Consult-Liaison	Pain and General Consult-Liaison
<b>Minor</b>	Neonatal Intensive Care	Healthy Steps – Obesity Clinic
<b>Research Goals</b>	Identify data analyses for proposed research project, run initial analyses	Write up manuscript for submission for peer-reviewed publication
<b>Required Didactics</b>	Psychology Seminar; Pediatric Grand Rounds; Inpatient Consultation table rounds; Psychosocial Rounds (CVICU/Hospital); Supervision seminar	Psychology Seminar; Pediatric Grand Rounds; Psychosocial Rounds (CVICU/Hospital); Inpatient Consultation table rounds; Supervision seminar

<b>Professional Development</b>	EPPP Studying	Apply for licensure and take EPPP Complete early ABPP registration
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### Sample Training Plan – C/L and Eating Disorders

	<b>Rotation 1</b>	<b>Rotation 2</b>
<b>Major</b>	Eating Disorders and General Consult-Liaison	Eating Disorders and General Consult-Liaison
<b>Minor</b>	ARFID Group	RO-DBT Group
<b>Research Goals</b>	Identify data analyses for proposed research project, Run initial analyses; Submit abstract for national conference	Write up manuscript for submission for peer-reviewed publication
<b>Required Didactics</b>	Psychology Seminar; Pediatric Grand Rounds; Inpatient Consultation table rounds; Psychosocial Rounds (CVICU/Hospital); Supervision seminar	Psychology Seminar; Pediatric Grand Rounds; Psychosocial Rounds (CVICU/Hospital); Inpatient Consultation table rounds; Supervision seminar
<b>Professional Development</b>	EPPP Studying	Apply for licensure and take EPPP Complete early ABPP registration

### Sample Training Plan – Hem/Onc/BMT, with focus on PCIT in pediatric oncology

	<b>Rotation 1</b>	<b>Rotation 2</b>
<b>Major</b>	PCIT in pediatric oncology (Clinical & Research)	PCIT in pediatric oncology (Clinical & Research)
<b>Minor</b>	General Hematology/Oncology/BMT Outpatient; inpatient consults and multidisciplinary clinics	General Hematology/Oncology/BMT Outpatient; inpatient consults and multidisciplinary clinics
<b>Research Goals</b>	Identify idea for grant, identify appropriate funding mechanism, write draft of grant proposal; prepare at least 1 manuscript from existing databases	Obtain supervisor feedback about grant proposal, incorporate edits, and submit grant application; submit at least one completed manuscript from existing databases
<b>Required Didactics</b>	Psychology Seminar; Pediatric Grand Rounds; Inpatient Consultation table rounds; Hematology/oncology psychosocial rounds; Supervision seminar	Psychology Seminar; Pediatric Grand Rounds; Inpatient Consultation table rounds; Hematology/oncology psychosocial rounds; Supervision seminar
<b>Professional Development</b>	EPPP Studying, Prepare job talk	Apply for licensure and take EPPP Complete early ABPP registration

## Clinical Services

The fellows are expected to participate in their major rotations throughout the training year. Faculty will tailor training experiences to the fellows' primary long-term interests, as pragmatic, and will allow fellows to participate in minor rotations outside specialization, if the fellow desires. For fellows within the Hem/Onc & C/L, Pain & C/L and Eating Disorder and C/L specializations, minor rotations are readily available in neonatal intensive care, pain, diabetes, and obesity; fellows may choose to pursue minor rotation experiences in other specialty areas with supervisor support and pending supervisor availability and area-competency. For the fellow within the Hem/Onc/BMT with focus on PCIT in pediatric psychology position, opportunity to engage in inpatient consultations and multidisciplinary hem/onc clinics is available. Ability to independently assess and treat common patient presentations is expected upon entry to the fellowship program. Supervision is provided in a developmental framework, such that fellows will progress in their ability to treat youth with complex medical and psychosocial needs throughout the training year. Telehealth opportunities are available. The goal of the fellowship program is to build the fellow's competency, autonomy, and confidence throughout the training year so the fellow is prepared for a pediatric psychology career.

### General Consult-Liaison Service Major Rotation

The C/L major rotation is comprised of two components: inpatient care and outpatient psychological services. Descriptions of each component can be found below.

**Inpatient C/L.** The fellows will be providing consultation and liaison services across the hospital. Patients seen on this service range in age from newborns to the mid-twenties and are located in the PICU, CVICU, 7N (Neurology/Surgery), 8N, and 8S (General Pediatrics). Referrals come from physicians, nurse practitioners or other hospital care providers. Close communication and collaboration with the medical team and supportive services (e.g., Child Life, Social Work, and Rehabilitation Services) is imperative, and the fellow will have the opportunity to participate in medical and discharge rounds. The fellows will be asked to evaluate children and their families for a wide variety of reasons, which may include, but are not limited to, coping with a newly diagnosed illness, recurrent pain, pain management, delirium, adherence to medical regimens, poor cognitive functioning, depressive symptoms, developmentally inappropriate behaviors, coping with invasive regimens, evaluating for trauma, etc. Following the initial assessment, recommendations are shared with the family and medical team. Ongoing treatment may be indicated. The fellow will be responsible for following the patient during their admission and working with supportive services to ensure appropriate care following discharge.

**Outpatient Pediatric Psychology Clinic.** The fellows will be expected to carry an approximate caseload of 6 general pediatric psychology patients to be seen in the psychology clinic. These cases will be identified through the inpatient C/L service. Referral reasons for outpatient therapy include adjustment/coping with illness, anxiety related to illness/medical procedures, treatment adherence, or family functioning in the context of medical illness/trauma. Frequency of appointments will be based on clinical need and may range from weekly-monthly.

## Hematology/Oncology Major Rotation

The general hematology/oncology major rotation consists of inpatient patient care and outpatient care. Descriptions of each component can be found below. Multidisciplinary hem/onc specialty clinics is a minor rotation offering (details also below).

**Inpatient Hematology/Oncology Service.** Consultation requests from the inpatient hematology/oncology medical team can result from a wide variety of patient concerns, including medication adherence, pain/nausea management, adjustment to diagnosis and treatment, mood, anxiety, end of life care, family functioning, and/or premorbid psychological problems that interfere with medical care. The fellow will respond to consultation requests by meeting with the patient and his or her family to assess concerns and provide recommendations. The fellow may also continue to meet with families throughout the patient's inpatient hospital stay and during subsequent inpatient hospital admissions, when appropriate.

**Outpatient Hematology/Oncology Service.** The fellow will be expected to carry an approximate outpatient clinic load of 6 hematology/oncology patients at any given time. Outpatient referrals may come from inpatient hematology/oncology consultations and/or from direct requests from the hematology/oncology team. Outpatient services are intended to help manage psychological and/or family functioning problems that interfere with medical treatment or with quality of life during cancer survivorship. Such problems can include poor adherence, clinically significant depression/anxiety, and/or family relational problems that impact the patient's ability to cope with cancer/blood disorder treatment and/or prognosis.

**Hematology/Oncology Clinics (Minor offering).** Multidisciplinary comprehensive clinics are common in hematology/oncology treatment centers. As part of each 6-month rotation in hematology/oncology, the fellow may join one hematology/oncology outpatient comprehensive clinic pursuant to availability. The fellow will attend the selected clinic, work with the interdisciplinary team to efficiently assess patients, then consult with the multidisciplinary team to help construct a cohesive treatment plan for each patient. Hematology/oncology comprehensive clinics are generally created by illness group. Multidisciplinary comprehensive clinic opportunities may include neurofibromatosis clinic, brain tumor clinic, sickle cell transition to adult care clinic, hemophilia clinic, and/or adolescent/young adult clinic.

## Pain Psychology Major Rotation

The pain major rotation is comprised of three components: inpatient care, outpatient psychological services, and participation in multidisciplinary pain clinic.

**Inpatient C/L.** The fellow will be providing consultation and liaison services across the hospital for chronic pain cases. Typical consult requests are for nonpharmacological pain management. Additional reasons for referral include, coping/adjustment to pain and co-occurring anxiety. Fellows will have the opportunity to complete inpatient consultations under the supervision of Drs. Frye (planned CRPS admissions) and Feldman (general pain consults). Following the initial assessment, recommendations are shared with the family and medical team. Ongoing treatment

may be indicated. The fellow will be responsible for following the patient during their admission and working with supportive services to ensure appropriate care following discharge.

**Outpatient Pediatric Psychology Clinic.** The fellow will be expected to carry an approximate caseload of 6 pain patients to be seen in the psychology clinic. These cases will be identified through pain clinic or the inpatient C/L service. Frequency of appointments will be based on clinical need and may range from weekly-monthly.

**Multidisciplinary Pain Clinic.** The fellow will participate with the attending psychologist in multidisciplinary pain clinic. The pain team is comprised of board-certified anesthesiologists, nurse practitioners, and psychologists to meet the needs of each child or adolescent with pain. Some of the most common conditions treated are headache, joint and back pain, amplified musculoskeletal pain syndrome (AMPS), acute pain from injury or surgery, abdominal pain, pain from sports injuries, and neuropathic pain.

**Camp Wellness Program (minor offering).** The fellow may participate in a ½ day, 6-8 week chronic pain program, where patients work with a multidisciplinary team including psychology (CBT and biofeedback), physical therapy, acupuncture (optional), social work/educational liaison for a comprehensive treatment approach to improve functioning. The clinic is housed in the Center for Behavioral Health.

#### Eating Disorder Major Rotation

The fellow on this track will gain in depth training in eating disorders. Time will be split evenly between this specialty and general C/L.

**Eating Disorder Clinic.** The Eating Disorder major rotation focuses on providing evidence-based interventions for children and adolescents with eating disorders. A primary component to this rotation is consultation in the outpatient multidisciplinary eating disorder clinic. Our multidisciplinary eating disorder team includes an adolescent medicine physician, dietitian, social worker, and psychologist. Fellows will have an opportunity to provide assessment and brief interventions within the multidisciplinary clinic.

**Outpatient Peds Psychology Clinic.** The fellow is anticipated to carry approximately 12 outpatients. The rotation will include outpatient therapy focused on using evidence-based interventions to treat patients with eating disorders. Family Based Treatment (FBT) and Radically Open Dialectical Behavior Therapy (RO DBT), a treatment targeting maladaptive overcontrol and emotional loneliness, will be the primary evidence-based interventions used during this rotation. The fellow will have significant opportunity to learn and be trained in both FBT and RO DBT. There may be opportunity to co-lead one ARFID and RO DBT skills class (group therapy).

#### Hem/Onc/BMT with Focus on PCIT in Pediatric Oncology Major & Identified Minor Rotation

The fellow recruited for this position will join a research grant-funded intervention evaluating cultural adaptations to PCIT in pediatric oncology. The two primary components of this major

rotation include delivery of the study intervention and a small caseload of outpatient hem/onc/BMT cases, inpatient consults, and outpatient multidisciplinary hem/onc clinics.

**Prevention and Intervention Program (Major).** The fellow selected for this fellowship will join a grant-funded intervention evaluating cultural adaptations to PCIT in pediatric oncology. This fellow will engage in a variety of clinical and research activities. The fellow will be actively involved in the research process (including, but not limited to, recruitment, screening, intervention delivery, and analyses). The fellow will receive specialized training and certification in PCIT as part of the grant-funded study. The fellow will have opportunities for multiple research publications using existing databases. These datasets represent studies related to parenting and sibling adjustment in pediatric hematology/oncology, healthcare among minoritized groups, adaptations of evidence-based interventions for pediatric hematology/oncology samples, and motivational interviewing dissemination. Additional opportunities will include advanced motivational interviewing training, grant-writing mentorship

**Outpatient Hematology/Oncology Service (Minor).** The fellow will be expected to carry an approximate outpatient clinic load of 8 hematology/oncology patients who are birth-22 years of age. Referrals may come from inpatient hematology/oncology consultations and/or from direct requests from the hematology/oncology team. Outpatient services are intended to help manage psychological and/or family functioning problems that are associated with medical treatment or secondary effects of treatment, such as those problems that result in poor adherence, clinically significant depression/anxiety, and/or family relational problems that impact the patient's ability to cope with cancer/blood disorder treatment. The fellow will also follow outpatients in the hospital if patients are admitted for medical concerns and/or relapse.

The fellow will have opportunities for inpatient and multidisciplinary, comprehensive clinic work in pediatric hematology/oncology pending management of other responsibilities. Please see above for additional description.

### **Autism and Neurodevelopmental Disabilities Fellowship**

The Autism and Neurodevelopmental Disabilities fellowship year focuses on evidence-based assessment and intervention for children diagnosed with Autism Spectrum Disorder, Intellectual Developmental Disorder, Attention Deficit/Hyperactivity Disorder, Specific Learning Disorders, disruptive behaviors, Communication Disorders, and less frequently, internalizing disorders. The program also offers fellows the opportunity to engage in two six-month minor rotations, chosen in partnership with the fellowship supervisors. Opportunities for minor rotations may include inpatient consultation liaison, outpatient therapy (e.g., behavioral parent training, PCIT). The fellow will obtain supervision and professional development from the two primary supervisors in the Autism Program. The fellow is expected to produce a minimum of 1-2 scholarly works during the fellowship year, which can include published manuscript/s, grant application/s, and/or national conference poster/s. Fellows may also choose to complete a program development project approved by both supervisors in lieu of the research requirement.

## Sample Training Plan

	<b>Rotation 1</b>	<b>Rotation 2</b>
<b>Major</b>	Autism Program Psychological Assessment	Autism Program Psychological Assessment
<b>Minor</b>	C/L	Outpatient Therapy Clinic
<b>Research Goals</b>	Identify idea for a research project, discuss with supervisor, identify steps to obtain data, submit IRB	Collect data, analyze, and write-up research for publication/presentation
<b>Required Didactics</b>	Psychology Seminar; Pediatric Grand Rounds; Autism Program Interdisciplinary Meeting; Inpatient Consultation table rounds; Supervision seminar	Psychology Seminar; Pediatric Grand Rounds; Autism Program Interdisciplinary Meeting; Inpatient Consultation table rounds; Supervision seminar
<b>Professional Development</b>	EPPP Studying	Apply for licensure and take EPPP Complete early ABPP registration

### Clinical Services

The fellow is expected to provide clinical services in the Autism Program and Outpatient Psychology Clinic throughout the training year. Faculty will tailor training experiences to the fellow's primary long-term interests, as pragmatic, and will allow the fellow to participate in minor rotations outside of Autism and Neurodevelopmental Disabilities, if the fellow desires. Minor rotations are available in consultation-liaison, neuropsychology, outpatient group therapy (e.g., behavioral parent training) and outpatient family therapy. Ability to independently assess and treat common patient presentations is expected upon entry to the fellowship program. The fellow will be required to complete three assessments weekly (2 interdisciplinary evaluation and 2 psychological assessments). Supervision is provided in a developmental framework, such that fellows will progress in their ability to treat youth with complex medical and psychosocial needs throughout the training year. The goal of the fellowship program is to build the fellow's competency, autonomy, and confidence throughout the training year so the fellow is prepared for a clinical child psychology career.

Autism Program Major Rotation. The fellow will participate as a member of the interdisciplinary assessment team at the Autism Program. As part of this team, the fellow will gain experience collaborating with providers from Speech Language Pathology, Occupational Therapy, and Developmental Medicine in completing a comprehensive autism evaluation for young children each week. Critical to these evaluations is a thorough clinical interview, behavioral observation, completion of evidence-based assessment of cognitive, adaptive, and socioemotional functioning, as well as autism-specific measures (e.g., ADOS-2, CARS2) and communicating evaluation results and recommendation to the family. The fellow will also gain competency in streamline autism evaluations for patients younger than 3 years.

Outpatient Psychology Clinic Major Rotation: The development and refinement of broad-based assessment skills is a core feature of this fellowship program. Each week, the fellow will

complete two comprehensive assessments within the outpatient psychology clinic; these psychological assessments will include evaluating older children (i.e., ages 5 and above), who may present with developmental delays, learning difficulties, behavioral concerns, and internalizing disorders.

## **On-Call Schedule**

The Psychology Service participates in weekly call schedules. Fellows will be expected to be on-call for one week per semester, under the supervision of an attending psychologist.

## **Didactics**

A variety of didactics are available to the fellow. Within the department, weekly Psychology Seminar meetings provide clinical psychology didactics and professional development.

Psychology fellows will be expected to participate in the following didactics. There are also track specific didactics to help facilitate greater knowledge/expertise in the focus areas of pediatric and child clinical psychology. Fellows participate in a minimum of two hours of weekly learning activities.

### General Requirements:

1. Psychology Seminar: Focused on: 1) Child psychology specific topics, 2) Professional development. Sessions to attend will be identified in collaboration with the primary supervisors and training committee. Minimum of 5 lectures per semester. Fridays at 10am.
  - a. Plus, all sessions within the **Orientation** and **Professional Development/Trainee Presentation** series will be attended.
2. Pediatric Grand Rounds: JHACH lecture series or JH lecture series. Meets weekly on Fridays at noon. Expectation for attendance at 5 lectures per semester.
3. Fellows Meeting: Professional development/leadership seminar. Meets 1<sup>st</sup> Friday of the month.
4. Supervision Seminar: Training and support for supervision of clinical cases. Meets 3<sup>rd</sup> Friday of the month.
5. Inpatient Consult Table Rounds: Focused on complex cases from inpatient consultations and/or faculty/trainee-led instruction about a topic specific to pediatric health psychology. Meets weekly Friday at 9am

### Pediatric Psychology Specific Requirements:

1. Hem/Onc Psychosocial Rounds: Multidisciplinary rounds focusing on psychosocial complexities of patients admitted to the Hem/Onc service. Meets 3<sup>rd</sup> Tuesday at noon (C/L and Hematology/Oncology fellow and AYA Hem/Onc fellow only)
2. CVICU & Hospitalist Multidisciplinary Rounds and/or Huddle: Case presentations for patients medically hospitalized, focusing on psychosocial considerations affecting their

care and/or functioning. Fellow selects one to attend weekly (daily at 8:30 or 11am; C/L and Hematology/Oncology and C/L and Pain fellow only)

Autism and Neurodevelopmental Disabilities Specific Requirements:

1. Autism Program Interdisciplinary Team Meeting: Focused on case discussions and review of evaluations of the day. Meets Monday at noon.
2. Autism Program/Developmental Medicine Admissions Committee: Interdisciplinary team reviews referred cases and triage to appropriate provider within the Autism Program/Developmental Medicine. Meets Thursdays at noon.

Other meetings that are available but not required:

1. Neuropsychology Seminar: Focused on 3 main topics: 1) Fact-finding preparation for board-certification, 2) professional development issues, and 3) neuropsychology topics of interest. Meets weekly.
2. Neuropsychology Rounds: Present and discuss patients including medical condition, reason for referral, test results, and recommendations. Meets weekly.

A large number of other didactics also exist within Johns Hopkins All Children's Hospital. Attendance will be required based upon the fellow's area of interest.

1. Stroke Conference. Monthly.
2. Epilepsy Surgery Meeting. Monthly.
3. NeuroOncology Boards. Weekly
4. Tumor Boards. Weekly
5. Leukemia Boards. Monthly.

Additional required didactics include:

1. Training in Protection of Human Subjects (JHACH specific).
2. Required Compliance trainings, as needed for JHACH.

Additional opportunities exist for:

1. Observation of neurosurgery.
2. Participation in clinics of interest.
3. Experiential opportunities to shadow pediatric neuropsychology fellows and/or faculty during inpatient neuropsychology consultations.
4. Inpatient rounds with a variety of medical teams.

Should a fellow have a specific interest in a topic not covered via clinical work or didactics, effort will be made to ensure that experience and/or didactics in that area is arranged.

Modification to didactic schedule for fellows may be considered based on educational background. Any modification will be discussed with the Director of Fellowship Training, and an agreed upon course of action will be determined to ensure that the fellow receives four hours of weekly learning activities.

## **Research**

Multiple research opportunities exist within the Psychology Service and Clinical and Translational Research Organization (CTRO) for research projects. Further, a clinical neuropsychology database exists for increased access to neuropsychological testing data, which also highlights the intersection of clinical practice and research in a time-efficient manner and could allow for the psychology postdoctoral fellows and pediatric neuropsychology fellow collaboration. The Developing Clinical Research program at JHACH is also available to fellows.

### Pediatric Psychology

In addition to department specific research projects, including those focused on fear of cancer recurrence, child and parent coping with cancer, disseminating motivational interviewing across a large medical center, telemedicine, sickle cell disease stigma and opioid medication policy/use, psychosocial screening of youth with type 1 diabetes, emotion socialization during pediatric chronic illness, and impact of chronic health conditions.

### Autism and Neurodevelopmental Disabilities

Several projects are currently underway, including the development of a clinical database for patients seen within the Autism Program. Additional opportunities exist for collaborating on research evaluating training ED staff and first responders

## **Supervision/Teaching**

Fellows will receive at least 2 hours weekly of direct one-to-one supervision. On occasion, group supervision will be available. Fellows also receive live supervision weekly. Moreover, fellows will receive additional supervision via their specialized research projects. In clinics, additional supervision and teaching will occur with multi-disciplinary team members, including physicians.

Finally, opportunities for supervision and mentorship of graduate practicum students and pre-doctoral psychology interns is available, including umbrella supervision of graduate and undergraduate research assistants. Opportunities for teaching and presenting didactics, both in the community and at JHACH, are available.

## **Community Education**

The fellows are encouraged to give presentations within the JHACH system through community organizations to help improve mental healthcare, to promote mental health advocacy, and/or to educate the public about a specific psychology-related problem. One presentation over the course of the one-year placement is required.

## **Professional Development**

The fellows will be assigned a primary mentor to assist with guiding their professional development. The mentor will be selected based on the fellow's long-term career goals. Each fellow is expected to develop a training plan with the Director of Postdoctoral Training in Psychology. In addition to licensure and board-certification preparation (as desired), it is expected that the fellow will develop an area of specific interest/specialty and work to incorporate themselves into that area. Participation and development of programs and clinics is encouraged.

## **Core Training Faculty**

### Pediatric Psychology

**Melissa Faith, Ph.D., ABPP.** University of Arkansas, 2012; Pediatric Psychologist; Assistant Professor Johns Hopkins University; Hematology/Oncology/Bone Marrow Transplant Service. Specializes in evaluation and treatment of children, adolescents, and young adults with cancer and/or blood disorders. Specific clinical interests include evidence-based interventions to improve emotion socialization, parenting, family functioning, social adjustment, and patient/sibling coping. Specific research interests include emotion socialization, family relationships, patient/sibling coping, parenting, and social functioning during and after cancer treatment and disseminating evidence-based interventions in large medical and/or community settings. Interests also include intersection of culture/minority status and healthcare (e.g., LGBTQ+, racial/ethnic minority status). Strong emphasis on evidence-based practice and integrating clinical practice with research.

**Marissa Feldman, Ph.D, ABPP.** University of South Florida, 2011; Psychology Fellowship Director; Clinical Director of Consultation-Liaison Service; Pediatric Psychologist. Specializes in the evaluation and treatment of children and adolescents with acute and/or chronic medical conditions to promote psychological health and well-being. Focus on adaptation and coping with illness, treatment adherence, and emotional and behavioral functioning. Proponent of evidence-based practice and multidisciplinary care. Research interests include improvements in health, family, and psychological outcomes of youth diagnosed with type 1 diabetes, risk and resilience in child/adolescent development, and treatment outcomes.

**Sarah Sobalvarro, Ph.D., ABPP,** University of Florida, 2018; Pediatric Psychologist, Eating Disorders. Dr. Sobalvarro is a pediatric psychologist in the Johns Hopkins All Children's Institute for Brain Protection Sciences. She joined the hospital staff in 2019. In her role, Dr. Sobalvarro sees patients in the multidisciplinary eating disorder clinic and provides weekly outpatient therapy for patients with disordered eating, body dissatisfaction, weight management concerns and psychological conditions. Dr. Sobalvarro also provides evidence-based group therapy.

**Will Frye, Ph.D., ABPP** Auburn University, 2017; Pediatric Psychologist, Chronic Pain. Specializes in non-pharmacological treatment for patients with acute and chronic pain conditions and provides skill-based interventions for simultaneous psychosocial concerns.

#### Autism and Neurodevelopmental Disabilities

**Lauren Gardner, Ph.D., ABPP** Indiana University, 2011; Psychology Internship Director; Administrative Director, Autism Program. Specializes in evidence-based assessment of neurodevelopmental disabilities and best practices in early interventions. Director of the Doctoral Internship in Professional Psychology program. Research interests in evidence based practices in differential diagnosis of neurodevelopmental disabilities, assessing knowledge and experience related to ASD in first responders, and evidence based treatment for children with developmental disabilities.

**Callie Gilcrest, Ph.D.** University of Florida, 2020; Clinical Psychologist, Autism Program. Specializes in evidence-based assessment and treatment of autism spectrum disorder (ASD) and other neurodevelopmental and behavioral disorders. Clinical and research interests include screening and assessment of neurodevelopmental disabilities in early childhood, interdisciplinary assessment of ASD, behavior management and parent training interventions (e.g., Parent-Child Interaction Therapy), and psychological evaluations for children/adolescents with learning difficulties.

**Jason Hangauer, Ph.D., NCSP** University of South Florida, 2012; Pediatric Psychologist; Autism Program. Specializes in the evaluation and treatment of autism spectrum disorder (ASD) and developmental disabilities. Research interests include evidence-based interventions for ASD, behavioral parent training, and assisting allied providers serving children with ASD and other disorders in the utilization of current research supported best practices.

#### **Additional Training Faculty**

**Sakina Butt, Ph.D., ABPP-CN** Florida School of Professional Psychology, Argosy University in Tampa, Florida 2008; Board Certified in Clinical Neuropsychology and Pediatric Neuropsychology by ABPP. Specializing in neuropsychological evaluations for complex medical conditions as well as cognitive and developmental tracking for neonatal graduates. Research interests include long-term neurocognitive outcomes of neonatal graduates and improving access to early intervention.

**Alyssa Fritz, Ph.D.** University of Florida, 2017; Pediatric Psychologist. Specializes in evidence-based interventions for pre-school and early childhood disruptive behavior disorders. She also specializes in the evaluation and treatment of children and adolescents diagnosed with chronic and/or acute medical conditions in combination with additional concerns (e.g., anxiety, depression, treatment adherence, phobias) in outpatient settings.

**Colleen Hess, Ph.D.** Florida State University, 2018; Pediatric Neuropsychologist. Specializes in neuropsychological evaluations for patients with diverse and complex medical conditions, with

expertise in assessment and intervention planning for pediatric Hematology/Oncology patients including children and adolescents with history of cancer, tumor, or blood disorders. Research interests include tracking neurocognitive outcomes related to specific medical treatments such as exposure to chemotherapy and radiation, bone marrow transplant, and CAR T-cell therapy

**Jennifer Katzenstein, Ph.D., ABPP-CN** Indiana University Purdue University, 2008; Director, Psychology, Neuropsychology, and Social Work, Board Certified in Clinical Neuropsychology and Pediatric Neuropsychology by ABPP. Specializes in the evaluation of neurocognitive functioning and coordination of education and intervention planning. Research interests in neuropsychology and concussion, long-term neurocognitive outcomes of pediatric cancer, and neurocognitive impact of early orphanage care.

**Aja Meyer, Ph.D.** University of South Florida, 2008; Pediatric Psychologist; Specializes in cognitive-behavioral therapy, including Acceptance and Commitment Therapy and Mindfulness-Based Cognitive Therapy. Research interests in the efficacy of Acceptance and Commitment Therapy for adolescents with anxiety and mood disorders.

**Stefanie Poehacker, PhD, PMH-C**, Eastern Michigan University, 2022, Pediatric Psychologist, Neonatal Intensive Care and Maternal Fetal Medicine. Specializes in evidence-based care for families with medically fragile infants including parental coping, parent-infant dyadic interventions, traumatic stress and bereavement, and neurodevelopmental intervention and assessment. Closely collaborates with multidisciplinary teams in the intensive care setting to provide family-centered, trauma-informed care to support family functioning and infant mental health. Research interests include development of interventions to support caregiver mental health and care engagement and effects of early medical factors and social determinants of health on neurodevelopmental outcomes.

**Danielle Ransom, Psy.D., ABPP-CN** The Virginia Consortium Program in Clinical Psychology, 2012; Pediatric Neuropsychologist. Specializes in concussion. She joined the medical staff in 2019. Before joining Johns Hopkins All Children's, Dr. Ransom was an Assistant Professor at the University of Miami Miller School of Medicine where she co-directed the Pediatric Concussion Clinic and developed the neuropsychology arm of the Sports Concussion Clinic. She completed a clinical postdoctoral fellowship in pediatric neuropsychology from Children's National Medical Center in Washington, D.C., followed by a research postdoctoral fellowship in mild traumatic brain injury with the Safe Concussion, Outcome, Recovery & Education (SCORE) Program at Children's National Medical Center.

**Allison Schimmel-Bristow, Ph.D.** University of Memphis, 2022; Pediatric Psychologist. Specializes in assessment and evidence-based treatment of children and adolescents with chronic medical conditions. Focus on healthy lifestyle, coping with illness, treatment adherence, and emotional and behavioral functioning. Works closely with the multidisciplinary healthy steps team and provides evidence-based outpatient care for patients. Research interests include pediatric health behaviors, improving parenting and family practices associated with health behaviors and adherence, adjustment to pediatric chronic illness, and enhancing access to care.

**Kyle Srnka, PhD.** Rosalind Franklin University, 2020; Pediatric Neuropsychologist. Dr. Srnka's clinical expertise includes neuropsychological evaluations for children with epilepsy including presurgical evaluations to help guide treatment planning. He has clinical research interests in attentional vigilance/variability in pediatric populations and contribution to neurocognitive functioning.

**Valerie Valle, Psy.D.** Arizona School of Professional Psychology; Specializes in sports and performance psychology in the Johns Hopkins All Children's Institute for Brain Protection Sciences. She joined the hospital staff in 2017. She completed a pre-doctoral internship at the University of California-Riverside and a postdoctoral fellowship at the University of New Mexico. She also completed practicum internships at Psychological Counseling Services and Sierra Tucson and a practicum sports psychology internship at Grand Canyon University. Dr. Valle's clinical interests include developmental concerns and stressors of athletes and high stakes performers

### **Evaluation of the Fellow**

Formal written reviews occur at month 3, 6, 9 and 12 of the fellowship. The training committee will meet at month 1, 3, 6, 9, and 11 to review progress towards identified training goals. Supervisors will discuss at 3 month mark whether trainee is meeting minimum competency expectations. A Personalized Education Plan (PEP) will be put into place during the first month, and this plan will be reviewed at the training meetings to assess progress, identify goals, and address opportunities for growth. A hospital specific evaluation occurs at 90 days after hire. Fellows complete an activity log for clinical service and didactic attendance. The Director of Postdoctoral Training in Psychology meets with the fellow to review the activity log and cumulative evaluations.

Each clinical supervisor rates the fellow's knowledge base and professional practice on structured rating forms twice/annually. Supervisors meet with each fellow to review their ratings and provide feedback regarding competencies. If an area of weakness is identified, a remediation plan may be put into place, which may include: reduced service, increased supervision, and/or additional didactics. If a fellow's performance is judged unsatisfactory or requiring remedial work, a meeting will occur between the trainee and the Director of Postdoctoral Training. From this meeting a formal program of study should occur that will remedy the problem. If there is no change in the fellow's performance, this constitutes an academic problem, and the policy and procedure for academic due process is then instituted.

### **Program Evaluation**

Clinical rotations, scope and frequency of didactics, supervisor availability and quality, and research offerings are reviewed at regular training meetings. At each 6 and 12 month evaluation period, the fellow will also complete a supervisor evaluation form for each supervisor with whom the fellow currently works. These evaluation forms are submitted directly to the Director of Fellowship Training in Psychology. All evaluation forms completed regarding the supervision

of the Director of Fellowship Training in Psychology are submitted directly to the Director of Psychology and Neuropsychology.

### **Fellow Practice Competencies**

Upon completion of the fellowship, the fellow will display competencies in the clinical practice of psychology. Fellow evaluation aligns with the Profession Wide Competencies (PWC's) set forth by APA in the areas of:

- Research
- Individual and cultural diversity
- Communication and interpersonal skills
- Intervention
- Consultation and Interpersonal/Interdisciplinary skills
- Ethical and legal standards
- Professional values and attitudes
- Assessment
- Supervision

Over the course of the year, the fellows will work towards achieving the following practice competencies:

#### General Competencies

1. Recognition, appreciation, and integration of the scientific foundation underlying the practice of child and pediatric psychology
2. Ability to conduct and disseminate child and pediatric psychology research
3. Knowledge and application of clinical interviewing skills in order to assess patient and gather collateral information from family and any additional caregivers or providers.
4. Ability to take a comprehensive history including: history of the present illness, prior medical and psychiatric history, family history, and social history.
5. Ability to develop differential diagnoses, when appropriate, based on the interview.
6. Ability to formulate a diagnostic impression that integrates history and assessment findings.
7. Knowledge of the biopsychosocial model, with consideration of how this model may inform case conceptualization
8. Ability to communicate diagnosis and treatment recommendations to family
9. Ability to generate a treatment plan and identify goals of care
10. Knowledge of evidence-based interventions to treat depression, anxiety (general, medical-specific, panic), and other common psychological presentations.
11. Understanding of the common ethical dilemmas that arise in pediatric psychological care and awareness of a process to work to a resolution of these dilemmas.
12. Awareness and recognition of diversity and culturally sensitive care.
13. Appreciation of systems issues and how they may impact patient care and family functioning within the hospital setting, as well as within the larger community
14. Comfort navigating an electronic health record and awareness of the use of health information technology in health care
15. Educates others regarding psychological principles and the interplay between health, psychological well-being, normative development, and social functioning.

16. Models professionalism and ethical practices for other trainees
17. Ability to supervise trainees in evidence-based practice and ethical and legal issues related to the practice of clinical and pediatric psychology
18. Exhibits self-care behaviors to facilitate competent and professional practice.

#### Pediatric Psychology Specific Competencies

1. Detailed knowledge of interactions between physical health and psychological diagnoses.
2. Detailed knowledge of pediatric psychology-specific problems (e.g., pain, sleep, adherence) and evidence-based interventions.
3. Working knowledge of common psychological/adjustment problems concurrent with acute and chronic illness
4. Recognition of the role and effect of families on children's health status (and vice versa) and appreciation of family-centered care.
5. Ability to provide concrete recommendations to medical teams and patient family members following consultation.
6. Ability to collaborate and communicate with providers and caregivers outside the JHACH system for continuity of care
7. Ability to generate a consultation note that communicates findings and recommendations effectively.
8. Ability to operate effectively in a multidisciplinary environment and to know the roles of other professional providers and exhibit appreciation for unique knowledge and contributions of other disciplines
9. Recognition of transition issues and how to collaborate with families and providers to help pediatric patients transition effectively to adult care

#### Autism and Neurodevelopmental Disabilities Specific Competencies

1. Ability to complete evidence-based assessment of neurodevelopmental disabilities, learning disabilities and autism spectrum disorder.
2. Ability to differentiate typical and abnormal child development.
3. Knowledge of best practice for early intervention regarding developmental disabilities and autism spectrum disorder.
4. Ability to generate treatment plan and recommendations, including school-based accommodations.
5. Ability to implement evidence-based interventions for developmental disabilities, internalizing and externalizing disorders.
6. Knowledge of community-based support services to improve psychosocial functioning and development.
7. Knowledge of current research on autism spectrum disorder and ability to become an effective consumer of extant research.
8. Ability to liaison and effectively communicate to schools, community providers, and additional staff recommendations for care.
9. Ability to effectively work on an interdisciplinary team and collaboratively evaluate, diagnose and develop treatment recommendations meeting the needs of the individual child

## **Program Review**

The Psychology Fellowship Training Program is monitored by the Psychology Fellowship Training Committee (PFTC). The committee is made up of the Psychology Training faculty and other faculty in Departments of Psychiatry and Psychology.

The Committee's charge is to review the philosophy and operational integrity of the training program. In these matters, the Committee decisions by consensus; however, the final authority and responsibility for administrative and operational policies will rest with the Director of Postdoctoral Training in Psychology.

The actions of the PFTC are subject to approval of the Director of the Section of Psychology and the Chairman of the Department of Psychiatry.

The PFTC meets annually or more often as the need arises.

## **Due Process & Grievance Procedures**

We encourage staff and trainees to discuss and resolve conflicts informally, however if this can not occur, there is a formal process for JHACH to respond to issues of concern and for fellows to share grievances. Due Process and Grievance Procedure Documents can be requested. Due Process and Grievance Procedures are located in the training manual and are discussed with all fellows at the commencement of fellowship training.

## **Application and Selection Procedures**

The Department of Psychology at Johns Hopkins All Children's Hospital will be accepting applications for four one-year full-time postdoctoral fellowship positions in psychology beginning in August. The program is an APPIC member.

### *Requirements*

1. Completion of an APA-accredited or CPA-accredited internship.
2. Doctoral degree conferred from an APA-accredited graduate school training program in Clinical, Counseling, or School Psychology; or doctoral candidate in good standing with an APA-accredited graduate school training program in Clinical, Counseling or School Psychology with all requirements for graduation satisfied prior to fellowship start.
3. Experience in pediatric psychology/child clinical preferred.

*Email the following documents to [mfeldm25@jhmi.edu](mailto:mfeldm25@jhmi.edu)*

- A letter of interest, with position(s) of interest identified
- Curriculum vitae
- Three (3) letters of recommendation should be sent separately by the letter writers
- Unofficial transcript (official transcript will be required upon acceptance of fellowship)
- 1 De-identified comprehensive report (ASD/NDD fellowship only)

*Letters of Recommendation may be mailed to (letters of recommendation can also be e-mailed to [mfeldm25@jhmi.edu](mailto:mfeldm25@jhmi.edu)):*

Marissa Feldman, PhD, ABPP  
Department of Psychology  
880 Sixth Street South, Suite 460  
Saint Petersburg, Florida 33701

Contact the Psychology Fellowship Director, Marissa Feldman, PhD, ABPP with questions or for more information:

Phone: 727-767-3845  
Email: [mfeldm25@jhmi.edu](mailto:mfeldm25@jhmi.edu)  
Fax: 727-767-8244

**Additional materials may be requested.**

Applications are due December 15, 2023.

**Salary and Benefits/Physical Facilities**

Salary is \$56,492, commensurate with NIH guidelines. Postdoctoral fellows have the option to participate in medical, dental, and vision benefits via the hospital, as well as short-term and long-term disability insurance. Parking is provided free of charge.

A \$1500 travel/professional development stipend is offered. The stipend can be used for coverage of travel to professional conferences, application for licensure/testing fees, and early board registration.

Paid-time off and sick leave is available, per hospital policies, as well as 7 holidays per year.

Fellows have office space, computer, and private telephone line, with access to dictation software. Access to electronic medical records is provided and Welch Library at Johns Hopkins University provides access to a vast catalog of electronic journals. Up-to-date immunizations and annual influenza vaccination are required.

**Saint Petersburg**

Downtown St. Petersburg is the heart of the Tampa Bay area. The city, which glimmers between the Gulf of Mexico and Tampa Bay, is known for its warm weather and having the most consecutive days of sunshine. Downtown is home to great shopping, restaurants, and attractions, including the world-renowned Salvador Dali Museum and Chihuly collection. Downtown is

thriving, with new restaurants and entertainment venues opening nearly weekly. The cost of living is affordable, and Florida does not have a state income tax.

St. Petersburg/Clearwater is known for its white sandy beaches, with two of the top ten beaches in the United States located in the region. With 35 miles of Florida beaches within a 10-15 minute drive from downtown, the area is known as a top tourist destination. St. Petersburg has full access to water sports and cultural activities in the Tampa Bay area.

Along with award-winning beautiful beaches, the area is known for professional sports, including football (NFL Tampa Bay Buccaneers), baseball (Tampa Bay Rays), and ice hockey (Tampa Bay Lightning), as well as professional soccer (Tampa Bay Rowdies). Within 20-25 minutes to Tampa International Airport, domestic and international travel is easily accessible.