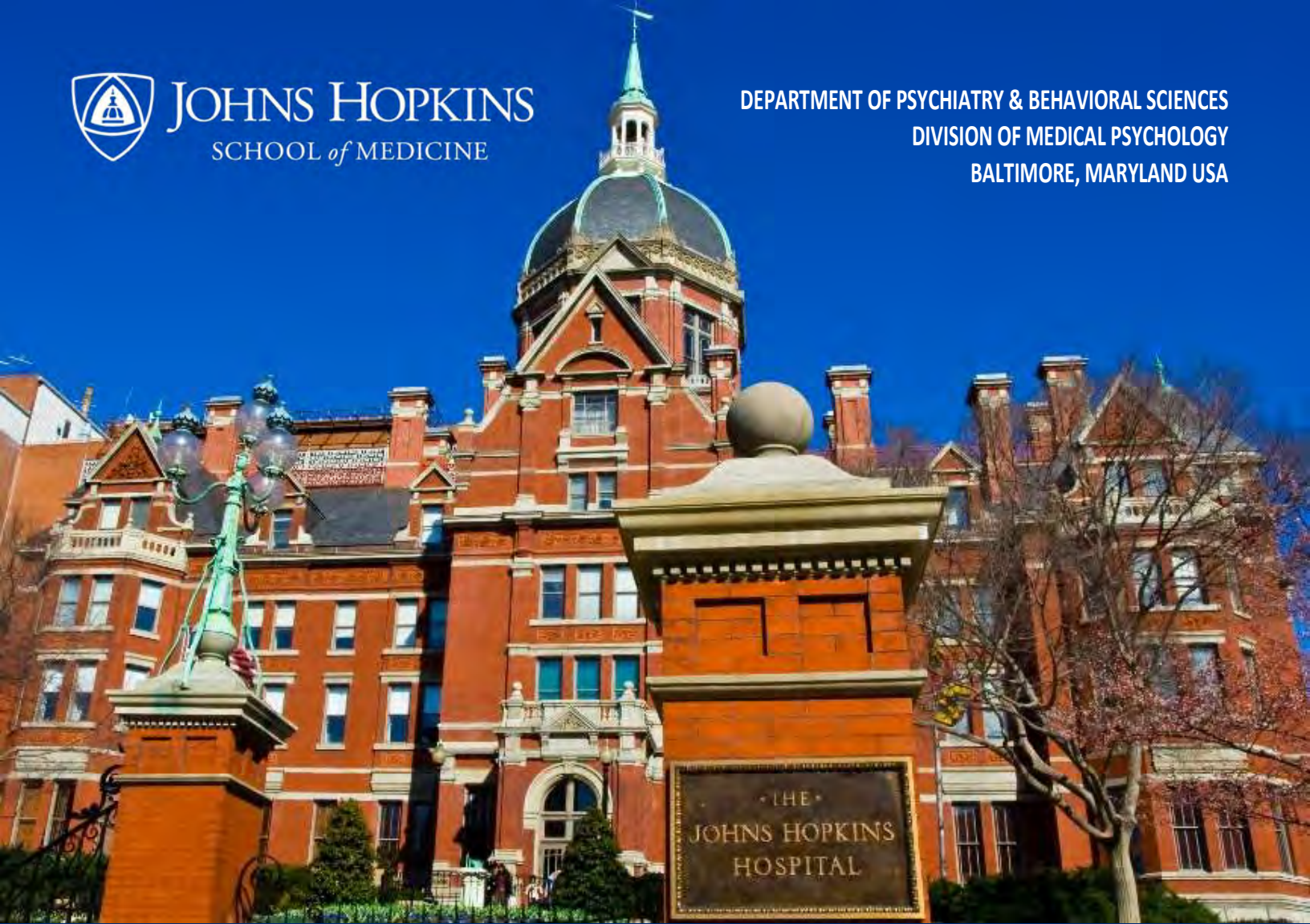




**Division of Medical Psychology
Postdoctoral Fellowship in
Clinical Neuropsychology
2026 – 2027**

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OVERVIEW

Mission

The post-doctoral fellowship in clinical neuropsychology at the Johns Hopkins University School of Medicine provides advanced training and supervision in the clinical application of scientific knowledge of normal and abnormal brain function and behavior to psychologists. The program includes didactic and practicum experiences in assessment and intervention that are consistent with the *Policy Statement of the Houston Conference on Specialty Education and Training in Clinical Neuropsychology*. Its aim is to develop in psychologists the clinical competencies that enable them to qualify for certification in clinical neuropsychology by the American Board of Clinical Neuropsychology (ABCN/ABPP). The residency program was one of the original members of the *Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN)* but no longer participates in the match program.

Goals for the Fellowship

The purpose of the fellowship is to provide two years of supervised experience in:

- Advanced skills in neuropsychological and psychological evaluation
- Psychological intervention for patients with neuropsychiatric or medical disorders and functional neurological disorders
- Consultation to patients, care partners and professionals
- Advanced understanding of brain-behavior relationships
- Scholarly activity
- Design and implementation of research in neuropsychology, and
- Clinical supervision of graduate student externs



It is expected that many fellows will be preparing for academic careers in clinical neuropsychology, geriatric psychology, or a related specialty within professional psychology. Others will likely be planning careers primarily as practitioners, working as neuropsychologists in general hospitals or psychiatric facilities. At the completion of the fellowship, it is expected that fellows will be eligible for state or provincial licensure or certification for the independent practice of psychology and for board certification in clinical neuropsychology by the American Board of Professional Psychology.

DIVISION FACULTY

The Division of Medical Psychology currently consists of:

- 7 Core Neuropsychology Faculty
- 4 Post-Doctoral Fellows
- 4 Neuropsychometrists
- 1 Therapist
- 1 Clinic Manager
- 2 Administrative Coordinators

Core Division Faculty

Tracy Vannorsdall, PhD, ABPP-CN | Associate Professor, Division Director | tvannor1@jh.edu



Dr. Vannorsdall joined the faculty in 2009. She is the primary neuropsychologist for the Comprehensive Cancer Center, the Post-Acute COVID-19 Team, the Richman Family Precision Medicine Center of Excellence in AD, and the Center for Menopause and Midlife Health. Her work focuses on understanding the neuropsychological sequelae, clinical course and treatment needs of those at risk for neuropsychological declines due to illness, aging, and medical treatments. She also serves as co-chair for the AACN Convention Management Committee and the INS NeuroCovid SIG.

Vidya Kamath, PhD, ABPP-CN | Associate Professor, Training/Research Director | vkamath@jhmi.edu



Dr. Kamath joined the faculty in 2013. She is the primary neuropsychologist for the JH Parkinson's Disease (PD) & Movement Disorder Center, the Frontotemporal Dementia (FTD) & Young-Onset Dementias Clinic, and the JH Precision Medicine Center of Excellence for Schizoaffective Disorders. Clinical populations of interest include Parkinson's disease, atypical parkinsonism, Alzheimer's disease, late-life depression, frontotemporal dementias, and Down syndrome. Her research program represents a multi-modal investigation of the clinical and neurobiological aspects of olfactory and multisensory dysfunction in neuropsychiatric and neurodegenerative conditions. She is an Atherosclerosis Risk in Communities (ARIC) study investigator.

Christopher Cranston, PhD, ABPP-CN | Assistant Professor of Medical Psychology | ccranst1@jh.edu



Dr. Cranston joined the faculty in 2017. He is a fellowship-trained rehabilitation psychologist and neuropsychologist who specializes in the evaluation of patients with a range of medical, psychiatric and neurologic conditions. He is an expert on coding and billing for neuropsychological and psychological services. Dr. Cranston serves as the Maryland Representative for the Society of Clinical Neuropsychology's Early Career Neuropsychologist Committee (ECNPC) and is a mentor and practice sample reviewer for neuropsychologists seeking board certification through ABCN.

DIVISION FACULTY (contd.)

Lindsay Morra, PhD, ABPP-CN | Assistant Professor of Medical Psychology | lmorra1@jh.edu



Dr. Morra joined the faculty in 2018. Though she sees patients with a variety of medical, psychiatric and neurologic conditions, she specializes in the neuropsychological evaluation of patients with movement disorders and dementia. Dr. Morra also works closely with the [JH Hydrocephalus & Cerebral Fluid Center](#) and is the Johns Hopkins site neuropsychologist of the Multi-Ethnic Study of Atherosclerosis.

abuchho1@jh.edu

Alison Buchholz, PhD, ABPP-CN | Assistant Professor of Medical Psychology |



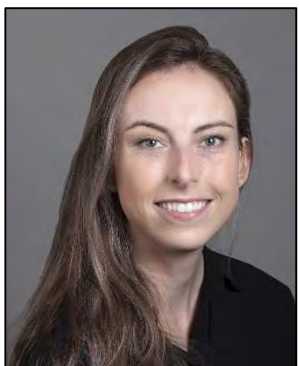
Dr. Buchholz joined the faculty in 2020. She specializes in the evaluation and treatment of functional neurological symptom disorders (FND) and adult epilepsy. She has developed multidisciplinary clinics for the evaluation and management of FND. Dr. Buchholz is a founding member of the [Functional Neurological Disorder Society](#) and serves on their Education Committee. She is the lead neuropsychologist for the [JH Adult Epilepsy Center](#). Dr. Buchholz maintains clinical research databases to examine neuropsychological profiles and treatment predictors and outcomes in patients with FND and epilepsy. She also serves as the primary neuropsychologist for the [JH Healthy Brain Program](#).

Emily Murriel, PhD | Assistant Professor of Medical Psychology | emurriel1@jh.edu



Dr. Murriel joined the faculty in 2022. Her clinical expertise is in evaluating adults at risk for neuropsychological complications due to neurologic and non-neurologic illness and medical treatments. She works closely with the Johns Hopkins Movement Disorders Center, and through the Transplant Neuropsychology Service, Dr. Murriel provides neuropsychological evaluations and brief behavioral interventions to pre- and post-solid organ transplant patients. Dr. Murriel has a strength in cultural neuropsychology and extensive experience in working with patients from diverse cultural and linguistic backgrounds. She has also been extensively involved in professional governance and promoting neuropsychology education.

Julie Petersen, PhD | Assistant Professor of Medical Psychology | jpete129@jh.edu



Dr. Petersen joined the faculty in 2025. She provides neuropsychological evaluations for adults with a wide range of medical, neurological, and psychiatric conditions, with a particular focus on patients undergoing neurosurgical intervention. Her research focuses on neuroimaging methodology, including structural and functional MRI techniques used to examine brain-behavior relationships and clinical outcomes. Dr. Petersen's broader interests include bridging neuroimaging and neuropsychological approaches to provide complementary perspectives on brain function and to enhance interdisciplinary understanding of neurological disease.

DIVISION FELLOWS AND CLINIC STAFF

Neuropsychology Post-Doctoral Fellows



Kailey Langer, PhD
klanger5@jh.edu
2nd Year



Anya Savransky, PhD
asavran1@jh.edu
2nd Year



Katie Dillon, PhD
kdillo11@jh.edu
1st Year



Lilly Ham, PhD
lham4@jh.edu
1st Year

You are welcome to contact current fellows at the email addresses provided.

Neuropsychometrists



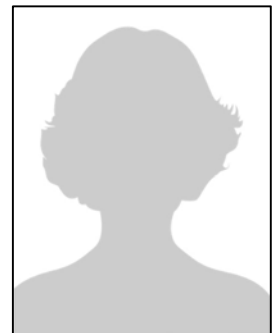
Helen Smith, MA



Kayla White, MPS



Harry Meister, MPhil

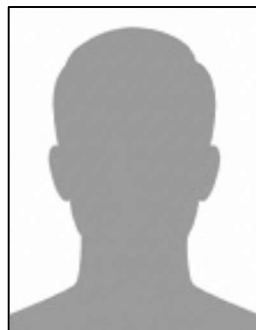


Anusha Revuri, MA

Therapist



Samantha Bush, LCPC



Stephen Robinson

Patient Coordinators



Monique Miller-Taplin



Cecily Pereyra

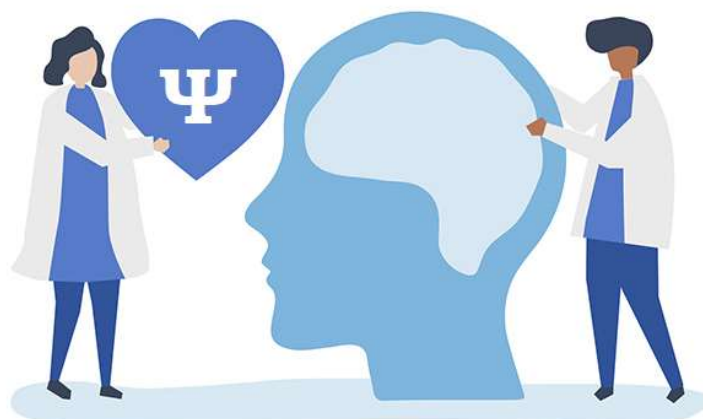
CURRICULUM

Supervised Clinical Work

Clinic service is a major component of the residency experience, estimated to require 70% of the fellow's time and effort. Fellows conduct neuropsychological and psychological evaluations (3-4 days per week; see **Example Schedule** below), including the administration, scoring and interpretation of standardized tests, under the supervision of core program faculty. Efforts are made to provide psychometrist support at least one day per week. Neuropsychology fellows receive advanced training and supervised experience in conducting clinical interviews of patients and care partners, test selection, synthesis of test results with aspects of history and the results of other diagnostic procedures, case formulation, and recommendations, and communicating effectively with patients, families, physicians, and other referral sources.

<i>Division of Medical Psychology</i> <i>Example Fellow Rotation Schedule</i> Jan 1, 2027 – June 30, 2027					
Faculty	Monday	Tuesday	Wednesday	Thursday	Friday
Dr. Buchholz					Dr. King
Dr. Cranston			Dr. Chan		
Dr. Kamath	Dr. Doe				
Dr. Morra		Dr. Chan		Dr. Doe	
Dr. Murriel				Dr. Chan	
Dr. Petersen	Dr. King	Dr. Doe			
Dr. Vannorsdall		Dr. King			

The Division of Medical Psychology has broadened our clinical services to include psychotherapeutic interventions (e.g., psychotherapy for FND). Fellows may gain intervention experience during their training by carrying a small number of psychotherapy patients. Although not a primary focus of our program, opportunities may be available for other therapeutic interventions, including for patients with mood or behavioral disorders or for patients with difficulties adapting to medical illnesses and their treatments.



Perspectives Approach

A unique feature of our fellowship is the use of *The Perspectives*, which originated in our Department of Psychiatry and Behavioral Sciences to extend case formulations beyond the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) and biopsychosocial methodology. Fellows are encouraged to view a patient's presentation from each of four perspectives (disease, dimensional, behavior, and life story) for a systematic, integrative, sequential approach to each patient's presentation that allows for a personalized and holistic formulation and treatment plan.

Clinical Supervision

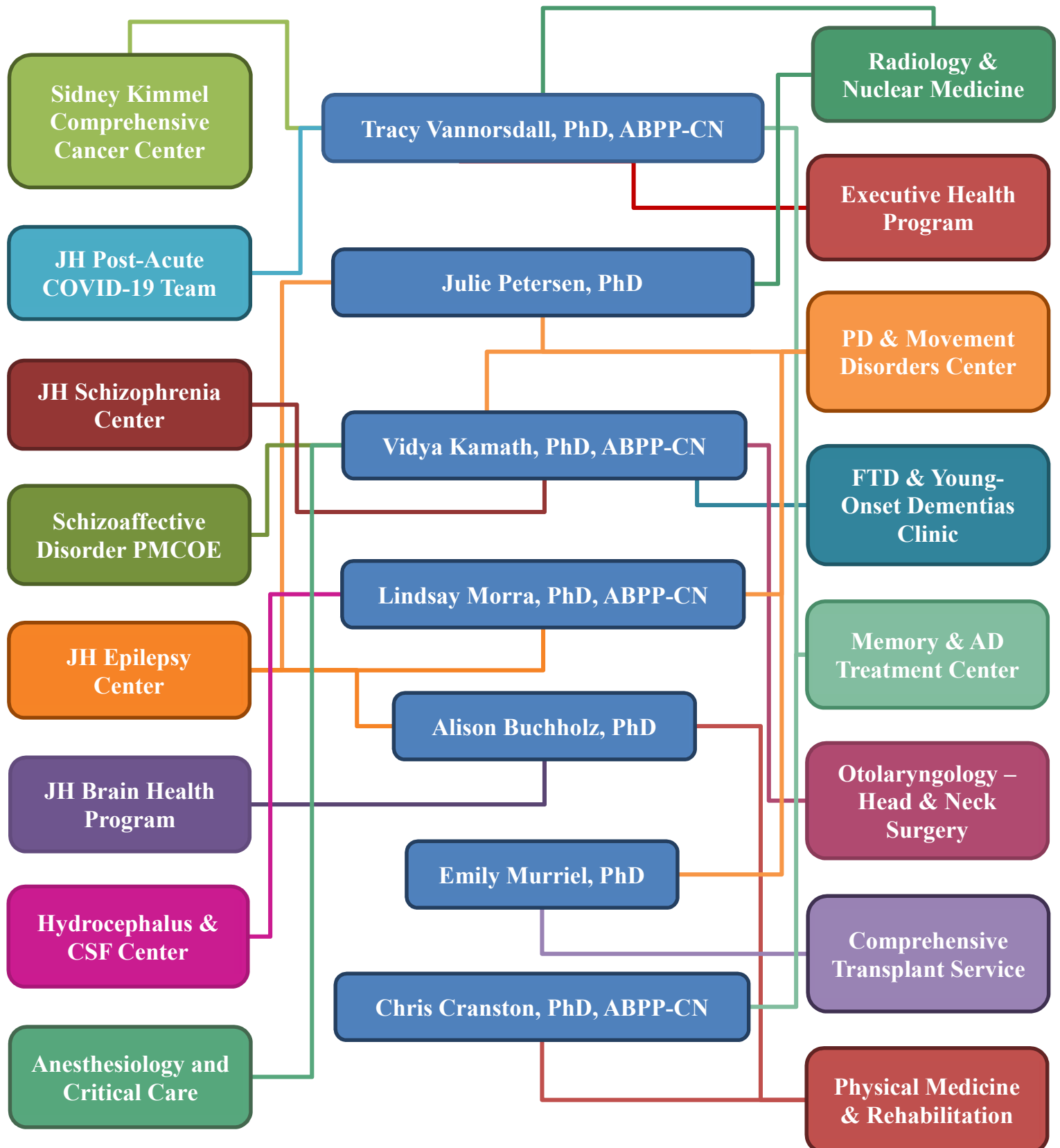
Supervising faculty members share a suite of offices with the fellows and clinical supervision is readily available. Fellows usually confer with their supervisor before, during, and after each patient encounter. Although most supervision occurs on a one-on-one basis, fellows present clinical cases during Morning Report (see **Didactics**), where all faculty can provide input. As the fellowship progresses, fellows ordinarily assume greater responsibility for, and autonomy in, clinical decision making and case management.

Referral Sources

Our department has a decades-long commitment to the care of patients with neurodegenerative and neuropsychiatric conditions and has programmatic relationships with numerous clinics around JH (see **Programmatic Relationships of Our Faculty**). The major referral sources for outpatients are the JH specialty services (especially neurology, geriatric, and neuropsychiatry clinics), including the Memory and Alzheimer's Disease Treatment Center, and community physicians. Though more infrequent, inpatients are referred from 8 specialty units of the Phipps Psychiatric Service (including geriatric psychiatry, neuropsychiatry, affective disorders, eating disorders, substance abuse, and pain treatment), as well as medical/surgical units. The fellowship program is housed in the Department of Psychiatry & Behavioral Sciences; however, our clinic is the primary neuropsychology resource for the Departments of Neurology and Neurosurgery as well. We have programmatic relationships with the Epilepsy Center and Movement Disorders Center. Our fellows are involved in preoperative neuropsychological exams of candidates of epilepsy surgery and Wada procedures. We offer neuropsychology services to outpatients seeking deep brain stimulation surgery and persons with neurodegenerative parkinsonism. We conduct brief neuropsychological assessments pre- and post- lumbar puncture for patients with normal pressure hydrocephalus. We are a primary resource for the Departments of Medicine & Surgery, as well as the Cancer Center. Fellows also have the opportunity to evaluate and treat patients with FND in multidisciplinary formats, including on the epilepsy monitoring unit (EMU) and in a multidisciplinary functional movement disorder (FMD) clinic. Our clinic also provides neuropsychological evaluations to pre- and post-transplant patients.

CURRICULUM

Programmatic Relationships



Supervised Research & Scholarly Activity

Our program emphasizes the scientist-practitioner model. Fellows are expected to engage in both clinical activity and research. The extent of research involvement is tailored to the fellow's long-term career goals, though all fellows are expected to engage in scholarly activity in collaboration with a faculty mentor. This typically involves participation in ongoing research projects with program faculty, and averages 20% of a fellow's time and effort. By the completion of fellowship, we expect that trainees working towards an academic career will have presented data at a scientific conference, submitted at least one manuscript, or authored a grant submission in collaboration with a faculty mentor. Alternately, fellows working towards primarily clinical careers are expected to author at least one chapter, qualitative review paper, or case study in collaboration with a faculty mentor.

Fellows who plan to be involved in a major way with one of the faculty's research programs, and who secure research-related stipend support, may decrease their clinical load to 2-3 days per week. In this case, we encourage the fellow to spread their fellowship over three years, to ensure enough clinical experience is accumulated to seek board certification in clinical neuropsychology and to bring research projects to fruition. This three-year model has worked successfully for several fellows. Such arrangements are typically negotiated on a case-by-case basis prior to the start of the fellowship.

Examples of prior fellow-faculty research involvement include:

- Establishing and validating an approach to detecting neuropsychological impairment among aging physicians
- Meta-analysis of cognition in FTD and primary progressive aphasia
- Cognitive and neuroanatomical correlates of olfactory performance in adults with epilepsy
- R03 Submission of a project to examine a dietary intervention in older adults with subjective cognitive decline
- Cognition and psychiatric distress in Spanish-speaking patients following COVID-19 hospitalization
- Neuropsychological profiles in autopsy-confirmed cases of FTD and Alzheimer disease
- Cognitive effort and performance validity testing in healthy adults
- Social cognition and its neuroanatomic correlates in frontotemporal dementia



FACULTY RESEARCH AREAS

Tracy Vannorsdall, PhD, ABPP-CN

Research Populations of Interest: Cognition in COVID-19 and Cancer

Representative Publications:

- Becker JH, **Vannorsdall TD**, Weisenbach SL. Evaluation of Post-COVID-19 Cognitive Dysfunction: Recommendations for Researchers. JAMA Psychiatry. 2023, [PMID: 37585198](#)
- **Vannorsdall TD**, et al. Cognitive Dysfunction, Psychiatric Distress, and Functional Decline After COVID-19. J Acad Consult Liaison Psychiatry. 2022, 63(2):133-143. [PMID: 34793996](#)
- Oh ES, **Vannorsdall TD**, Parker AM. Post-acute Sequelae of SARS-CoV-2 Infection and Subjective Memory Problems. JAMA Netw Open. 2021, 4(7):e2119335. [PMID: 34323990](#)
- Aretouli E, Malik M, Widmann C, Parker AM, Oh ES, **Vannorsdall TD**. Cognitive and Mental Health Outcomes in Long COVID. BMJ. 2025, 390. [PMID: 40670058](#)
- **Vannorsdall TD**, Straub E, Saba C, Blackwood M, Zhang J, Stearns K, Smith KL. Interventions for Multidimensional Aspects of Breast Cancer-Related Fatigue: A Meta-Analytic Review. Support Care Cancer. 2021, 29(4):1753-1764. [PMID: 33089371](#)



Vidya Kamath, PhD, ABPP-CN

Research Populations of Interest: Olfaction in Neurodegenerative & Neuropsychiatric Conditions, Cognition in Frontotemporal Dementia, Lewy body disease, Atypical Parkinsonism & Down Syndrome

Representative Publications:

- **Kamath V**, Jiang K, Manning KJ, Mackin RS, Walker KA,...Brenowitz WD, Yaffe K, Simonsick EM, Deal JA. Olfactory Dysfunction and Depression Trajectories in Community-Dwelling Older Adults. J Gerontol A Biol Sci Med Sci. 2023, [PMID: 37357824](#)
- Morrow CB, Chaney GS, Bakker A, Onyike CU, **Kamath V**. Hyperorality in Frontotemporal Dementia: Cognitive and Psychiatric Symptom Profiles in Early-Stage Disease. J Alzheimers Dis. 2022, 89(4):1203-1209. [PMID: 36093697](#)
- **Kamath V**,...Knopman DS, Gottesman RF, Jack CR, Sharrett AR, Schneider ALC. The Neuroanatomic Correlates of Olfactory Identification Impairment in Healthy Older Adults and Persons with MCI. J Alzheimers Dis. 2022, 89(1):233-245. [PMID: 35871337](#)
- Shrestha, S., Zhu, X., Griswold, M., Palta, P.,...Mosley, T.H., Deal, J., **Kamath, V.** (2025). Olfaction and plasma biomarkers of Alzheimer's disease and neurodegeneration in the ARIC Study. Neurology. 104(11):e213706. [PMID: 40373252](#)
- **Kamath, V.**,...Moghekar, A., Hogue, C.W., Brown, C.H. Poor Olfaction Prior to Cardiac Surgery: Association with Cognition, Plasma Neurofilament Light, and Postoperative Delirium. Int J Geriatr Psychiatry. 2024, 39(2): e6066. [PMID: 38314872](#)
- Kang JY, Yenokyan G, Hwang BY, Chen M,..., Sperling MR, **Kamath V**. Odor Identification Predicts Postoperative Seizure Control following Magnetic Resonance-Guided Laser Interstitial Thermal Therapy. Epilepsia. 2020, 61(9):1949-1957. [PMID: 32944948](#)



Alison Buchholz, PhD

Research Topics of Interest: Epilepsy, FND, Personality Assessment, Cognition in HIV, Cognitive Intra-Individual Variability, Effort

Representative Publications:

- **Buchholz A**, Reckess GZ, Del Bene VA, Testa SM, Crawford JL, Schretlen DJ. Within-Person Test Score Distributions: How Typical Is "Normal"? Assessment. 2024; 31(5):1089-1099. [PMID: 37876148](#)
- **Buchholz A**, Deme P, Betz JF, Brandt, J, Haughey, N, & Cervenka, MC. A Randomized Feasibility Trial of the Modified Atkins Diet in Older Adults with Mild Cognitive Impairment due to Alzheimer's Disease. Front Endocrinol, 2024, 15, 1182519. [PMID: 38505743](#)
- Vance DE, Del Bene VA, Frank JS, Billings R, Triebel K, **Buchholz A**, Rubin LH, Woods SP, Li W, Fazeli PL. Cognitive Intra-Individual Variability in HIV: An Integrative Review. Neuropsychol Rev. 2022, 32(4):855-876. [PMID: 34826006](#)
- Diaz-Arias LA, Henry-Barron BJ, **Buchholz, A**, Cervenka MC. Positive Impact of a Modified Atkins Diet on Cognition, Seizure Control, and Abnormal Movements in an Adult with Glut1DS: Case Report. Neurol Sci. 2022, 43(5):3449-3452. [PMID: 35243547](#)
- **Buchholz A**, DeRight J,...Schretlen DJ. Do "Effort Tests" Really Test Effort? Neuropsychology. 2023, 37(1):104-112. [PMID: 36136791](#)



FACULTY RESEARCH AREAS (contd.)

Emily Murriel (Duggan), PhD

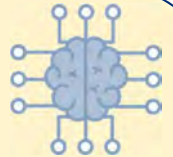


Research Topics of Interest: Movement Disorders, PSP/4R-Tauopathies, Transplant Neuropsychology, Cultural Neuropsychology, Psychometrics of Complex Cognition and Physical Functioning, Education in Neuropsychology

Representative Publications:

- Ruck, J, **Murriel, E**, Fortune Hernandez, N, Jefferis, AA, McAdams DeMarco, M, Vannorsdall, T, Segev, DL, King, EA, & Oh, ES. Cognitive Dysfunction, Psychiatric Distress, and Functional Decline after Liver Transplantation. 2025. Liver Transpl, 31(8), 1020-1030. [PMID: 40690315](#)
- Ming S, Maietta JE, Ranum RM, Hermann G, **Murriel EC**, Block C, Watkins K, Kiselica AM. Practical Considerations for Job Application, Interview, and Negotiation in Clinical Neuropsychology. 2025. J Clin Exp Neuropsychol. [PMID: 41047703](#)
- **Duggan EC**, Piccinin AM, Clouston S,...Hofer SM. A Multi-Study Coordinated Meta-analysis of Pulmonary Function and Cognition in Aging. J Gerontol A Biol Sci Med Sci. 2019, 74(11):1793-1804. [PMID: 30825374](#)
- **Duggan EC**, Awakon LM, Loaiza CC, Garcia-Barrera MA. Contributing Towards a Cultural Neuropsychology Assessment Decision-Making Framework: Comparison of WAIS-IV Norms from Colombia, Chile, Mexico, Spain, United States, and Canada. Arch Clin Neuropsychol. 2019, 34(5):657-681. [PMID: 30295696](#).

Julie Petersen, PhD



Research Topics of Interest: Neuroimaging and Computational Neuroanatomy

Representative Publications:

- Boshmaf SZ, **Petersen J**, Kumar R, Scantlebury N, Rohringer CR, Triantafilou A,... Rabin JS. Cognitive Outcomes Following Second-Sided Focused Ultrasound Thalamotomy for Tremor. Mov Disord Clin Pract. 2025. [PMID: 40265993](#)
- **Petersen J**, McGough J, Gopinath G, Scantlebury N, Tripathi R, Brandmeir C, Boshmaf S, Brandmeir NJ,... Rabin JS. Cognitive Outcomes Following Unilateral Magnetic Resonance-guided Focused Ultrasound Thalamotomy for Essential Tremor: Findings from Two Cohorts. Brain Commun. 2024;6(5):fcae293. [PMID: 39291168](#)
- McWilliams K, Kaplan A, Eline A, Kaminer I, Zodrow S, **Petersen J**, ... Osipowicz K. Cortical Semantization of Autobiographical Memory over Subjective Chronological Time: An fMRI study. Eur J Neurosci. 2022;55(7):1798-1809. [PMID: 35304784](#)
- Karpouzian-Rogers T, Cobia D, **Petersen J**, Wang L, Mittal V, Csernansky J, Smith, MJ. Cognitive Empathy and Longitudinal Changes in Temporo-parietal Junction Thickness in Schizophrenia. Front Psychiatry. 2021;12:667656. [PMID: 34054621](#)
- Shun-Chin JW, Jenkins LM, Apple AC, **Petersen J**, Xiao F, Wang L, Yang FP. Longitudinal fMRI Task Reveals Neural Plasticity in Default Mode Network with Disrupted Executive-Default Coupling and Selective Attention After Traumatic Brain Injury. Brain Imaging and Behav. 2020;14(5):1638-1650. [PMID: 30937828](#)

Research Outside the Division

Though fellows are encouraged to work on scholarly activities with program faculty, Johns Hopkins includes over **ten academic and research divisions** and numerous centers, institutes, and affiliated entities. As such, there may opportunities for fellows to collaborate with a researcher on a topic outside of those offered in the division. See [Department of Psychiatry & Behavioral Sciences Research Programs](#) and [Department of Neurology & Neurosurgery Research Labs](#) for a list of research efforts within and outside the department.

DIDACTICS

Core Didactics

Fellows are expected to participate in the following core didactics, which occur in person or virtually.

Activity	Occurrence	Description
Morning Report	Daily 8:30a – 9a	Fellows meet with the program faculty & clinical staff to present cases recently seen for clinical assessment. This activity helps residents advance oral presentation skills, neuropsychological knowledge base, and case conceptualization ability and prepare for the ABCN/ABPP Work Sample and Fact Finding examinations.
Department of Psychiatry Grand Rounds	Mondays 11a – 12p	Department faculty present patients who exemplify specific disorders or treatment issues and review the relevant literature and their own research on the topic.
Medical Psychology & Neuropsychology Journal Group	Tuesdays 12p – 1p	An article appearing in the current research literature is selected by a fellow and read by all attendees. The presenter is responsible for leading the group discussion of the article, critiquing the research, arguing theoretical points, and discussing its implications.
Professional Development Meeting	Monthly Tuesdays 12p – 1p	Fellows meet with faculty to discuss professional issues in neuropsychology and professional development topics.
Medical Psychology & Neuropsychology Seminar	Tuesdays 4p – 5p	Faculty psychologists and physicians as well as guest speakers present interactive seminars on a broad array of ethical, clinical, and scientific topics to Division members and guests. Fellows are expected to deliver at least one presentation each year.
Neuropsychology Fact Finding	Monthly Tuesdays 4p – 5p	Fellows have the opportunity to participate in an ABPP exam style exercise that involves step-by-step gathering of historical information and data pertaining to a clinical case. The goal is to demonstrate sound clinical reasoning in the process of formulating a diagnosis and appropriate recommendations.
Foundational & Advanced Concepts in Neuropsychology Course <i>Summer</i>	Thursdays 12p – 1p	Fellows will expand their understanding of different neurologic disorders and underlying anatomic and psychological dysfunction through a three-month semi-formal didactic modality, which will require assigned readings, in-person course meetings for review and elaboration, and occasional quizzes.

DIDACTICS

Elective Didactics

In addition to core didactics, several elective specialty conferences are held virtually. Attendance depends on one's interests and schedules. A sampling is listed below. Fellows are also encouraged to become actively involved in relevant professional organizations and attend national scientific meetings.

Activity	Occurrence	Description
Psychiatry Research Conference	Tuesdays 12p – 1p	Departmental faculty and guest speakers present current research on psychiatry and neuroscience topics.
Kennedy Krieger Institute Professional Development Seminar	Wednesdays 4p – 5p	Faculty neuropsychologists deliver interactive presentations outlining key components in the transition from trainee to successfully practicing board-certified neuropsychologist.
Epilepsy Conference	Mondays 8:30a – 10a	A multidisciplinary epilepsy team of physicians, surgeons, nurses, and neuropsychologists meet to provide a consensus management plan for patients with epilepsy, including whether the patient would benefit from epilepsy surgery.
Advanced Therapies in Movement Disorders Case Conference	Monthly 2 nd Wednesday 3p – 4:30p	A multidisciplinary group discussion of prospective DBS candidates with a team of movement disorder neurologists, nurse practitioners, neuropsychologists, and neurosurgeons. Fellows present neuropsychological results to the team.
Movement Disorder Lecture Series and Video Rounds	Bi-Monthly 1 st Wednesdays 4p – 5p 3 rd Wednesdays 2:30p – 4:30p	Topics cover the breadth of movement disorders presented by movement disorder neurologists and movement disorder fellows, as well as discussion of teaching cases and those needing consensus.
Neurology Grand Rounds	Thursdays 3:30 – 5p	A lecture series on evidence-based/standard-of-care practices across neurologic subspecialties & advances in the diagnosis/management of various neurologic disease states.
Schizophrenia Seminar Series	Monthly 1 st Wednesdays 3p – 4p	Scientific presentations on topics related to the neuroscience of schizophrenia and related conditions.
JH PACT Multidisciplinary Meeting	Thursdays 2p – 3p	An interdisciplinary group of healthcare experts meet to discuss the clinical care/research on COVID-19 survivors.
JH CTC Transplant Case Conference	Multiple, Weekly	A multidisciplinary meeting of medical and mental health providers discuss patients seeking solid organ transplants.
Brain Cuttings	Scheduled	Dr. Juan Troncoso, Professor of Pathology & Neurology, directs brain cuttings for Johns Hopkins trainees.
Geriatric Psychiatry & Neuropsychiatry Seminar	Fridays 12p – 1p	Geriatric psychiatrists and guest speakers present topics related to psychological and psychiatric functioning in older adults.

DIDACTICS

Sample Didactic Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
8:30am	Morning Report / Epilepsy Conference		Morning Report	Morning Report	Morning Report
11am	Psychiatry Grand Rounds				
Noon		Professional Dev't or Psychiatry Research Conference			GeriPsych Seminar
3pm			DBS Conference monthly		
4pm		Medical Psychology Seminar / Fact-finding			

Supervisory & Teaching Experiences

Fellows have the opportunity to provide clinical supervision of pre-doctoral practicum students and externs. Additional supervision of undergraduate students who work with faculty and fellows on research projects is available. Fellows present clinical cases in the Epilepsy Case Conference and Advanced Therapies in Movement Disorders meeting. Each fellow also presents in the Medical Psychology & Neuropsychology Seminar Series.



Fellow Competencies & Evaluations

Fellows are expected to advance towards **foundational and functional competencies** during the fellowship. Our exit criteria follow the Houston Conference guidelines for fellowship training noted below. Evaluations occur every 3 months, corresponding to the midpoint and end of each 6-month rotation.

- Advanced skill in the neuropsychological evaluation, treatment and consultation sufficient to practice independently
- Advanced understanding of brain-behavior relationships
- Scholarly activity (e.g., abstract submission, book chapter, manuscript/grant submission, test development)
- Eligibility for state or provincial licensure or certification for the independent practice of psychology
- Eligibility for board certification in clinical neuropsychology by the American Board of Professional Psychology.

WORK ENVIRONMENT

Clinic Space & Support

All fellows have individual offices and a computer. The Medical Psychology Clinic maintains a full suite of test instruments, scoring programs, dictation software, and statistical packages. Psychometrists are available to help administer testing and score/table the results for fellows in some cases. Each fellow has access to the Johns Hopkins Welch Medical Library, which offers an array of resources, including numerous informational databases, Welch library informationists to aid with comprehensive information searching, and institutional access to an array of full-text electronic neuropsychology, neurology, and psychology textbooks.



Trainee Resources

The Johns Hopkins University School of Medicine is committed to providing a supportive environment in which the dimensions added by diversity in race, ethnicity, nationality and/or immigration status, culture, socioeconomic status, veteran status, disability status, religion, sex, age, sexual orientation, gender identity, gender expression, pregnancy status, and marital status are valued and celebrated. We seek to celebrate the strengths added by different points of view from a diverse community, and we recognize that one of the many benefits of such a community is an enhanced ability to identify creative solutions to clinical and research practice. Our program provides support at many levels to our trainees to ensure that they are respected, included, empowered, and engaged. Example resources for trainees can be found below:

- [Health Promotion and Well-Being](#)
- [Mental Health Resources](#)
- [Gender Affirming Resources](#)
- [Disability Services](#)
- [Office of Institutional Equity](#)

Johns Hopkins School of Medicine Core Values



Excellence



Leadership



Openness



Respect

BENEFITS & APPLICATION PROCESS

Stipend, Health Insurance & Leave

Fellows are compensated at least equal to the minimum NIH NRSA stipend level (PGY0). The current stipend levels are \$63,480 for first-year fellows (PGY-0) with increases expected for FY 2025. Individual [health insurance coverage](#) is provided; family coverage is available.

In addition to official University holidays, fellows are allotted 10 days of paid vacation and 10 professional days each year to attend scientific/professional meetings. In addition, 15 sick days are allotted per year. The residency program adheres to the [Johns Hopkins University New Child Accommodations Policy for Postdoctoral Trainees](#). Additional information can be viewed on the [Policies, Pay & Benefits for Postdoctoral Research Fellows](#) website. Take the [Johns Hopkins Virtual Tour for Prospective Applicants](#).

Hybrid Work Policy

Our program supports workplace flexibility, while also fueling meaningful in-person interactions that form the core of Johns Hopkins' education, discovery, and service mission. Our fellowship currently follows a **hybrid work format**. Fellows are expected to be on-site on clinic days and for in-person trainee meetings (e.g., monthly fact-findings, professional development meetings) unless otherwise specified. All work arrangements are subject to periodic review by faculty to ensure fellows are meeting the competencies of the fellowship.



Application Process

We typically accept one or two fellows into our post-doctoral fellowship program each year. The anticipated start date is between July 1 and September 1.

To apply, please send the following materials to Dr. Vidya Kamath at MedPsychFellow@jh.edu:

1. Your current *curriculum vitae*
2. A letter outlining your research and professional interests
3. Three letters of recommendation sent directly from recent clinical/research supervisors.
4. For application tracking, please enter your application information at: tinyurl.com/neurofellow

We do not require academic transcripts, sample reports or article pre-prints and request that these not be submitted. **We are unable to sponsor or take over sponsorship of an employment visa at this time.** We review applications on a rolling basis starting **December 1st** and offer virtual interviews via Zoom in early to mid-December. Faculty members often attend the International Neuropsychological Society annual meeting in February, where additional interview meetings can be arranged, if we have not filled our fellowship slots beforehand.

BALTIMORE • “CHARM CITY”

Baltimore offers a unique blend of historic charm, ethnic heritage, and urban vitality. From the dynamic Inner Harbor to the rolling estates on the edges of the city, Baltimore is a community for people of all backgrounds and interests. The Inner Harbor is the centerpiece of the city’s renaissance featuring a variety of shops, food stands, and restaurants. The National Aquarium, the Maryland Science Center, the U.S.F. Constellation, Camden Yards, and the Baltimore Maritime Museum are but a few of the numerous Inner Harbor attractions. Fort McHenry offers a glimpse of Baltimore’s past, as do the B&O Museum (celebrating the inception of the railroad), the Maryland Historical Society, the Peale Museum, and Carroll Mansion. Visits to the homes of Edgar Allen Poe, Babe Ruth, and H.L. Mencken provide a look into the lives of some of Baltimore’s most famous citizens.

Baltimore offers a diverse and lively cultural scene. The Meyerhoff Symphony Hall is home to the world renowned Baltimore Symphony Orchestra. The elegant Lyric Opera House, the Peabody Conservatory, and the outdoor stages of Merriweather Post Pavilion, Pier 6, and Oregon Ridge play host to every musical taste from classical and jazz to country, rock, hip hop/rap, and techno. Theater-lovers have many outlets including the Hippodrome Theater, Centre Stage, Theater Project, and Everyman Theater. The Walters Art Gallery, Baltimore Museum of Art, and American Visionary Art Museum offer notable permanent and traveling exhibits. Sports fans will find the Baltimore-Washington area an exciting place to call home. The Baltimore Orioles and Ravens serve as the backbone of a proud sports’ tradition, which also includes professional soccer and lacrosse. The Baltimore community looks forward to annual sporting events such as the Governor’s Cup yacht race and the Preakness, the second jewel in the Triple Crown of horse racing. Part of Baltimore’s charm is the “small town” atmosphere found in its diverse neighborhoods.



Travel & Transit

Baltimore enjoys a central position on the East Coast. AMTRAK services in Baltimore are available at the newly renovated Penn Station, two miles from the Johns Hopkins Hospital. There is frequent service to Washington D.C. (30-minute trip), Philadelphia (90-minute trip), and New York City (three-hour trip). The Baltimore-Washington International Airport (BWI) is 12 miles from the city and offers a full range of national and international flights daily.



BALTIMORE • “CHARM CITY”

Neighborhoods

The following are popular locations our fellows call home.

FELL’S POINT: Fell’s Point is a historic waterfront area, home to over 350 original colonial period buildings, including the oldest house in Baltimore, which is now a museum. The area remains an attraction for all ages, with numerous restaurants, pubs, boutiques, and antique shops. Fell’s Point is 1.5 miles south of Johns Hopkins Hospital.

CANTON: Canton is a waterfront area adjacent to Fell’s Point with numerous shops, clubs, bars, and restaurants. It is an area that attracts young professionals for its exciting nightlife and relaxing Sunday brunches. Canton is 2 miles southeast of Johns Hopkins Hospital.

MOUNT VERNON: Mount Vernon is the geographic and cultural center of the city with fine galleries, relaxing parks, and gardens. The 178-foot Washington Monument dominates this area. Located 2 miles west of Johns Hopkins Hospital, fashionable apartments and ornate townhomes make it a popular place to live.

FEDERAL HILL: Federal Hill is near the Inner Harbor 3 miles southwest of Johns Hopkins Hospital. Part of it remains an old-town colonial community with elegant row houses. Growing along the harbor are condominiums and townhomes. With historic and charming restaurants, bars, and shops, the area is perfect for an afternoon ramble. Cross Street Market and the bustling nightlife attracts young professionals and sports fans to the area.

BOLTON HILL: Located 3 miles northwest of Johns Hopkins Hospital, Bolton Hill is a quaint, beautiful residential neighborhood with historic townhomes and brick sidewalks, and home to the Maryland Institute College of Art.

CHARLES VILLAGE: Charles Village is residential neighborhood adjacent to the Johns Hopkins University undergraduate campus and Baltimore Zoo, 4 miles northwest of Johns Hopkins Hospital.

HAMPDEN: Hampden has an eclectic and artistic ambience and a wide range of restaurants, vintage clothing stores, thrift shops, and used furniture stores. Hampden is 5 miles northwest of Johns Hopkins Hospital.

MOUNT WASHINGTON: Mount Washington has a quaint, suburban feel. There are lush natural surroundings with greenery and parks. Young and retired professionals enjoy the coffee shops, wine markets, and fine restaurants. Mount Washington is 8 miles northwest of Johns Hopkins Hospital.

Take a virtual tour of Baltimore and learn more about living in Charm City.



FELLOWSHIP ALUMNI

Fellowship alumni along with their fellowship years and current professional position held. Current division faculty who were former fellows are highlighted.

Name Current Position	Years	Name Current Position	Years
Lei Lu, PhD Scientific Advisor, Syneos Health Morrisville, NC	2002 – 2004	Matthew Cohen, PhD Associate Professor, Dept. of Communication Sciences and Disorders, University of Delaware Newark, DE	2013 – 2015
Angela Buffington, PhD, ABPP/CN Assistant Professor, Department of Family Medicine & Community Health, University of Minnesota Medical School, Mankato, MN	2003 – 2005	Antonio N. Puente, PhD, ABPP/CN Neuropsychologist, Puente Neuropsychology Institute, Wilmington, NC	2014 – 2016
Lisle Kingery, PhD Senior Principal Scientist, Cogstate, Ltd. New Haven, CT	2003 – 2005	Jonathan DeRight, PhD, ABPP/CN Neuropsychologist, Precision Neuropsychology, Woodbridge, VA	2014 – 2016
Anjeli Inscore, PsyD, ABPP/CN Associate Professor, Dept. of Neurology, University of Maryland School of Medicine, Baltimore, MD	2004 – 2006	Renee Green, PhD Neuropsychologist, Lurie Center for Autism Massachusetts General Hospital, Boston, MA	2015 – 2017
S. Marc Testa, PhD, ABPP/CN Director, Division of Neuropsychology LifeBridge Health, Baltimore, MD	2004 – 2007	Lindsay Morra, PhD, ABPP/CN Assistant Professor, Dept. of Psychiatry & Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD	2016 – 2018
Tracy Vannorsdall, PhD, ABPP/CN, Director Associate Professor, Dept. of Psychiatry & Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD	2006 – 2009	Christina Figueroa, PhD Neuropsychologist, Las Vegas Neurology Center Las Vegas, NV	2016 – 2018
Laura Wulff, PhD, ABPP/CN Manager, Brain Injury Day Treatment Program Brooks Rehabilitation Hospital, Jacksonville, FL	2007 – 2009	Victor Del Bene, PhD Associate Professor, University of Alabama at Birmingham, Birmingham, AL	2017 – 2019
Sally Long, PhD Assistant Professor, Department of Neurology Georgetown University, Washington, D.C.	2008 – 2010	Alison Buchholz, PhD, ABPP/CN Assistant Professor, Dept. of Psychiatry & Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD	2017 – 2020
Eleni Aretouli, PhD Associate Professor of Neuropsychology University of Ioannina, Ioannina, Greece	2008 – 2010	Emily Sutherland, PhD, ABPP/CP U.S. Navy Psychologist Coronado, CA	2018 – 2020
Mark Rogerson, PhD Neuropsychologist, Capital Area Psychological Services, Clifton Park, NY	2009 – 2011	Emily Murriel (Duggan), PhD Assistant Professor, Dept. of Psychiatry & Behavioral Sciences, Johns Hopkins University School of Medicine, Baltimore, MD	2019 – 2022
David Maroof, PhD, ABPP/CN Neuropsychologist, Neuropsychology of Orlando Orlando, FL	2009 – 2011	Daniel Leibel, PhD Neuropsychologist, Baltimore VA Medical Center Baltimore, MD	2020 – 2022
Ozioma Okonkwo, PhD Professor, Geriatrics and Gerontology University of Wisconsin, Madison, WI	2009 – 2011	Victoria Kordovski, PhD Neuropsychologist, SUNY Upstate Medical University, Syracuse, NY	2020 – 2022
Gwendolyn Gerner, PsyD Neuropsychologist, Dept. of Neuropsychology Kennedy-Krieger Institute, Baltimore, MD	2010 – 2012	Elissa McIntosh, PhD Neuropsychologist, LifeStance Health Boston, MA	2021 – 2023
Xi Besha, PhD Neuropsychologist, Care Health Associates, LLC Schenectady, NY	2010 – 2012	Claire Kaplan, PhD Neuropsychologist, CommonSpirit Neurosciences St. Anthony Hospital, Lakewood, CO	2021 – 2023
Gila Reckess, PhD Clinical Neuropsychologist GZR Psychology Services, NY	2011 – 2013	Hailey Dotterer, PhD Neuropsychologist, Integrated Neurology Services Falls Church, VA	2022 – 2024
Carrington Wendell, PhD, ABPP/CN Neuropsychologist, Chesapeake Neuropsychology Severna Park, MD	2012 – 2014	Xiao Yang, PhD Neuropsychologist, LifeStance Health Ashburn, VA	2023 – 2025
Campbell Sullivan, PsyD, ABPP/CN Associate Professor, University of Texas Health Science Center, San Antonio, Texas	2011 – 2013	Jewel Heald, PsyD Neuropsychologist, Newton Neuropsychology Group, Newton, MA	2024 – 2026
Jacqueline Weaver, PsyD Neuropsychologist, University of Pittsburgh Medical Center, Spring Grove, PA	2013 – 2015		