



Notes from the Department Chair

Kaleidoscope

When I think of a kaleidoscope, I think of an instrument that shows a series of colorful patterns. The origin of the word is from the Greek words kalos “beautiful” and eidos “form” with “scope”- to look at carefully. The scope helps us focus on the beautiful forms.

As I think about the beauty of our department’s work, I think about many examples. I think there is beauty in the education provided to so many learners. I think there is beauty in the design of the intricate research designs for many of our faculty’s research projects. There is beauty in our engagement with our community. There is beauty in the art and delivery of clinical care. Below, I will share some beautiful feedback regarding some of the clinical care our clinicians provide. I receive monthly feedback from the patients we serve, and most is positive, and even often beautiful. Dr. Jessica Molinaro received this feedback from a family:

“Dear Dr Molinaro,

I want to thank you for your tender care of my dear husband who recently passed. You were so kind to him and to me. He appreciated your concern and was comfortable with you. I am so grateful for your concern for him and me. You reached out to me outside of your office hours. You tried so hard to find a treatment that would help him. Once you said to me that you thought of us often. I told my husband and he said he believed it. My healthcare friends and I are worried about healthcare and how impersonal it has become. You give us hope. Even when he was inpatient, you collaborated to find the “perfect” treatment for him. I will always remember your kindness.

You and your colleagues in palliative care offer a tremendous service to your patients and their families.

I’m so grateful for all of you.

Best wishes for you, Take care. And again, thank you.

Sincerely,”

This was beautiful and it helps remind us why we all do the critically important work we do each and every day. This letter shows that our kind listening and being there for our patients makes a difference for them and their family. The instillation of hope for our patients is life changing.

I am so grateful for our faculty, staff, and trainees and the incredible and beautiful work you do.

Thanks, Dr. Molinaro and all of you!

Sincerely,

Your Chair,

Jon A. Lehrmann, MD
Charles E. Kubly Professor and Chairman
Department of Psychiatry and Behavioral Medicine MCW
Associate Chief of Staff for Mental Health, Milwaukee VAMC



Notes from Administration

Historical Metrics

What a perfect opportunity to share historical metrics with the entire Department.

I would like to focus my quarterly article on the growth of Psychiatry and Behavioral Medicine over the previous five years. The table of metrics below highlights a combined Adult and Child perspective (due to limited space, I've summarized at a high-level).

Over the last five years, we've experienced growth that has really challenged the Department within all four Missions of MCW; Clinical, Community, Education and Research. All while managing through a pandemic and changing course to a 90% / 10% virtual versus on-site patient experience. The virtual aspect has since settled to an approximate 50% / 50% patient experience. I believe this mix will continue for the foreseeable future.

Five Year Financial Snapshot 2019 - 2023						
(\$000's)						
Fiscal Year	Revenue	Charges	wRVUs	Payments	Pmts Per wRVU	Head Count
2018	\$ 24,649	\$ 19,805	81,337	\$ 4,405	\$ 54.16	153
2019	27,336	19,462	84,784	5,041	59.46	173
2020	26,935	19,220	77,986	5,317	68.17	177
2021	30,823	20,677	100,015	6,245	62.44	192
2022	35,874	23,778	121,782	7,384	60.63	198
2023	35,580	25,547	127,990	7,758	60.61	213
% increase						
2018 - 2023	44.4%	29.0%	57.3%	76.1%		39.2%

The table above represents:

Revenue sources; clinical, affiliate, contributions, research grants, etc.

Head Count; faculty, staff and VA. As of June 30th, 2023: Faculty – 115 ; Staff - 98

Please note the above growth over the last five years hasn't gone unnoticed by MCW & CSG/CW Sr. Leaders. As referenced during various Town Hall meetings, the growth is well supported by both Froedtert Memorial Lutheran Hospital and Children's Wisconsin. Recent growth in all missions of Psychiatry and Behavioral Medicine has led to upcoming relocations for both HISG/CAIR to the new ThriveOn building near the end of January 2024 as well as TOSA areas of Education, Research and Administration relocating to the RPC within the next month. TOSA vacant space will be re-purposed to clinical space to accommodate the growth. The actual build-out of the 3rd floor TOSA shell space will be delayed for approximately 2-3 years.

In closing, I would like to thank everyone for helping the historical growth become a reality and preparing for future growth.

Definitely, it takes a Village.

We're everyone's favorite Department of Psychiatry and Behavioral Medicine.

Gary Koenig
Department Administrator



Notes from Education

APP PMH Fellowship

Greetings!

As we wrap up a summer that was characterized by Barbie, wildfire smoke, and the sounds of Beyoncé and Taylor Swift's newest albums, the APP Psychiatry/Mental Health Fellowship team recognizes these phenomena as greater reflections of our world. We are part of a society that craves enthusiasm and resilience in the context of our ever more digitally-connected, complicated, and challenging times. In this light, we would like to take a moment to reflect on our history and share some program highlights that continue to keep us energized and moving forward.

Program History: The APP Psychiatry/Mental Health Fellowship program was established as a result of a successful HRSA grant proposal written by former MCW APPs Jeff Miller, DNP, PMHNP-BC and Julie Raaum, DNP, APNP. In June 2023, we began the transition from a grant-funded residency to an MCW/Froedtert/CHW-funded fellowship. With this change, we were able to widen our candidate pool to include PAs as well as NPs. This year we had the largest pool of applicants to date! We are also proud to report a retention rate of over 50%, with more than half of our previous graduates accepting positions with MCW.

2023-2024 Cohort

- Claire Gates, PA-C
- Rakesh Paytel, MD, PMHNP-BC
- Michael Lam, PMHNP-BC
- Jennifer Bentley, PMHNP-BC



Program Structure: The program is a 12-month fellowship running from 9/1/2023-8/31/2024. Fellows complete core rotations in adult ambulatory, student mental health, inpatient psych, geriatric psychiatry, and child/adolescent psychiatry. Additional rotations include the Wisconsin Poison Center, psychopharmacology, child development, perinatal psych, and integrated behavioral health. Academic education consists of weekly didactics, case reviews, and professional development.

Leadership Changes: We are grateful for continued leadership from Judy Evenson, PMHNP-BC as program director and Himanshu Agrawal, MD as physician champion. Abi Andrews, PA-C is stepping down from her role as assistant director but will continue as a preceptor. Anna Melville, DNP, PMHNP-BC and Jason Ipsarides, DNP, PMHNP-BC will be co-assistant directors going forward. Amanda Gross transitioned from education coordinator to a central role for all APP fellowships. We are excited to have Beverly Hayes join our team as Education Coordinator II. Marisa Stitch, PMHNP-BC is joining as our case review supervisor and preceptor. Colleen Ballbach, APNP is now the CHW site director in addition to her role as a preceptor.

Finally, we would like to extend our gratitude to the MCW Department of Psychiatry, program educators, and preceptors. We appreciate your dedication to our program and ultimately the quality of care that our graduates can provide.

Sincerely,

Anna Melville, DNP, PMHNP-BC
Assistant Professor
Department of Psychiatry and Behavioral Medicine, MCW

- and -

APP PMH Fellowship Team



Faculty Development

Mentoring

Mentoring is critical to the successful integration of new faculty. It is also integral to the professional development of more seasoned faculty. In terms of building a diverse faculty workforce, mentoring also gives persons who may arrive at the Department with fewer professional resources the opportunity to share in collective experiences and resources and to thrive.

Yet a number of faculty members are reluctant to mentor. They may be concerned that they are not sufficiently professionally established to serve as a mentor or that they do not know how to approach common topics. None of us is likely to have all of the skills necessary to meet mentees' needs, yet we can still be very successful mentors. In large part, mentorship involves knowing how to approach a topic with a mentee, how to engage in collaborative problem solving, and how to identify resources beyond our own to meet a mentee's needs.

To this end, our Department's Mentoring Committee is developing a series of guides for mentors, to be published quarterly, to help mentors address common topics for mentors and mentees. The guides will address a range of topics including:

- concrete approaches to time management;
- mindful approaches to professional networking;
- CV reviews;
- professional development planning.

Guides will also assist mentors in supporting mentees with specific professional tasks including:

- giving academic presentations;
- educational session planning;
- manuscript development;
- planning research projects and grants.

We hope that these guides will increase the confidence of reluctant mentors and thus expand our department's mentor pool. The guides may also help existing mentors to structure discussions with mentees. Requests for additional topics are welcome.

Carol Galletly, PhD, JD
Associate Professor
Department of Psychiatry and Behavioral Medicine; MCW



Clinic Notes

In Awe

For this issue of PSYCHED, I would like to share my thoughts about the awe I feel regularly, working at Tosa Health Center.

I am in awe of the master class in supportive psychotherapy I witness and imbibe from my colleagues at the front desk.

I am in awe of the common sense and courage with which my program director runs the daily show, ensuring world class patient care.

I am in awe of the sheer resilience and camaraderie that my nursing team puts on display day after day- they remind me of a group of baristas in the world's busiest coffee shop!

I am in awe of the pride with which my colleagues in environmental services carry out their daily tasks to ensure the clinic is meticulously clean and safe.

I am awestruck at my good fortune that there are 55 clinicians that practice here, and I would feel comfortable sending my loved ones to any of them. I am in awe that any request for cross coverage gets filled within minutes (sometimes seconds!)

I find the initiative and thoughtfulness of my intake team awe-inspiring.

I am in awe of the tenacity and dedication of my quality analysis team.

I am in awe of the IQ as well as the EQ of the residents, fellows and students that frequent the clinic hallways.

I am in awe of Jon (he is blushing while reading this).

You may think that I take to awe too easily, and much more frequently than the average bear. You might be right.

And isn't it so lovely to live a life so filled with awe?

Try it - take the awe in. You might like it.

Himanshu Agrawal, MBBS, DF-APA
Associate Professor
Department of Psychiatry and Behavioral Medicine; MCW
Medical Director – MCW Psychiatry and Behavioral Medicine
Clinics at Tosa Health Center



JEDI Leadership

Humility

When we were asked to choose our own theme for this column, the first thing that came to mind was the idea of humility. The University of Oregon DEI defines cultural humility as "...a practice of self-reflection on how one's own background and the background of others, impact teaching, learning, research, creative activity, engagement, leadership..." Accepting the role of co-chair of the Departmental JEDI Committee this past July, I appreciate that there is so much that I don't know and continue to learn. I appreciate the help of my co-chair, Lisa Roehl, our Vice Chair of Equity, Diversity and Engagement for the Department, Dr. Arrington, and the members of the JEDI committee as we continue to learn together.

In the wake of the murder of George Floyd, the department recognized the need for humility and held our first departmental focus groups to better understand what we had to learn. From there, Dr. Arrington and Ms. Roehl were approached by Dr. Lehmann to develop the JEDI task force, eventually leading to the Departmental JEDI Action Committee which has been active since January 2022. From the mission statement, the committee "...is dedicated to creating an ongoing process of systems change aimed at building and improving a culture of inclusion, equity, and racial justice. It is this committee's purpose to assist department members with examining our biases and recommend initiatives targeting racial and other disparities to more fully meet our department's mission to serve the behavioral health of the community..."

Currently, there are three active subcommittees – Training, Community Engagement, and a new Operations Subcommittee led by Lisa Roehl, LPC, Matt Jandrisevits, PhD, and Erica Arrington, MD, respectively. The operations committee plans to work with our administration to better understand recruitment and retention of a diverse workforce.

As part of that humility, we don't presume to know the interests and needs of our faculty, staff, and trainees regarding JEDI issues. As such, several of our members, Drs. Beth Shaw, Matt Jandrisevits, and Alan Nyitray have developed a (very brief) needs assessment survey to better understand what areas you would like the committee and department to prioritize. I hope that you will take a few minutes to self-reflect and help us better understand how we might "...impact teaching, learning, research, creative activity, engagement, leadership..." as a department.

<https://inclusion.uoregon.edu/what-cultural-humility-basics#:~:text=Cultural%20Humility%20Is%3A,own%20beliefs%20and%20cultural%20identities>

Mara Pheister, MD, DFAPA
Associate Professor
Associate Director of Residency Education
Medical Director, Center for Psychotherapies
Staff Psychiatrist at Froedtert & MCW – Moorland Reserve, Tosa Center and Maehnoweskekiayah Wellness Center
Department of Psychiatry and Behavioral Medicine, MCW



Clinical Notes

Community Division Changes

This year has brought substantial changes to psychiatric care offered at Froedtert Menomonee Falls Hospital. Froedtert Health Community Division leadership made the difficult decision to close the inpatient mental health unit. The unit officially closed earlier this spring, on May 9th 2023. This decision was not due to any concerns about the quality of care provided, nor was it due to a lack of clinical need for such services in this community. It was a financial driven decision, instigated by a nationwide trend of reduced hospital reimbursement and increasing cost of providing care.

Other psychiatric care in the community division continues unchanged. Dr. Abedrazik Eisa and Dr. Travis Fisher continue to provide consult-liaison psychiatry services to patients admitted to either Froedtert West Bend or Menomonee Falls Hospitals. Froedtert also continues to offer behavioral health liaison (BHL) services, mental health Partial Hospital Program (PHP) and an AODA Intensive Outpatient Program (IOP).

The BHL team is comprised of therapists and social workers who are available for psychiatric consultations to the emergency department and general medical teams. BHLs help coordinate transfers to inpatient mental health units, assist in psychiatric discharge planning, and provide nursing education to improve the overall care provided by the medical services to patients with additional mental health needs.

The PHP is a 5-day-a-week, 8 hour per day therapy program focused on the treatment of primary mood and anxiety disorders. The usual length of treatment enrollment is 3 weeks. The program can accommodate up to 8 patients at a time. The PHP is intended to provide a level of treatment comparable with an inpatient admission, without the "down sides" of having to leave home, family or other positive therapeutic influences on a patient's life and recovery.

The IOP is a 3 night-a-week, 3-hour nightly therapy program that focuses on the treatment of alcohol and other substance use disorders. The usual length of enrollment is 9-12 sessions. This program can also accommodate up to 8 patients at a time. The IOP focuses on evidenced based AODA treatment, with an option to step down to a once-weekly "aftercare" program for further follow-up treatment to help support patient's sobriety.

The closure of the inpatient unit is undoubtedly a loss. Despite that, our MCW psychiatrists and Froedtert mental health team remain committed to providing the highest possible quality care in all our remaining programs.

Travis Fisher, MD
Assistant Professor
Department of Psychiatry and Behavioral Medicine; MCW



Notes from Well Being Leadership

A Reflection on Living by Values

Recently, MCW announced a set of six organizational values that will guide how our organization conducts its operations and how it interacts with others. After reading that announcement, I felt a sense of hopefulness and happiness to be working within an organization that strives to become a better version of itself and to have sort of a compass as a guide. I also began to reflect on which of those MCW values were consistent with my own professional and personal values, and what I do, need to do more of, or need to start doing, to live congruently with those. I also thought about the Emerge process and how all this could be systematically applied. I'm eager to see how MCW moves forward to incorporate these in an ongoing way, hold accountability to these values in action, and wonder how I may do similarly.

Research by Sortheix and Schwartz (2017) supports the notion that cultural context shapes individual-level associations between values and subjective wellbeing. While research by Oishi, Diener, Suh, & Lucas (1999) notes that one's values, which are influenced by culture, may change across developmental stages. In short, there exists an evolutionary process of examining, noting, and living congruently with values that can influence wellbeing. So, from time to time, it's important to engage in reflection of how we are living and by what values, in order to promote our wellbeing. And when combined with an organization that does the same, we create opportunities for purpose and meaning in our careers and guard against burnout.

Modeling can be very influential! As leading organizational health consultant, Patrick Lencioni, has said, "values need to mean something", and explicit expression and authenticity of those values does too. So, some of the remaining questions I have in all this are: What will be done to move these values forward? How does one weave their personal, professional and organizational values; and what happens if these are in conflict? When and how do other values configure into the mix over time? As processes unfold and timeteaches, it will be interesting to see where and what that leads to.

Although the future can seem uncertain, it is ever-changing and full of opportunities to continually strive towards improvement all the while using values as a guide.

Respectfully submitted by,

Lawrence Miller, PsyD
Associate Professor
Associate Vice-Chair of Well-Being
Associate Training Director, Health Psychology Training Program
Department of Psychiatry and Behavioral Medicine, MCW



Notes from the VA

Badges of Courage

While recent trends indicate that more people are seeking mental health services, there is every reason to believe that stigma continues to be a factor in getting care to those who need it most. Nearly every professional organization and advocacy group has some programming aimed at reducing stigma. Phrases like "stop the stigma" have thankfully become more and more familiar. However, stigma exists within cultures and therefore there cannot be one approach to addressing it. Rather, we must work to reach those in need within the customs and language of their culture.

We have seen the welcome addition of culturally specific efforts to reach members of such cultural groups as African-Americans, Asian-Americans, Hispanic/Latino/Latinx-Americans, LGBTQIA+ communities, and many others.

For veterans, the military is not only a job or means by which to serve their country, it's also a culture. Within military culture there are shared values, artifacts, rituals, and language.

Dr. Mike McBride and I have been working with our Zablocki VAMC's Veteran Advocacy Council to develop a new program to reduce mental health stigma among veterans in a culturally competent fashion. The new program is called The "Badges of Courage" program. Starting in October, Veterans who have benefited from mental health care can donate a patch, badge, or pin for display in the medical center. These artifacts are a type of military language. Our hope is that veterans who may be struggling to seek help, dealing with stigma, or feel "it's not for me" will see these items and recognize that veterans from their military branch, rank, military occupational specialty, etc. are benefiting from mental health care and they might too. Similarly, they may see insignias that they particularly respect as "brave," "tough," or "honorable" and might think "if they can get help, so can I." These items will be collected by the veterans' clinicians who are encouraged to engage the donating veteran to share more of their story, deepening their understanding of the veteran's experience and what they hope the symbol will communicate. The clinicians will then forward these items (anonymously) to Dr. McBride or me so that we can add them to displays in the medical center. We are excited to see what kind of items we'll see in the coming weeks. We expect a wide variety but we secretly hope for at least one insignia from Space Force since this is the only military branch from which neither Dr. McBride nor I have served a veteran.

Jason R. Burns, MD
Assistant Professor
Department of Psychiatry and Behavioral Medicine; MCW
Zablocki VAMC Milwaukee
Mental Health Division



Notes from Research

Meaningful Project

I am delighted to have the opportunity to describe a project that is particularly meaningful to me: the Advancing Behavioral Health Initiative (ABHI). In 2016, AHW funded 10 community coalitions to participate in an 8-year, 3-phase project to improve mental and behavioral health. Dr. Jeffrey Kelly recognized the potential impact of this funding opportunity and spearheaded the successful application to be the Academic Partner Team for the project. I lead this Academic Partner Team which includes Drs. Julia Dickson-Gomez, Carol Galletly, Laura Glasman, Katherine Quinn, Jen Walsh, and Jeffrey Kelly. Kevin Brown, Olivia Algiers, Wayne DiFranceisco, and Noel Rosada have also contributed greatly to this project's success.

Phase 1 consisted of an entire year of learning and planning specific community-based strategies within a Learning Community of our team, the 10 Community Coalitions' staff, and AHW. During the 5 years of Phase 2, each coalition implemented strategies based upon the unique needs of their communities, and we have documented several successes. Ashland County has implemented a HIPAA-compliant infrastructure to create and share mental health safety plans. The Lac du Flambeau tribal community has successfully restored a "culture as prevention" program to their community. Marathon County has embedded mental health therapists within schools. Several counties launched network-of-care websites to direct community members to appropriate mental health resources. Sources of Strength, an evidence-based suicide prevention intervention, has been brought to schools in northwest WI. Trainings in myriad topics related to mental health have been brought to various sectors within communities, including resiliency and ACEs in Chippewa Valley schools and the La Crosse community, and Mental Health First Aid in Brown County faith communities and La Crosse law enforcement. Using an equity lens, Milwaukee has seen the growth of a coalition of mental health, healthcare, advocacy, education, faith communities, parents/caregivers, and people with lived experience, and fostered capacity building of community members as leaders and content experts. Early childhood screening and social emotional learning curricula have been instituted in the Racine Unified School District.

The ABHI is now in Phase 3, two years devoted to ensuring sustainability of strategies, education of stakeholders, and wide dissemination of lessons learned. In early 2024, we will be launching a compendium of lessons learned from each community within the Psychiatry website. This compendium will be a launch pad for replication of strategies in new communities and facilitating further partnerships with entities interested in community-based mental health.

Michelle Broaddus, PhD
Associate Professor
Department of Psychiatry and Behavioral Medicine; MCW

HAPPY RETIREMENT - KAREN HAMILTON!!



How long have you been at MCW?

I began my career with MCW in December 1999.

Could you describe your career highlights?

The highlight was the people I've met and the friendships that I have made throughout the years, not to mention all the Residents, Post Doctoral Fellows, and faculty that I have had the privilege to work with. From working with Dr. Carl Chan and the Milwaukee Psychiatry Residency Program to being part of the Front Desk staff at the Tosa Health Center and working with Dr. Heidi Christianson and the Health Psychology Program from its inception to date has been fun. Stressful at times, but fun! I loved seeing past and present faculty and staff at the Holiday Gatherings.

What's next for you?

I recently became a grandmother. I have a 19-month-old Granddaughter and a 18-month-old Grandson that I want to spend more time with. I'll be spending as much time as I can with my father as well. I have many projects pending around the house that I've been wanting to get to, so now I'll finally be able to get them. I have several trips planned so traveling is also in my plans.



knowledge changing life



GETTING TO KNOW...

Faculty and Staff from the Department of Psychiatry and Behavioral Medicine



ALEXANDER BUHK, PHD
Assistant Professor
Bariatric Surgery Clinic
Department of Psychiatry
Froedtert Hospital

What is your educational background?

I completed both my undergraduate (BA) and graduate (MA, PhD) education at the University of Toledo. I then completed my predoctoral internship at Geisinger Medical Center (Scranton, PA) and postdoctoral fellowship at the Medical College of Wisconsin.

How long have you worked at MCW?

I began my postdoctoral fellowship at MCW in August 2021 and joined as faculty in November 2022.

Describe your typical workday.

The majority of my days are spent working with patients in the bariatric surgery clinic. I typically conduct pre-surgical evaluations though also engage in brief, skills-based psychotherapy. When not seeing patients, I am either consulting with other team members, collaborating on research/program development projects, or supervising learners.

What do you like most about your job and what attracted you to this field?

I was drawn to the unique ability to assist patients in both physical and emotional well-being. I also love the opportunity to teach learners and provide clinical supervision.

Tell us about life outside of MCW.

If I am not at work, you can find me at the park with my golden doodle (Ziggy), exploring new restaurants and breweries, binging new shows, or spending time with friends and family.

Just for fun – what are your favorite movies, books, music?

My favorite song / musician / movie varies based on mood. My overarching favorite movie is The Big Lebowski. If not that, I enjoy watching stupid / slapstick comedies like I Love You Man, Tropic Thunder, Wedding Crashers, Anchorman, etc. Music wise, I am a dead head, a parrot head, and any other jam band head that you can be. The Beatles and Eric Clapton will always have a special place in my CD player – as I am too old school to turn to streaming.

Tell us a fun/unique fact about yourself.

I love beer... perhaps more than I should. I am intrigued by the unique characteristics of varying styles of beer and have since started home brewing to explore the intricacies of beer.

In Memory



“You don’t say No to Carolyn”. That was one of the first messages I received when I joined the Tosa Health Center family in 2016.

However, Time is stubborn, even more stubborn than Carolyn Bischel.

It is with a very heavy heart that we share that after hitting back at cancer over and over again, our Carolyn passed away on October 5th..

We are not quite sure what else to write. We are still in shock.

Carolyn started with us on April 7, 1997, coming from Intake at St. Mary’s Hill Hospital. She was with us until August 2003 when we discontinued our Managed Care Program and closed our outpatient clinic at Second and Capitol. She went to Children’s Hospital for 4.5 years before we got her back for good on September 15, 2008. We all recently celebrated what she called “her 15-year anniversary at MCW- round 2.”

If you have any questions, concerns or just need a professional hug, our doors are open. Of course, there is also the SOS peer support program (pager 414-314-1763) and EAP services (<https://www.mcw.edu/-/media/MCW/Main/MCW-Employee-Resource-Center/EAP-Brochure.pdf>)

Please take care of yourself and each other, and please expect grief to hit us in waves.

We are so lucky we got to share our lives with her.

In mourning,

Bob, Himanshu, Dawn and LaRhonda.

DEPARTMENT HAPPENINGS



David J. Peterson
STAFF
Excellence Award
Recipients 2023

CONGRATULATIONS!

Juan Flores
Brenda Konczal
Jessica Noonan

Flu vaccines at the Town Hall!

The Tosa Nursing department will be at the in-person Town Hall Meeting on October 25th offering flu shots from 7:30-9:00 am!

Meeting to be held at Research Park Center: 10000 Innovation Dr, 1st floor Conference Room.

Please email Laura Wozniak or LaRhonda McConnell with any questions.



Town Hall Meetings

*****IN PERSON***** 8:00 a.m., Wednesday, October 25th at RPC, 1st Floor Conference Room

Virtual - 3:00 p.m. on Friday, November 17th and Friday, December 15th



PSYCHED is the newsletter of the
Department of Psychiatry and Behavioral Medicine,
Medical College of Wisconsin.

Jon A. Lehrmann, MD, Chairman and Professor
Editorial Team: Joy Ehlenbach • Dawn Norby

