



U.S. Psychiatric & Mental Health Congress

CONFERENCE & EXHIBITION®

THE NATION'S LEADING INDEPENDENT MENTAL HEALTH
CONFERENCE FOR ADVANCING PSYCHOPHARMACOLOGY,
PSYCHOTHERAPY, AND WELLNESS

A collage of three images: a stylized city skyline with a water tower, a man in a white shirt and tie speaking at a podium, and a woman with brown hair smiling and looking upwards. The images are set against a dark blue background with geometric shapes.

► Practical,
Evidence-Based
Education to
Improve
Patient Care

OCTOBER 21-24
SAN ANTONIO 2016
TEXAS



Not in 20 years has our knowledge base in mental health expanded so rapidly. With one foot firmly planted in research updates and the other in clinical application, *Psych Congress* is the ideal conference for clinicians looking for powerful, relevant education they can apply in practice immediately upon their return to the office.

Rakesh Jain, MD, MPH
2016 *PSYCH CONGRESS* CO-CHAIR



U.S. Psychiatric & Mental Health Congress

CONFERENCE & EXHIBITION®

Join us for the nation's leading independent conference dedicated to advancing psychopharmacology, psychotherapy, and wellness... in San Antonio!

Whether you are a proud alum or potential first-timer, consider joining us in San Antonio for the 29th installment of the nation's largest independent educational conference for mental health professionals.

U.S. Psychiatric and Mental Health Congress (*Psych Congress*) seeks to create a challenging, dynamic curriculum that transcends practice settings, professional categories, and disciplines. This year's educational sessions focus on sharing current and emerging treatment strategies, highlighting the latest advances in psychopharmacology, as well as teaching attendees how to implement measurement-based care in everyday clinical practice.

With a diverse agenda that features up to 4 concurrent sessions at a time, *Psych Congress* gives attendees the opportunity to create a customized schedule to best match their educational needs.

We believe our unique format separates us from other conferences — providing attendees an engaging experience that encourages high-level learning from both faculty and peers.

We hope to see you in San Antonio,

Rakesh Jain, MD, MPH
2016 CO-CHAIR

Charles Raison, MD
2016 CO-CHAIR

Thursday, October 20

7:00 A.M.—4:30 P.M.	Preconference Educational Session (ADDITIONAL FEES APPLY) LIMITED SEATING—PREREGISTRATION REQUIRED
4:30 P.M.—6:00 P.M.	Kickoff Keynote Address: <i>Choir! Choir! Choir!</i> (non-CME) COCKTAILS AND HORS D'OEUVRES WILL BE SERVED.

Friday, October 21

7:00 A.M.—10:15 A.M.	Welcome Educational Session with Breakfast
10:30 A.M.—11:45 A.M.	Educational Sessions
12:00 P.M.—2:00 P.M.	Industry-Supported Symposia (CME) LUNCH WILL BE SERVED (LIMITED SEATING)
2:15 P.M.—3:30 P.M.	Educational Sessions
3:45 P.M.—4:45 P.M.	Featured Educational Session
5:00 P.M.—7:00 P.M.	Opening Night Reception in the Exhibit Hall
7:00 P.M.—9:00 P.M.	<i>Psych Congress</i> Networking Event (ADDITIONAL FEES APPLY) LIMITED SPACE—PREREGISTRATION REQUIRED

Saturday, October 22

7:00 A.M.—9:00 A.M.	Industry-Supported Symposia (CME) BREAKFAST WILL BE SERVED (LIMITED SEATING)
9:15 A.M.—12:00 P.M.	Educational Sessions
12:15 P.M.—1:30 P.M.	Innovation Theaters (Non-CME) LUNCH WILL BE SERVED (LIMITED SEATING)
12:15 P.M.—2:15 P.M.	Exhibit Hall and Poster Pavilion
1:15 P.M.—2:15 P.M.	Poster Presentations and Faculty Office Hours
1:30 P.M.—2:00 P.M.	<i>Psych Congress</i> Network Live!
2:30 P.M.—3:45 P.M.	Educational Sessions
4:00 P.M.—5:00 P.M.	Featured Educational Session
5:15 P.M.—7:15 P.M.	Exhibit Hall Reception and Poster Gala
6:15 P.M.—7:15 P.M.	<i>Psych Congress</i> Network Live! and Faculty Office Hours
7:30 P.M.—8:45 P.M.	Innovation Theaters (Non-CME) DINNER WILL BE SERVED (LIMITED SEATING)

Sunday, October 23

7:00 A.M.—9:00 A.M.	Industry-Supported Symposia (CME) BREAKFAST WILL BE SERVED (LIMITED SEATING)
9:15 A.M.—12:00 P.M.	Educational Sessions
12:15 P.M.—1:30 P.M.	Innovation Theaters (Non-CME) LUNCH WILL BE SERVED (LIMITED SEATING)
12:15 P.M.—2:15 P.M.	Exhibit Hall and Poster Pavilion
1:15 P.M.—2:15 P.M.	Poster Presentations and Faculty Office Hours
1:30 P.M.—2:00 P.M.	<i>Psych Congress</i> Network Live!
2:30 P.M.—5:15 P.M.	Educational Sessions
5:30 P.M.—6:30 P.M.	Featured Educational Session
6:45 P.M.—8:00 P.M.	Innovation Theaters (Non-CME) DINNER WILL BE SERVED (LIMITED SEATING)

Monday, October 24

7:00 A.M.—9:00 A.M.	Industry-Supported Symposia (CME) BREAKFAST WILL BE SERVED (LIMITED SEATING)
9:15 A.M.—12:00 P.M.	Educational Sessions
12:15 P.M.—1:30 P.M.	Innovation Theaters (Non-CME) LUNCH WILL BE SERVED (LIMITED SEATING)
1:45 P.M.—4:45 P.M.	Educational Sessions





Who Should Attend?

Psych Congress is designed for psychiatrists, primary care physicians, psychologists, nurse practitioners, physician assistants, psychiatric nurses, and other healthcare professionals who seek to improve the care of patients with mental health disorders and the outcomes resulting from that care.

Learning Objectives

After completing this activity, participants should be able to:

Identify the etiology, pathophysiology, and neural pathways of various psychiatric disorders and their effects on patients

Implement evidence-based models on the use of psychotherapeutic and pharmacotherapeutic interventions to develop treatment plans, predict treatment response, optimize remission, and prevent relapse

Employ strategies to identify and remove barriers to treatment to improve patient outcomes in the acute and long-term management of psychiatric disorders

Assess psychiatric disorders, as well as patient's overall health, including comorbidities, with the goal of improving diagnosis and treatment



Kevin Hines



EXCITING HIGHLIGHTS FOR 2016

Kickoff Keynote Address

The founders of the international singing phenomenon *Choir! Choir! Choir!*, Nobu Adilman and Daveed Goldman, are the 2016 Kickoff Keynote Speakers. The keynote program is complimentary with registration to the national conference and includes a 30-minute cocktail and hors d'oeuvres reception prior to Mr. Adilman and Mr. Goldman's address.

Advanced Psychopharmacology Sessions

Presentations designated as Advanced Psychopharmacology highlight the latest evidence for managing complex cases and psychiatric disorders. Featuring educational sessions led by world-class psychopharmacology researchers and educators, topics will include understanding pharmacokinetics in psychiatry, management of bipolar disorder when first-line interventions fail, and the present and future of glutamate and psychiatry. The AP symbol will appear next to the abstract of any session with an advanced psychopharmacology focus.

New 6-Credit Preconference

Attendees who elect to arrive a day early can earn up to 6 additional credits by attending the preconference, **"Psychopharmacology Reality Check: Changes You Can Make on Monday."** The program is designed to reinvigorate your practical application of psychopharmacology principles and challenge you to expand your current treatment strategies.

Psych Congress Network Live! and Office Hours

The *Psych Congress* Network Live! classroom allows attendees to engage faculty in a small-group setting for intimate question-and-answer discussions. As an emerging news source for mental health professionals, *Psych Congress* Network (psychcongress.com) provides the opportunity to broadly align these intimate discussions with trending topics from the website. Steering Committee members will also hold "office hours" at selected times for extended one-on-one clinical conversations.

2016 Featured Sessions

Wrap up a full day of learning with our very popular Featured Sessions, a series of noteworthy lectures designed to educate and inspire. Led by some of the nation's most prolific mental health clinicians and educators, our 2016 Featured Sessions will include presentations by Dr. Jeffrey Swanson, Kevin Hines, and back by popular demand, Dr. Judith Beck.

Maximum Credit Package

Earn up to 70 CME/CE credit hours!* Includes base registration to the main conference, plus ALL educational sessions offered through *Psych Congress* On-Demand 2016 (a savings of over \$200).

Psych Congress Conference App

Have the entire conference at your fingertips by downloading the *Psych Congress* app before you arrive in San Antonio. The app features include the conference schedule, exhibitor list, faculty list, floor plan, continuing education information, poster session schedule, industry-supported symposia, and other attendee information.

APP AVAILABLE FOR DOWNLOAD AUGUST 2016.

Psych Congress is partnering with ten respected minds in the field of mental health to make the 2016 conference a practical and relevant education experience.

CO-CHAIR

Rakesh Jain MD, MPH

Clinical Professor, Department of Psychiatry, Texas Tech Health Sciences Center School of Medicine Midland, Texas



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Steering Committee



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For full steering committee and faculty bios, please visit psychcongress.com/psychcongress/faculty.

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THE Kickoff Keynote Address POWER OF COMMUNITY

A PSYCH CONGRESS SPECIAL EVENT

THURSDAY, OCTOBER 20
4:30 P.M.—6:00 P.M.

Join *Psych Congress* for a fun, high-energy, experiential 2016 Kickoff Keynote Address that will feature Nobu Adilman and Daveed Goldman, founders of the international singing phenomenon *Choir! Choir! Choir!*

In their talk, Adilman and Goldman will explore how music is a powerful tool to promote community and improve mental health (including clinicians' mental health). The duo draws from their work as founders of *Choir! Choir! Choir!* — a twice-weekly singing event — to illustrate these themes while making their audiences feel those themes. Packed with examples and interplay, this keynote is a can't-miss happening.

NON-CME. Limited seating. Cocktails, hors d'oeuvres, and networking begin at 4:30 P.M. The program starts at 5:00 P.M. Must be registered for *Psych Congress* to attend.

ABOUT CHOIR! CHOIR! CHOIR!

In 2011, Nobu Adilman and Daveed Goldman co-founded *Choir! Choir! Choir!*, a twice-weekly singing event with revolving participation from over 12,000 members that invites non-professional singers to belt out pop hits in venues across Toronto; no auditions or commitment required. Blurring the lines of audience and artist, the choir has performed with punk legend Patti Smith, pop duo Tegan and Sara, and rock bands Sloan and Hey Rosetta! They have also performed at major events such as TEDx Toronto and The Polaris Music Prize Gala. The choir has been featured in the *Globe and Mail*, *Fast Company*, and on NPR and CBC's *The National*. Adilman and Goldman now present the ideas behind the choir in inspiring interactive keynotes.

PHOTO BY JOSEPH FUDA



2016 Scientific Program Overview

The 2016 *Psych Congress* Scientific Program focuses on sessions that provide knowledge and tools that allow mental healthcare professionals to confidently diagnose disorders and develop effective, individualized treatment plans to achieve patient wellness by applying evidence-based management into daily practice. The program covers a broad spectrum of topics and formats, providing close to 50 sessions — each designated by track to assist in selecting sessions that best match your educational needs.



PSYCHOPHARMACOLOGY PRECONFERENCE

Psychopharmacology Reality Check: Changes You Can Make on Monday

Thursday, October 20, 2016

7:00 A.M. – 4:30 P.M. | Credits: 6 | \$199

This full-day, CME-/CE-accredited preconference is designed to reinvigorate your practical application of psychopharmacology principles and challenge you to expand your current treatment strategies. Members of the esteemed *Psych Congress* Steering Committee will explore novel ways of approaching common treatment challenges that mental health clinicians face in everyday clinical practice.

Topics Covered In This Program Include

- ▶ When Generalized Anxiety Disorder Doesn't Respond to First-Line Treatment: A Comprehensive Pharmacologic and Non-Pharmacologic Treatment Primer
- ▶ Minding the Mix: Psychopharmacology of Mixed Mood States
- ▶ Two Tools Every Psychopharmacologist Should Utilize Even in a Medication-Based Practice: A Modern Update of Exercise and Mindfulness as Tools to Enhance Medication Outcomes
- ▶ Mellowing the Manic Monday: Pharmacology of Norepinephrine Transmission in Major Depressive Disorder
- ▶ Management of the Top 5 Psychotropic Side Effects
- ▶ Treating Depression 2.0: When Antidepressants Don't Work

Track(s): Psychopharmacology, Neurology/Neuroscience, Mood Disorders, Psychotic Disorders, Sleep Disorders, Anxiety Disorders

Please visit psychcongress.com/psychcongress/preconf for additional information. Additional fees apply. Limited seating. Pre-registration is required.

2:15 P.M.—3:30 P.M.

Treatment of Refractory Anxiety

Although many patients improve with standard pharmacologic and psychosocial treatments for anxiety disorders, most remain somewhat symptomatic and some fail to respond at all. Recognizing and treating persistent symptomatology in anxious patients is critical for optimizing care. This session will review the prevalence and presentation of persistent anxiety in treated patients. Dr. Pollack will discuss treatment options to improve the outcomes for patients remaining symptomatic despite standard treatments.

SPEAKER: MARK H. POLLACK, MD

TRACKS: ANXIETY DISORDERS; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

Collaborative Medical Decision Making for Providers and Patients for Pregnancy: The New FDA Pregnancy Labels and What They Mean

Dr. Freeman will discuss psychopharmacology and the pregnant patient. Decisions about the treatment of pregnant women with psychotropics are challenging, as human pregnancy data are often lacking or incomplete. An accurate risk/benefit analysis of any in utero psychotropic exposure needs to be informed by the risks of the untreated illness and with comparisons made with appropriate control groups. For a long time, many prescribers and patients have relied upon the U.S. Food and Drug Administration (FDA) pregnancy categories, despite their limitations. In December 2014, the FDA issued a draft recommendation guide for new labeling content and formatting to replace this long-held convention of letter category assignment. The challenges and implications of a refined risk/benefit approach to the treatment of psychiatric disorders during pregnancy will be discussed.

SPEAKER: MARLENE P. FREEMAN, MD

TRACKS: WOMEN'S MENTAL HEALTH; MOOD DISORDERS; PSYCHOPHARMACOLOGY



Cannabis: What Do Mental Health Professionals Need to Know?

The cultural acceptance of cannabis as both a recreational intoxicant and a general-purpose medicament continues to grow, raising questions and concerns for mental health professionals whose patients may be using cannabis. Many patients seeking psychiatric care are using cannabis, both recreationally and for self-determined therapeutic uses. This asks challenging questions of clinicians: How much might the cannabis exacerbate symptoms? Is cannabis ever helpful for psychiatric symptoms? How do we discourage patients from using and help those who want to stop? This session will draw from evolving contemporary research into the effects of cannabis

on mental health. Attendees will learn the basic pharmacology of cannabinoids and review the risks associated with cannabis. This session will focus on prevention of early use and harm reduction strategies for patients who are already using cannabis. It will focus less on medicinal uses of cannabis.

SPEAKER: ANDREW PENN, RN, MS, NP, APRN-BC

TRACKS: SUBSTANCE ABUSE, ADDICTION & DETERRENCE



Akathisia, EPS, and TD: Movement Disorders That Are Forgotten, But Not Gone!

The initiation, control, and coordination of volitional movements are a central part of normal central nervous system (CNS) cortical function. The motor control systems are often closely linked to key emotional and cognitive neuronal tracks. It is not surprising that therapeutic receptor targets for psychiatric drugs can alter CNS motor system functioning. Therefore, many psychiatric medications can and do cause drug-induced movement disorders that need to be properly identified and treated. The focus in psychiatric practice has moved away from drug-induced movement disorders because of the mistaken belief that current medications are unlikely to cause significant movement disorder problems. However, medications can and do still cause these problems, and these problems are often missed or misdiagnosed and cause considerable distress as well as safety concerns. This session will be a "crash course" on understanding, recognizing, and managing common drug-induced movement disorders as they appear in current psychiatric practice.

SPEAKER: PETER J. WEIDEN, MD

TRACKS: PSYCHOTIC DISORDERS; PSYCHOPHARMACOLOGY

3:45 P.M.—4:45 P.M.

FEATURED SESSION



Challenging Issues in CBT: Handling the Difficult Patient

Many clinicians need to improve their expertise in dealing with behaviors that interfere with therapy for many patients, particularly those with personality disorders. The goal of this session is to teach clinicians how to conceptualize challenges patients pose, such as missing sessions, criticizing the therapist, blaming others, displaying hopelessness about change, failing to do homework, engaging in self-harm, and using substances. This session will help clinicians develop effective treatment plans to overcome these difficulties.

SPEAKER: JUDITH BECK, PhD

TRACKS: PSYCHOTHERAPY; PERSONALITY DISORDERS

5:00 P.M.—7:00 P.M.

► Opening Night Reception In The Exhibit Hall

7:00 P.M.—9:00 P.M.

Psych Congress Networking Event

Join the *Psych Congress* Steering Committee, select faculty, and your peers for a fun, fiesta-themed networking event! Enjoy festive food, cool refreshments, and a DJ to keep you dancing and entertained as you catch up with friends and colleagues at the Lone Star Ballroom at the Grand Hyatt San Antonio.

ADDITIONAL FEES APPLY. TICKETS FOR THIS NETWORKING RECEPTION WILL BE LIMITED TO THE FIRST 500 PEOPLE.



S A T U R D A Y

7:00 A.M.—9:00 A.M.

Industry-Supported Symposia

BREAKFAST WILL BE SERVED. SEATING IS LIMITED.

9:15 A.M.—10:30 A.M.

Adults with ADHD: Current Approaches to Diagnosis and Treatment

Recent epidemiologic studies have indicated that between 4% to 5% of U.S. adults meet criteria for attention-deficit/hyperactivity disorder (ADHD), and that only 11% of these individuals are receiving treatment for this condition. A major cause of under-treatment is insufficient preparation of mental health professionals to care for this patient population. Adults with ADHD are increasingly seeking expert assistance from clinical providers to help them manage the most impairing aspects of the disorder along with the most common co-occurring conditions. This session will offer a framework for understanding the most salient aspects of adult ADHD and related disorders. It will describe practical tools and methods for assessing ADHD and will review evidence-based treatment options for this population.

SPEAKER: ANTHONY L. ROSTAIN, MD, MA

TRACKS: ADHD; PSYCHOPHARMACOLOGY



Ap Reducing the Burden of Antipsychotic Treatment: An Integrative Approach

The expanding number of antipsychotic choices is welcome, but can be confusing and overwhelming. Every antipsychotic agent has a unique side effect profile. However, the increased number of options can lead to “decision fatigue.” Clinicians might be wary of using the wider range of antipsychotics and prefer relying on one or two antipsychotics within their comfort zone. Side effects from antipsychotic medications pose challenges for patients and prescribers alike. The standard approach to tolerability presentations is to review one side effect at a time, followed by the relative ranking of each medication’s propensity to cause that side effect, and then move on to the next side effect. This approach is limited in that the individual side effect (or relative ranking of antipsychotic) is covered in isolation, without much discussion on how to integrate this knowledge into the larger objectives of optimizing efficacy while minimizing the burden of treatment as much as possible. Integration is harder in that the clinician has to conceptualize the overall treatment options, which include timing, risk of intervention, likelihood of success, patient distress (or lack thereof), and impact of decision on the therapeutic alliance. This session will be conducted in a way to emphasize those factors into an integrated approach to side effect management.

SPEAKER: PETER J. WEIDEN, MD

TRACKS: PSYCHOTIC DISORDERS; PSYCHOPHARMACOLOGY; ASSESSMENT & ADHERENCE

Things That You Think You Know That May Not Be True in the Diagnosis and Treatment of Depression

The goal of this session is to identify biases that clinicians may have regarding several aspects of the treatment and management of depression, and to examine the empirical literature that challenges these beliefs. Specifically, this session will review how much we know about the efficacy of antidepressant medication in treating the types of patients seen in routine clinical practice; how quickly antidepressants work; and the evidence supporting the notion that relapse indicates that the medication stopped working. With increasing recognition of depression as a chronic illness that should be managed similar to other chronic illnesses, national guidelines emphasize the importance of using standardized scales to measure outcome. Surveys have found that few clinicians routinely use standardized measures in their practice, as they misperceive the burden that patients will experience from completing self-report scales. With an increased emphasis on bringing accountability to service delivery, clinicians working in different settings need to be updated on recent findings regarding patients’ perception of measurement-based care, and how measuring outcomes is associated with improved outcomes. This session will also explore whether the underdiagnosis or overdiagnosis of bipolar disorder is a greater problem in clinical practice.

SPEAKER: MARK ZIMMERMAN, MD

TRACKS: ASSESSMENT & ADHERENCE; MOOD DISORDERS; PSYCHOPHARMACOLOGY

Building a Better Older Brain

Aging patients are viewed within the framework of progressive age- and pathology-related decline, and this often limits the creative vision of clinicians. This session will present a more accurate and balanced model of brain aging that looks at the role of brain reserve, resilience, and reinvention as 3 fundamental forces for successful, positive, and creative aging.

SPEAKER: MARC E. AGRONIN, MD

TRACKS: DEMENTIA & COGNITIVE DISORDERS; GERIATRIC PSYCHIATRY; WELLNESS

10:45 A.M.—12:00 P.M.

Ap Insomnia in Patients with Comorbid Psychiatric Disorders: Shared Neurobiology and Clinical Solutions

Sleep disturbances very commonly accompany psychiatric disorders, often complicating both patient presentations and the effective management of their symptoms. In recent years, discoveries in neurobiology have facilitated the development of new medications to address sleep-wake cycle problems, in addition to other psychiatric symptomatology. This session will provide a practical update in treatment advances in the context of managing patients with psychiatric disorders. This session will review fundamental pharmacologic properties that can be optimized to address sleep issues in people suffering from an assortment of mental health problems. Improvement in the sleep-wake cycle will result in broader symptom relief for many patients.

SPEAKER: DAVID N. NEUBAUER, MD

TRACKS: SLEEP DISORDERS; NEUROBIOLOGY/NEUROSCIENCE; PSYCHOPHARMACOLOGY

“As a long-time participant in the event, what's most inspiring is that *Psych Congress* recognizes that the person with mental health problems is not just a “client” — which helps professionals learn to be more compassionate and competent in their day-to-day interactions.”

Mary M. Andersen
APRN, CNS, MSN, PMHCNS-BC
Advanced Practice Psych
Services, Inc.
Minneapolis, MN

Anxiety and Depression in Children and Adolescents with Autism Spectrum Disorders

Comorbid psychiatric disorders such as anxiety and depression occur in over two-thirds of children and adolescents with autism spectrum disorders (ASD), and interfere with their quality of life, while presenting challenges to their families and care providers. Yet comorbid anxiety and depression may be easily overlooked by family members and care providers, or they may be misattributed to

the developmental disability itself. Moreover, given the difficulties of psychiatric interviews with patients with ASD, as well as the paucity of psychometric tools for assessing anxiety and mood in special needs children and youth, clinicians are often limited in their ability to properly assess these issues. This session will explore the most salient aspects of these conditions when they occur in young people with ASD. Dr. Rostain will also review practical tools and methods for assessing and treating this vulnerable population. Finally, there are few treatment studies and even fewer clinical guidelines to assist mental health professionals in their efforts to help this patient population. This session will discuss how to select appropriate medications and how to implement psychosocial interventions to ameliorate the symptoms and functional impact of anxiety and depression in children and adolescents with ASD.

SPEAKER: ANTHONY L. ROSTAIN, MD, MA

TRACKS: AUTISM SPECTRUM/DEVELOPMENTAL DISORDERS; CHILD & ADOLESCENT PSYCHIATRY; PSYCHOPHARMACOLOGY

PTSD and Comorbid Psychosis: Diagnostic and Treatment Challenges

There is increasing recognition of the prevalence of psychotic symptoms in patients suffering from posttraumatic stress disorder (PTSD). Surveys have suggested that up to 30% of treatment-seeking veterans may have these symptoms, e.g., hallucinations or delusions. Recent data suggest that 10% of veterans with PTSD returning from Iraq or Afghanistan may have psychotic symptoms. Important diagnostic and treatment issues arise. Is this a subtype of PTSD or schizophrenia, or another primary psychosis? This session will review these diagnostic issues and address issues pertaining to medication and psychotherapy in this population.

SPEAKERS: MARK B. HAMNER, MD AND RON ACIERNO, PHD

TRACKS: PTSD, TRAUMA & ABUSE; PSYCHOTIC DISORDERS; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

TMS: An Update with Practical Implications for the Clinician

Transcranial magnetic stimulation (TMS) is a relatively new and emerging treatment for treatment-resistant depression. The goal of this session is to provide a brief overview of the mechanism of action of TMS and new clinical trial data. Dr. Draud will also provide a case-based practical overview of appropriate patient types and how to implement TMS.

SPEAKER: JON W. DRAUD, MD, MS

TRACKS: NEUROMODULATION; MOOD DISORDERS

INTERACT

The 2016 *Psych Congress* will feature the most dynamic exhibit hall, showcasing more than 100 prestigious companies. Gain direct access to company representatives who will provide information on how their products and services can benefit your patients and practice. On the exhibit floor, you will find the latest offerings from academic book publishers, meet with pharmaceutical companies, speak with employee recruiters, and receive valuable giveaways.





12:15 P.M.—2:15 P.M.

- Exhibit Hall
- Poster Pavilion

12:15 P.M.—1:30 P.M.

Innovation Theaters

Uncover the latest information, data, and research findings with disease-state or product-specific presentations. Ask questions of key experts and industry representatives, and assess the value to your patient care. Seating is limited and available on a first-come, first-served basis. Innovation Theater presentations are not intended or eligible for CME/CE credit.

NON-CME. LUNCH WILL BE SERVED. SEATING IS LIMITED.

Around 2,000
 clinicians attend
Psych Congress
 annually

1:15 P.M.—2:15 P.M.

- Poster Presentations

1:30 P.M.—2:00 P.M.

- Psych Congress Network Live!
- Faculty Office Hours

2:30 P.M.—3:45 P.M.

The Paranoid Patient: Perils and Pitfalls

Eighty percent of persons found not guilty of homicide by reason of insanity killed in response to a paranoid delusion. The magnitude of the harm in these tragedies dictates that all mental health professionals have training in identifying and managing these difficult patients. Malpractice lawsuits are commonly based on the allegation of premature release of paranoid patients who commit violent acts. Paranoid delusions are common in schizophrenia, delusional disorders, mania, and dementia. This session will assist clinicians in building a therapeutic alliance and managing the risk of violence in paranoid patients.

SPEAKER: PHILLIP J. RESNICK, MD

TRACKS: FORENSIC PSYCHIATRY; PSYCHOTIC DISORDERS; DEMENTIA & COGNITION

It Takes a Village: Collaborative Mental Health for the 21st Century Clinician

Developed in collaboration with the National Council for Behavior Health

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH The importance of collaborative care in mental health is a well-documented need, and is a shortcoming in the field. Health care providers endorse it almost universally, but making it happen is another thing altogether. Patients often see more than one health care provider, which increases the chances for poorly coordinated treatment efforts. As providers, we must work together to coordinate care in order to best serve our patients. Most of us agree this is the best course of action, but the most commonly stated barrier is a lack of time. This session brings together 5 specialties to engage in a conversation about the need to practice coordinated, collaborative care, and outline strategies to support these efforts. The goal of this session is to address the importance of collaborative care across different specialties involved in the delivery of mental health care, as well as presenting different strategies in achieving this goal.

SPEAKERS: SAUNDRA JAIN, MA, PSYD, LPC; MARC E. AGRONIN, MD; W. CLAY JACKSON, MD, DIPHT; ANDREW PENN, RN, MS, NP, APRN-BC; CATHERINE JUDD, PA-C, CAQ-PSY, DFAPA

TRACK: INTEGRATIVE CARE



Treating the Opiate Epidemic

The number of trained and licensed providers of buprenorphine for opiate use disorder is less than half the number required for the extent of the current epidemic of prescription opiate abuse. Many providers of opiates are not registered to use the state prescription monitoring systems that are necessary to detect prescription opiate abusers. The goal of this session is to instruct mental health professionals about the extent of the prescription opiates epidemic, and how to identify individuals who are in need of treatment. Potential treatments for opiate use disorder, including buprenorphine, and new detoxification methods will be discussed.

SPEAKER: THOMAS KOSTEN, MD

TRACKS: SUBSTANCE ABUSE, ADDICTION & DETERRENCE; PSYCHOPHARMACOLOGY

Screening, Diagnosis, and Treatment of Patients with Both Bipolar Disorder and Borderline Personality Disorder

The treatment and clinical implications of the failure to recognize bipolar disorder in depressed patients are significant and include the underprescription of mood-stabilizing medications, an increased risk of rapid cycling, and increased costs of care. As a result of the potential morbidity associated with a delay in diagnosis, experts have called for improved recognition of bipolar disorder, and screening scales have been developed and recommended to facilitate identification. Borderline personality disorder (BPD) is a common comorbidity in depressed patients that is also underdiagnosed. This session will help clinicians to distinguish between bipolar disorder and BPD, and review the literature on the treatment of bipolar disorder in patients with BPD. This session will review studies of the diagnostic concordance between bipolar disorder and BPD; studies comparing patients with both disorders on demographic, clinical, family history, and biological variables; and studies of the pharmacologic treatment of patients with both diagnoses.

SPEAKER: MARK ZIMMERMAN, MD

TRACKS: ASSESSMENT & ADHERENCE; MOOD DISORDERS; PERSONALITY DISORDERS; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

4:00 P.M.—5:00 P.M.

FEATURED SESSION



Thinking Carefully about Mental Illness, Gun Violence, and the Law: Balancing Risk and Rights for Effective Policy

Media accounts of mass shootings by disturbed individuals galvanize public attention and tend to reinforce popular stereotypes that people with serious mental illnesses are generally dangerous — a belief that stigmatizes people with psychiatric disorders and may result in social rejection, compounding their burden of illness. Epidemiologic studies show that the large majority of people with serious mental illnesses do not engage in violent acts towards others. This featured session will provide a basic orientation to the epidemiological relationship between mental illness and violent behavior, and between exposure to firearms and risk of gun-involved violence and suicide in the United States. Dr. Swanson will discuss the basis for legal approaches to gun violence prevention in the United States, which are designed to restrict firearms access to persons at risk of harming others or themselves. After attending this featured session, clinicians will be able to speak more knowledgeably when they discuss firearms-related health risks with patients and family members. They will be able to effectively balance risk and rights in clinical decision making with patients with psychiatric disorders, who may at times pose a safety risk.

SPEAKER: JEFFREY W. SWANSON, PHD

TRACKS: ETHICS; FORENSIC PSYCHIATRY

5:15 P.M.—7:15 P.M.

➤ Exhibit Hall Reception

➤ Poster Gala

5:30 P.M.—7:00 P.M.

➤ Psych Congress Network Live!

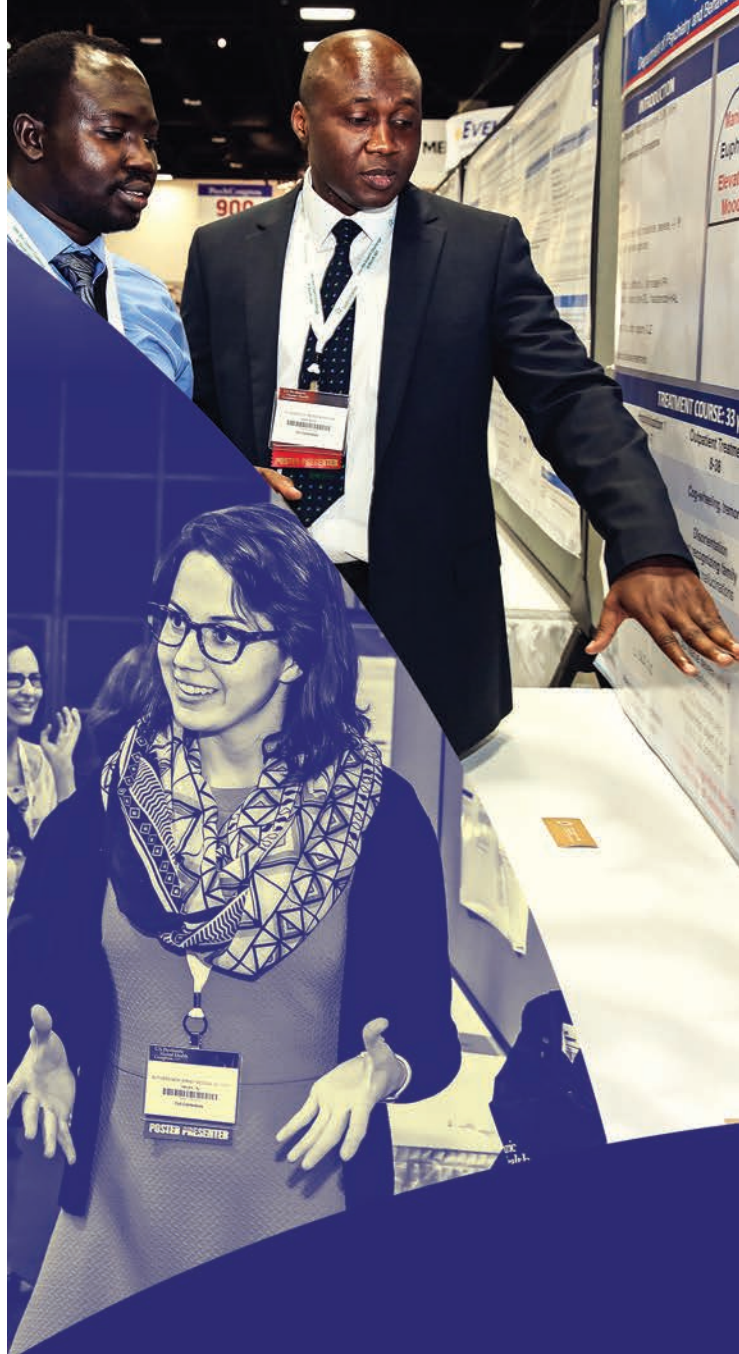
➤ Faculty Office Hours

7:30 P.M.—8:45 P.M.

Innovation Theater

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NON-CME. DINNER WILL BE SERVED. SEATING IS LIMITED.



EXPLORE

Be sure to take in the **POSTER PAVILION** to review relevant cutting-edge research, keep up-to-date on innovative projects and programs, and learn from your colleagues in this peer-to-peer educational format. Presentations are featured throughout the exhibit hall on both days, so visit daily for insightful discourse with the presenters.

Poster presentations are not intended or eligible for CME/CE credit.

If you are interested in submitting a poster abstract for consideration, please visit www.uspsychcongress.com for more information.



S U N D A Y

7:00 A.M.—9:00 A.M.

Industry-Supported Symposia

BREAKFAST WILL BE SERVED. SEATING IS LIMITED.

9:15 A.M.—10:30 A.M.

Clinical Psychopharmacology and Malpractice: What Clinically Relevant Lessons Can Be Learned?

This session will review the 4 concepts to a malpractice lawsuit, and how clinical pharmacology can be pivotal to the outcome of such a case. By understanding these concepts and principles, the practitioner will improve their safety and effective use of medications in their practice.

SPEAKER: SHELDON H. PRESKORN, MD

TRACKS: FORENSIC PSYCHIATRY; PSYCHOPHARMACOLOGY

Cognitive-Behavioral Therapy for Insomnia: Treatment Basics and Updates

Insomnia is extremely common, with nearly 50% of the population having transient insomnia and 15% suffering from chronic sleep difficulty. Although sleep medications are frequently prescribed by physicians, sleep specialists consider cognitive-behavioral therapy for insomnia (CBT-I) to be the gold standard of treatment. This session will teach the basics of CBT-I, discussing the various assessment and intervention strategies of CBT-I. Current research will be presented to further strengthen the argument that this should be the first-line, gold standard intervention for insomnia. Leading theories for how insomnia develops will be reviewed, allowing clinicians to see insomnia as a comorbidity that needs specific treatment, not simply as a symptom of another disorder. Additional strategies to manage nighttime worries, excessive rumination, and mindfulness will also be introduced.

SPEAKER: SHELBY HARRIS, PSYD, CBSM

TRACKS: SLEEP DISORDERS; PSYCHOTHERAPY

Seven Scientifically Proven Anti-Inflammatory Strategies for Today's Modern Mental Health Practice

Inflammation is key in mental health—we know this fact. However, what we clinicians don't know is which strategy/strategies to offer our patients, and which anti-inflammatory approach has been scientifically demonstrated to work in mental health conditions. Dr. Rakesh Jain will focus on the following 7 interventions: 1) microbiota (with focus on probiotic supplementation); 2) exercise; 3) sleep hygiene; 4) intermittent fasting to reduce insulin; 5) mindfulness; 6) increasing socialization; and 7) enhanced nutritional practices, with focus on antioxidants derived from nature, and pharmaceutical agents. This session will offer a quick review of anti-inflammatory science behind each of these interventions, along with a prescriptive plan clinicians can use immediately in their practices. These strategies will assist pharmacotherapy in producing even better results.

SPEAKER: RAKESH JAIN, MD, MPH; VLADIMIR MALETIC, MD, MS; CHARLES RAISON, MD

TRACKS: MOOD DISORDERS; WELLNESS; PSYCHOPHARMACOLOGY



Antidepressants in Bipolar Depression: Risks and Benefits?

Antidepressants have been repeatedly proven ineffective, and even harmful, in bipolar depression in the most valid scientific evidence, namely numerous randomized clinical trials, yet they remain widely used in clinical practice. They are the most commonly used class of medication in bipolar illness, given to about 50% of patients. The most proven effective treatment for bipolar illness, lithium, is only given to about 10% of patients. Similarly, other proven mood stabilizers, like valproate and carbamazepine, are prescribed much less frequently than antidepressants. Thus, clinicians are routinely prescribing ineffective and harmful medications for bipolar illness, and withholding the most effective and helpful medications for bipolar illness. This session will examine the research literature on antidepressants in bipolar illness, describe the results regarding inefficacy and harms, and provide attendees with a means of applying that knowledge in clinical practice. Clinical applications will be emphasized.

SPEAKER: NASSIR GHAEMI, MD, MPH

TRACKS: MOOD DISORDERS; PSYCHOPHARMACOLOGY

10:45 A.M.—12:00 P.M.

Moving Upstream with SBIRT: Early Intervention for Risky Substance Use

Developed in collaboration with the National Council for Behavior Health

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH Integrated care is a critical part of improving the quality, cost, and experience of health care. Screening, Brief Intervention and Referral to Treatment (SBIRT) is an evidence-based approach that provides clinicians with the skills and tools they need to motivate individuals to change harmful substance use within the context of primary medical and mental health care. By integrating SBIRT into existing clinical workflows and building overall co-occurring capability, we can create a line of defense against the emergence of substance abuse disorders among patients at increased risk. This viability to prevent or intervene earlier has the potential to avert the devastating impact of substance use disorders and the exorbitant cost to our health care system. This session will further define the SBIRT model and provide real-world implementation strategies from programs in primary care and behavioral health organizations.

SPEAKER: PAM PIETRUSZEWSKI, MS

TRACKS: INTEGRATIVE CARE; SUBSTANCE ABUSE, ADDICTION & DETERRANCE; ASSESSMENT & ADHERENCE



Obsessive-Compulsive and Related Disorders

Obsessive-compulsive disorder (OCD) and related disorders are some of the most common psychiatric illnesses and are often associated with multiple deleterious consequences such as major depression, psychosocial dysfunction, and reduced quality of life. Data show that less than one-third of mental health providers know how to screen for or treat these disorders. Because the clinical presentation of OCD and related disorders (i.e., body dysmorphic disorder, trichotillomania, skin picking, and hoarding) can be subtle, this session will discuss how to recognize and treat these disorders appropriately in order to prevent disability. This session will also review the current thinking around the prevalence and diagnosis of OCD and related disorders, and will share practical methods to assess and treat these disorders in everyday practice.

SPEAKER: JON E. GRANT, MD

TRACKS: OBSESSIVE-COMPULSIVE & RELATED DISORDERS; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

“Psych Congress is a unique platform that offers education on the newest medicines, approaches, and treatments — combined with a chance for attendees to connect with others in the field to share information and ideas.”

Parvin Afshar, MD, MPH
Winston Medical Health
Corona Del Mar, CA

Mild Cognitive Impairment or Mild Neurocognitive Disorder: Implications for Clinical Practice

Older adults fear coming down with Alzheimer's disease (AD). They worry that any change in memory in the later years may be a symptom of AD. Clinicians need to understand and be able to evaluate older adults with concerns about memory to see if they are showing normal aging symptoms vs. mild cognitive impairment (MCI) vs. early AD. These issues are becoming more common with the aging of our population. This session will explore the evolving concepts and DSM-5 definitions of MCI; how it is a risk factor for AD; and what can be done to delay or decrease the risk of conversion from MCI to AD.

SPEAKER: GEORGE T. GROSSBERG, MD

TRACKS: DEMENTIA & COGNITION; GERIATRIC PSYCHIATRY

Clinician Suicide: What You Can Do to Save a Life

The subject of clinician suicide is surrounded in mystery and stigma. The rates of suicide in the United States have been increasing annually for some years and, to our knowledge, this includes clinicians. Because a significant cohort of clinicians have seen a mental health professional in the days or weeks before their death or have been in treatment, we need to advance our education on this important subject. This includes making ourselves available to worried family members of severely ill clinicians who often feel alone, frightened, confused, and abandoned. The goals of this session are to summarize the epidemiology and existing literature, deliver experiential insights from the widow of a clinician who died by suicide, and impart life-saving diagnostic and therapeutic strategies when treating clinician patients.

SPEAKERS: MORTON SILVERMAN, MD; MICHAEL MYERS, MD; CARLA FINE, MS

TRACKS: FORENSIC PSYCHIATRY; PTSD, ABUSE & TRAUMA

12:15 P.M.—2:15 P.M.

➔ **Exhibit Hall**

➔ **Poster Pavilion**

12:15 P.M.—1:30 P.M.

Innovation Theaters

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NON-CME. LUNCH WILL BE SERVED. SEATING IS LIMITED.



ENGAGE

Broadly aligned to trending topics from our online mental health news source, **PSYCH CONGRESS NETWORK LIVE!** will provide attendees the opportunity to engage with the 2016 *Psych Congress* Steering Committee and other esteemed faculty in small-group question-and-answer sessions. These intimate discussions will take place in two adjacent classrooms within the exhibit hall (not intended or eligible for CME/CE credits.) Also, don't forget to take advantage of Steering Committee office hours, and interact with our expert clinicians! See the general schedule on page 3 for dates and times.





1:15 P.M.—2:15 P.M.

➤ **Poster Presentations**

1:30 P.M.—2:00 P.M.

➤ **Psych Congress Network Live!**

➤ **Faculty Office Hours**

2:30 P.M.—3:45 P.M.

A Generalist Model for Treating Borderline Personality Disorder

Patients with borderline personality disorder (BPD) comprise 15% to 20% of psychiatric clinic and hospital admissions. The training in their rare case is inconsistent and has even encouraged negative attitudes about the treatability of BPD. The goal of this session is to increase awareness of a generalist model for treating BPD that all mental health professionals should learn, and that all such patients should expect them to know. The generalist model's emphasis is on psychoeducation about genetics and prognosis and its integration of medication strategies that is practical, flexible, and more readily learned than specialized treatments. This session will discuss how to disclose the BPD diagnosis with confidence; how to assess whether your patient with BPD is improving; and how to introduce medications and what to expect from them. This session will also explore case management skills and when to integrate psychotherapies into the treatment plan.

SPEAKER: JOHN G. GUNDERSON, MD

TRACKS: PERSONALITY DISORDERS; PSYCHOPHARMACOLOGY

Getting Up to Speed with *DSM-5* and *ICD-10-CM*

The required coding changeover from *ICD-9-CM* to *ICD-10-CM* in October 2015 has necessitated the full-fledged adoption of the *DSM-5* diagnostic categories, even among those clinicians who have tended to be late adopters. This session will explain the relationship of *DSM-5* to *ICD-10-CM*, and in the process highlight the most clinically important changes in *DSM-5*.

SPEAKER: MICHAEL B. FIRST, MD

TRACKS: DSM-5; PRACTICE MANAGEMENT

Ap Understanding Pharmacokinetics in Psychiatry: An Advanced Primer for the Advanced Psychopharmacologist

Pharmacokinetics refers to the movement of the drug into and out of the body: absorption, distribution, metabolism, and elimination. As such, it is one of the principal determinants of the effect of a drug in a patient. Practitioners must understand how to use different formulations of the same drug in specific clinical situations, as well as how and why pharmacokinetics of a drug can vary among different patients, and how to monitor and adjust for such differences during routine clinical practice. This session will first review the basic tenets of pharmacokinetics, and then illustrate how those tenets are clinically relevant to various routes of administration (e.g., immediate- and sustained-release oral and intramuscular formulations), and how to transition between these various formulations.

SPEAKER: SHELDON H. PRESKORN, MD

TRACKS: PSYCHOPHARMACOLOGY; MOOD DISORDERS

Dialogues in Trauma Recovery

In this session, a psychiatric nurse practitioner will interview a consumer in recovery from posttraumatic stress disorder demonstrating psychoeducational and cognitive-behavioral therapy (CBT) principles based on the Be Smart Trauma Recovery Model. The Murphy-Moller Wellness Model, the centerpiece of the conceptual framework of the Be Smart Program, is comprised of 4 major wellness domains: health, attitudes and behaviors, environment and relationships, and spirituality. A 40-item Wellness Assessment Test was developed and implemented to measure levels of wellness within each of the domains. A copy of this tool will be provided for all attending participants, and demonstrated as a basis for psychoeducational and CBT wellness interventions.

SPEAKERS: MARY MOLLER, BSN, MSN, DNP AND ERIC ARAUZ, MLER

TRACKS: PTSD, ABUSE & TRAUMA; WELLNESS

4:00 P.M.—5:15 P.M.

Practical Approaches to Risk Management in Mental Health

All mental health disciplines share concern about liability for their actions, but many wrongly see defensive medicine as the answer. This session will offer practical, non-defensive approaches to risk management for all disciplines.

SPEAKER: THOMAS GUTHEIL, MD

TRACK: ETHICS

Transitioning Research Findings into Practical Means of Mitigating Modifiable Risk Factors for Cardiovascular Disease and Cancer in Individuals with Serious Mental Illness

Individuals with serious mental illness (SMI) die, on average, 20 years earlier than matched general population samples. They manifest modifiable risk factors (MRFs) for cardiovascular disease and cancer earlier than general population samples, and exhibit a higher prevalence and severity at any age than general population samples. Effective interventions to mitigate these MRFs are available, but scarcely applied to individuals with SMI. This session will describe the opportunities for mental health professionals, primary care providers, nurse care managers, as well as patients and their families to access available community resources to undertake evidence-based interventions for these groups of comorbid chronic biological maladies: SMI (e.g., schizophrenia, bipolar disorder) and MRFs for cardiovascular disease and cancer (e.g., obesity, diabetes mellitus, nicotine addiction). Individual clinicians can usefully apply each intervention to the benefit of their patients immediately upon return to practice.

SPEAKER: JOSEPH P. MCEVOY, MD

TRACKS: PSYCHOTIC DISORDERS; MOOD DISORDERS; PSYCHOPHARMACOLOGY; INTEGRATIVE CARE

Ap Psychotic Disorders in the Elderly

Psychoses are common in elderly patients. The Centers for Medicare and Medicaid Services has focused on neuroleptic reduction in nursing homes. This session will describe the common causes of psychiatric symptoms/disorders in older adults. After attending this session, mental health professionals will be better able to appropriately use neuroleptics and nonpharmacologic treatments for their elderly patients.

SPEAKER: GEORGE T. GROSSBERG, MD

TRACKS: PSYCHOTIC DISORDERS; GERIATRIC PSYCHIATRY; DEMENTIA & COGNITION; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

Helping Families “Unplug” Their Children and Adolescents with Psychiatric Disorders: Understanding Neurocircuitry to Guide Effective Treatment Approaches

Digital media is commonplace in the lives of children and adolescents, and can pose problems for families of typically developing children, and more unique challenges for families of children and adolescents with psychiatric illness. Mediating the effects of technology on recovery from illness and family conflicts can be a challenge depending upon the illness and underlying processes activated through digital use. Evidence-based approaches to the psychosocial and psychopharmacologic management of their use can help families gain control over the use of these common family intruders in the child's recovery. Paired understanding of neurocircuitry with evidence-based solutions will arm the clinician with strategies to address this issue in practice. This session will help clinicians with answers for children and families, based upon evidence, evaluation of use patterns, reducing or limiting use through psychosocial and psychopharmacologic treatments, and utilizing digital technology to aid in recovery efforts.

SPEAKERS: JULIE CARBRAY, PHD, PMHNP-BC, PMHCNS-BC, APN

TRACKS: CHILD & ADOLESCENT PSYCHIATRY; NEUROBIOLOGY/NEUROSCIENCE; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

5:30 P.M.—6:30 P.M.

FEATURED SESSION



Cracked Not Broken: The Kevin Hines Story

It is necessary to advocate for the changes in which society views mental health and mental illness. These changes need to be accompanied by a shift in the understanding of the problems known as mental illness and the best way to help people recover. Through this featured session, attendees will determine that there is significant value in lived experience. Lived experience will be viewed as an identifiable source of educational tools, recovery strategies, and hope. Kevin Hines is an award-winning global speaker, bestselling author, documentary filmmaker, suicide prevention and mental health advocate who reaches audiences with his story of an unlikely survival and his strong will to live. Two years after he was diagnosed with bipolar disorder, he attempted to take his life by jumping from the Golden Gate Bridge. He is one of only 34 people (less than 1%) to survive the fall and is the only Golden Gate Bridge jump survivor who is actively spreading the message of living mentally healthy around the globe.

SPEAKER: KEVIN HINES

TRACKS: PTSD, ABUSE & TRAUMA; PSYCHOTHERAPY

6:45 P.M.—8:00 P.M.

Innovation Theater

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NON-CME. DINNER WILL BE SERVED. SEATING IS LIMITED.

PARTICIPATE

While at *Psych Congress*, be sure to participate in the **PASSPORT TO PRIZES** activity for your chance to win valuable prizes! During exhibit hall hours, visit each of the participating exhibitors listed inside the Passport to Prizes booklet to learn about the latest products, services, and opportunities they offer. Once your booklet is filled, enter for a chance to win one of many prizes, including complimentary registration to the 2017 *Psych Congress*!





M O N D A Y

7:00 A.M.—9:00 A.M.

Industry-Supported Symposia

BREAKFAST WILL BE SERVED. SEATING IS LIMITED.

9:15 A.M.—10:30 A.M.

Ap Management of Bipolar Disorder When First-Line Interventions Fail: Practical Tips

Clinicians commonly struggle with how to proceed when they encounter inadequate outcomes with initial interventions in patients with bipolar disorder (BD). This session strives to enhance clinical effectiveness in the management of patients with BD who have inadequate outcomes with initial interventions. Mental health professionals will learn how to determine which patients with BD are candidates for more advanced interventions, and how to optimize tailoring of such interventions in individuals.

SPEAKER: TERENCE A. KETTER, MD

TRACKS: MOOD DISORDERS; PSYCHOPHARMACOLOGY

The Ghost in the Machine? Exploring Change Mechanisms in Psychedelic-Assisted Psychotherapy

Experimental studies using psychedelic medicines (e.g., psilocybin and 3,4-methylenedioxymethamphetamine [MDMA]) have shown that these drugs can significantly enhance the outcomes of therapy for divergent illnesses, such as posttraumatic stress disorder, anxiety at the end of life, and substance dependence. Repeatedly participants report that the experiences induced by these agents play a key role in their therapeutic effects. These findings raise a fascinating question: is it really the subjective experience of the psychedelic drug that produces therapeutic change, or might it be that these subjective experiences are simply behavioral markers for changes in brain function that actually produce the therapeutic effects? This innovative and provocative session will examine these issues by exploring how gaining an understanding of mechanisms of change within psychedelic-assisted therapy may shed light on the role of conscious experience in the treatment of mood and anxiety disorders more generally.

SPEAKERS: ANDREW PENN, RN, MS, NP, APRN-BC AND CHARLES L. RAISON, MD

TRACKS: PSYCHOTHERAPY; MOOD DISORDERS; ANXIETY DISORDERS; PTSD, TRAUMA & ABUSE; NEUROBIOLOGY/NEUROSCIENCE

Summary of the ABPN MOC Program: Life-Long Learning for Psychiatrists

Have you completed your American Board of Psychiatry and Neurology, Inc. (ABPN) Maintenance of Certification (MOC) requirements? All psychiatrists certified by the ABPN after 1994 are required to take part in the MOC program, but yet many remain unclear as to where to begin the process. This session, led by an MOC Ambassador, will provide an easy-to-follow road map to MOC, outlining the rationale and background of MOC, as well as the 4-part ABPN MOC program components.

SPEAKER: MARCIA L. VERDUIN, MD

TRACK: PRACTICE MANAGEMENT

Schizophrenia 2.0: What the Last 5 Years of Advances Have Taught the Busy Clinician

New first-line antipsychotic medications, long-acting injectable preparations of first-line antipsychotic medications, and treatments for tardive dyskinesia have become available in the past 5 years. In addition, new strategies for mitigating weight gain and metabolic side effects of olanzapine and clozapine have been developed. This presentation will assist busy clinicians in incorporating these new treatments into their practice. In addition, mental health practice is undergoing redesign, including integration with primary care; the creation of "specialty" (e.g., clozapine) clinics; the incorporation of evidence-based treatment algorithms into electronic medical records; new methods for informing and activating patients in chronic disease self-management; and re-engagement with patients' families. This session will also demonstrate how incorporating all of these changes in practice will work.

SPEAKER: JOSEPH P. MCEVOY, MD

TRACKS: PSYCHOTIC DISORDERS; PSYCHOPHARMACOLOGY

10:45 A.M.—12:00 P.M.

Can't I Just Skype with My Patients? Getting Started with Telepsychiatry

There are many advantages to adding telepsychiatry to your practice, but there are also many hurdles to its implementation and several important caveats. This session will present the "nuts and bolts" of getting started with telepsychiatry to help psychiatrists and other mental health professionals determine whether (and how) telepsychiatry can be added to your practice.

SPEAKER: STEVEN HYLER, MD

TRACKS: PRACTICE MANAGEMENT; ETHICS

Ap Evidence-Based Treatments for Alcohol Use Disorders

Although there are abundant studies of controlled clinical trials for the treatment of substance use disorders, most patients do not receive evidence-based treatment. Most clinicians do not receive adequate training on the diagnosis and treatment of substance use disorders and how to sort out the combinations of substance abuse and other mental disorders. This session will focus on selecting the optimal treatment, including a combination of behavioral- and medication-assisted treatment. Specific diagnosis of additional mental disorders that often complicate alcohol use disorder will also be addressed.

SPEAKER: CHARLES P. O'BRIEN, MD, PhD

TRACKS: SUBSTANCE ABUSE, ADDICTION, & DETERRENCE; PSYCHOPHARMACOLOGY; PSYCHOTHERAPY

Understanding Placebo Response in Psychiatry: The Good, The Bad, and The Ugly

The nonspecific elements of treatment are often overlooked or given short shrift. When reviewing the results of randomized, controlled trials, clinicians are similarly puzzled by the relatively small difference between the active drug group and the placebo control group. This session will describe the magnitude of placebo response in contemporary studies of psychiatric therapeutics and will discuss some of the reasons for the increasing temporal trend in placebo response across diagnoses.

SPEAKER: MICHAEL E. THASE, MD

TRACKS: PSYCHOPHARMACOLOGY; MOOD DISORDERS

“I learned so much about treating the whole patient and using nonpharmacologic methods such as exercise, meditation, and wellness to decrease inflammation.”

Suzanne H. Grantham, PMHNP
West Lake Hills, TX

12:15 P.M.—1:30 P.M.

Innovation Theaters

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NON-CME. LUNCH WILL BE SERVED. SEATING IS LIMITED.

1:45 P.M.—3:00 P.M.

The Art of Matrix Treatment Planning in Suicide Prevention: Creating Hope in the Hopeless

Suicide prevention remains a major priority in the country. This session heralds a new wave in the field of suicidology, akin to preventive medicine. Dr. Shea will introduce attendees to the latest movement in the field of suicide prevention—“upstream suicide prevention”—with the goal of creating resilience in patients so that suicidal ideation does not arise in the first place. This session will simultaneously explore and delineate a revitalizing shift in the concept of the biopsychosocial model of treatment planning, suggesting a reconceptualization known as matrix treatment planning.

SPEAKER: SHAWN SHEA, MD

TRACK: FORENSIC PSYCHIATRY

AP A Practical, Clinically Driven Primer on Serotonin Receptors and Targeted Pharmacotherapy

This session will offer a deep dive (but completely clinically focused) on how clinicians can target individual serotonin receptors in the clinic. The major goal of this session is to help clinicians better understand the differences between various drugs based on their receptor pharmacology. This is especially important as so many new drugs with different receptor profiles have been launched recently, and clinicians remain confused as to which drug to choose. Serotonin remains the single most important neurotransmitter in psychiatry; yet is not well understood in regard to pharmacologic agents differ in how they affect the serotonin system. At the end of this session, the clinician will understand how to positively manipulate the serotonin system through targeted pharmacotherapy in order to benefit their patients and avoid side effects.

SPEAKER: RAKESH JAIN, MD, MPH

TRACKS: PSYCHOPHARMACOLOGY; MOOD DISORDERS; PSYCHOTIC DISORDERS; ANXIETY DISORDERS

3:15 P.M.—4:30 P.M.

The Power of Mental Wellness: A Psych Congress Collaborative Project

Across specialties, training programs in mental health often focus on diagnosis, the importance of symptom reduction and remission, and functionality. The importance of wellness in mental health is an accepted and well-documented strategy, but interestingly it is seldom a routine part of our treatment interventions. Clinicians endorse wellness, but putting it into practice is often easier said than done. The goal of this session is to address the importance of integrating wellness into our clinical practices. This session will highlight data supporting 5 different wellness elements—exercise, mindfulness, sleep, social connectedness, and nutrition—as effective wellness interventions. Dr. Saundra Jain will also review data from a 30-day prescriptive wellness program—the WILD 5 Wellness Program, and participants will hear from *Psych Congress* attendees who have referred their patients to this wellness program.

SPEAKER: SAUNDRA JAIN, MA, PSYD, LPC

TRACKS: WELLNESS; PSYCHOTHERAPY

4:30 P.M.—4:45 P.M.

Psych Congress 2016: Final Thoughts and Panel Discussion

Join *Psych Congress* 2016 Co-Chairs, Drs. Rakesh Jain and Charles Raison, and the entire Steering Committee for an interactive “wrap up” and panel discussion, focusing on conference highlights from the previous 4 days of educational sessions.



Accreditation Information*

North American Center for Continuing Medical Education, LLC (NACCME) is accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team.

CME NACCME designates this live activity for a maximum of 28 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

CNE This continuing nursing education activity awards 28.0 contact hours.

Provider approved by the California Board of Registered Nursing, Provider #13255 for 28.0 contact hours.

This continuing nursing educational activity awards up to 19.5 pharmacology hours. Sessions that award pharmacology credit hours are outlined in the conference syllabus.

APA North American Center for Continuing Medical Education, LLC (NACCME) is approved by the American Psychological Association to sponsor continuing education for psychologists. NACCME maintains responsibility for this program and its content.

Instructional Level Advanced

Certified Addiction Specialists Approved for continuing education by the American Academy of Health Care Providers in the Addictive Disorders.

Physician assistants, nurse practitioners, and nurses may participate in this educational activity and earn a certificate of completion as AAPA, AANP, and ANCC accept AMA PRA Category 1 Credits™ through their reciprocity agreements.

Other healthcare professionals treating patients with mental health disorders should check with their state licensing and certification boards to determine if *Psych Congress* meets their continuing education requirements.

*Accreditation information pertains only to the main conference; accreditation information for the preconference program and *Psych Congress* On-Demand will be provided separately. Attendees will have the opportunity to earn up to 6 additional credits for participating in a 1-day preconference. If you claim credit for a live session at *Psych Congress*, you cannot claim credit for the same session via *Psych Congress* On-Demand. Total credit hours subject to change.

Requirements for Credit

To be eligible for documentation of credit, participants must attend the educational activity and complete the evaluation form. After successful completion of the evaluation form online, participants may immediately print their documentation of credit.

Hardware/Software Requirements

The evaluation and post-test are accessible via a PC (Windows 2000/XP/Vista/7) or Mac (Mac OS 10.x or later) computer with current versions of the following browsers: Internet Explorer, Mozilla Firefox, Google Chrome or Safari. A PDF reader is required for print publications. Please direct technical questions to webmaster@naccme.com.

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SAN ANTONIO



Hotel & Travel Information

HOTEL	Grand Hyatt San Antonio 600 E. Market Street San Antonio, TX 78205	San Antonio Marriott Riverwalk 889 E. Market Street San Antonio, TX 78205	San Antonio Marriott Rivercenter 101 Bowie Street San Antonio, TX 78205	La Quinta Inn & Suites San Antonio Riverwalk 303 Blum Street San Antonio, TX 78205
DISTANCE FROM CONVENTION CENTER	Adjacent to the convention center	One block from the convention center	One block from the convention center	Two blocks from the convention center
DISCOUNTED GROUP RATE	\$199 for single or double occupancy plus tax	\$219 for single or double occupancy plus tax	\$219 for single or double occupancy plus tax	\$179 for single or double occupancy plus tax
CUT-OFF DATE	Friday, September 16, 2016			
RESERVATION PHONE	888-421-1442, ask for Psych Congress	877-622-3056, ask for Psych Congress	877-622-3056, ask for Psych Congress	866-527-1498, option 1 and ask for the 2016 Psych Congress
CHECK-IN/CHECKOUT	Check-in time is 4:00 p.m. Checkout time is 11:00 a.m.	Check-in time is 4:00 p.m. Checkout time is 12:00 p.m.	Check-in time is 4:00 p.m. Checkout time is 12:00 p.m.	Check-in time is 3:00 p.m. Checkout time is 12:00 p.m.
REFUND POLICY	A deposit of one night's room and tax is required at the time of booking and is nonrefundable for any reason			



U.S. Psychiatric and Mental Health Congress is being held at the Henry B. Gonzalez Convention Center in San Antonio, TX

AIRFARE

Delta Airlines and United Airlines are pleased to offer discounts of 2% to 10% off published airfares.

To make United Airlines reservations call United Airlines meeting desk at 800.426.1122 or online at united.com/ual/en/us/flight-search/book-a-flight. Enter ZW9W328650 in the offer code box. Reservations booked online via United.com will receive an additional 3% discount without a service fee.

To make Delta Airlines reservations call Delta Airlines meeting network reservations at 1-800-328-1111 or online at delta.com/air-shopping/searchFlights.action. Enter meeting event code NMMYD.

Discounts are valid on travel from October 18, 2016 to October 27, 2016. You may also book your flights by calling HMP Travel at 800-237-7285 x4218. Tickets booked via phone are subject to a \$35 booking fee.

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Airport shuttle service
(\$18.25 one way or \$32.50 round trip)
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FIRST NAME	LAST NAME	SUFFIX/DEGREE/CREDENTIALS
NPI/LICENSE NUMBER (REQUIRED)		
TITLE		
COMPANY/ORGANIZATION NAME		
STREET ADDRESS		
CITY	STATE	ZIP
COUNTRY		
WORK PHONE		FAX
EMAIL		LICENSING STATE

Professional Category

☐ Psych MD	☐ PCP MD	☐ NP	☐ RN	☐ Therapist	☐ Industry
☐ Psych DO	☐ PCP DO	☐ APN	☐ Other Nurse	☐ Social Worker	☐ Fellow Resident/Student
☐ Psychologist	☐ Other MD/DO	☐ PA	☐ Other Allied	☐ PharmD	☐ Other_____

Primary Specialty

☐ Psychiatry ☐ General Practice ☐ Family Practice ☐ Internal Medicine ☐ Neurology ☐ Psychology
☐ Other_____

What is your primary subspecialty/area of clinical focus?

☐ Academic Medicine/Residency Training ☐ Addiction Psychiatry ☐ Brain Injury Medicine ☐ Cancer Psychiatry
☐ Child & Adolescent Psychiatry ☐ Clinical Neurophysiology ☐ Clinical Psychology ☐ Correctional Psychiatry
☐ Emergency Psychiatry ☐ Forensic Psychiatry ☐ General/Adult/Community Psychiatry ☐ Geriatric Psychiatry
☐ Hospice/Palliative Medicine ☐ Hospital/Inpatient Psychiatry ☐ Military/VA Psychiatry ☐ Neuropsychiatry
☐ Pain Medicine ☐ Posttraumatic Stress Disorder ☐ Primary Care ☐ Psychosomatic Medicine ☐ Psychotherapy
☐ Sleep Medicine ☐ Urgent Care ☐ Women's Mental Health ☐ Other_____

Secondary Specialty

☐ Child Psychiatry ☐ Community Psychiatry ☐ Emergency Medicine ☐ Family Practice ☐ General Practice
☐ Geriatrics ☐ Internal Medicine ☐ Neurological Surgery ☐ Neurology ☐ Obstetrics & Gynecology ☐ Pediatrics
☐ Psychiatry ☐ Other_____

Practice setting 1

☐ Office-based: Solo Practice ☐ Office-based: Group Practice ☐ Hospital Staff: Private Hospital ☐ Hospital Staff: State/VA
☐ Hospital Staff: Community ☐ Hospital Staff: Other ☐ Teaching ☐ Research ☐ Other_____

Practice setting 2

☐ Inpatient ☐ Outpatient ☐ Other_____

How many years have you been in practice?

☐ Less than 5 years ☐ 6-10 years ☐ 11-15 years ☐ 16-20 years ☐ 20+ years

How many mental health patients do you see on a weekly basis?

☐ 10 or fewer ☐ 11-29 ☐ 30-39 ☐ 40-49 ☐ 50 or more

Method of Payment (Please choose from the following options)

☐ Check made payable to HMP Communications (in memo line please note registration for *Psych Congress*)

All checks must be drawn on a U.S. bank in U.S. funds. Mail to HMP Communications, 70 E. Swedesford Road, Suite 100, Malvern, PA 19355

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CANCELLATION POLICY

Cancellation requests postmarked by Friday, September 9, 2016 will be honored in the form of a full refund, minus a \$100 processing fee.
No refunds will be issued after September 10, 2016. If you do not cancel or do not attend, you are still responsible for full payment.

There are no exceptions to these policies. Payments made may not be applied toward tuition for future *Psych Congress* conferences, or other meetings or products offered by NACCM.

Cut-off	Super Saver 1 5/2/16	Super Saver 2 6/13/16	Early Bird 1 7/25/16	Early Bird 2 9/5/16	Advanced 10/20/16	Regular/ Onsite 10/24/16
☐ Physicians	\$625	\$675	\$725	\$775	\$825	\$1,125
☐ Non-Physicians	\$425	\$475	\$525	\$575	\$625	\$725
☐ Military /VA	\$425	\$475	\$525	\$575	\$625	\$725
☐ Students/ Residents/Fellows	\$99	\$99	\$99	\$99	\$99	\$99

ADDITIONAL OPTIONS

☐ MAXIMUM CREDIT PACKAGE **\$125**

For the most value per credit hour, take advantage of the Maximum Credit Package. See page 5 for details.
Excludes resident/fellow registration.

☐ PRECONFERENCE **\$199**

I wish to add the **Psychopharmacology Reality Check: Changes You Can Make on Monday** preconference being held on Thursday, October 20 from 7:00 a.m.—4:30 p.m. to my registration.
Not included with Max Credit Package.

☐ KICKOFF KEYNOTE **FREE**

I wish to add the complimentary Kickoff Keynote Address held on Thursday, October 20 from 4:30 p.m.—6:00 p.m., featuring international singing phenomenon, **Choir! Choir! Choir!** to my registration.

☐ NETWORKING RECEPTION **\$35**

I wish to add the fun, fiesta-themed *Psych Congress* Networking Event being held on Friday, October 21 from 7:00 p.m.—9:00 p.m. in the Lone Star Ballroom at The Grand Hyatt San Antonio to my registration.

SYLLABUS PURCHASE

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\$114 (BEFORE OCT. 20)
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\$87 (BEFORE OCT. 20)
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TOTAL PAYMENT ENCLOSED

\$ _____

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1. Complete registration at uspsychcongress.com.
2. Call 800.205.8233 and have your credit card information handy.
3. Fill out and fax the registration form to 610.560.0502.



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