

# CLINIC DIRECTORY FOR PSYCHIATRY TRAINING

VA GREATER LOS ANGELES HEALTHCARE SYSTEM  
& UNIVERSITY OF CALIFORNIA, LOS ANGELES

**VA**



U.S. Department  
of Veterans Affairs  
VA Greater Los Angeles Healthcare System



David Geffen  
School of Medicine



## Welcome from the Outpatient Division Chiefs



Dear Future Psychiatrist,

There is a growing crisis in American Mental Health Care that does not exist at the VA Greater Los Angeles Healthcare System.

Our institution provides emergency, inpatient, residential and outpatient care to the entire range of mental health disorders from the mildest to the most severe. We have a full range of treatment options including pure behavioral treatment to innovative interventions including transcranial magnetic stimulation and ketamine. Whether your career goal is to develop refined clinical skills for a community-based practice or deep research interests to launch an academic career, the Greater Los Angeles VA Psychiatry Residency Training Program will provide a rich environment to explore your potential and develop the skills you need to become an outstanding psychiatrist.

The Greater Los Angeles VA is one of the largest mental health providers in the Veterans Health Administration and has unparalleled resources to provide complete psychiatric care to our nations' veterans. We have a high acuity emergency room staffed by psychiatrists, social workers, psychologists and advanced nurse practitioners to address emergent issues. Our inpatient beds provide the highest level of service for the most complicated cases and we have large Domiciliary that has long term residential treatment with specific treatment tracks to address trauma-related disorders, substance use disorders and Women's mental health.

In addition to our emergency room, inpatient and Domiciliary treatment centers, we have over a dozen subspecialty outpatient clinics that provide ideal training environment to get experience across the full range of psychiatric disorders and treatment interventions. We have a Primary Care Mental Health Integrated Clinic embedded with in the Primary Care Clinics that provides focused and time-limited treatment to patients that do not require specialty care. For complicated and high-need patients, we have an integrated team of psychiatrist, internal medicine physicians, psychologists and social workers that work to provide health care and social supportive services to Los Angeles' growing homeless veteran population. We also have teaching clinics that focus on specific patient populations including schizophrenia, bipolar spectrum disorders, anxiety disorders, trauma-related disorders, geriatric patients and substance use disorders. We have a dedicated Women's treatment clinic that provides the full range of medical and mental health treatment to female veterans. Our Interventional Psychiatry Clinic delivers innovative treatment modalities including transcranial magnetic stimulation, ketamine treatment and ECT to individuals with treatment refractory mood disorders. Our Telehealth Section delivers mental health care to outlying community care centers using the latest telemedicine technologies. Our Forensic Clinic provides training on the interface of psychiatry and law including disability assessments, violence risk assessments and also integrates with the legal system to provide mental health support for veterans in courts and jails.

All of these clinics are embedded within a highly multidisciplinary environment. Almost all of our clinics include a combination of psychiatrist and psychologists, with the goal to provide both medication and psychotherapy interventions. Additionally, there is a heavy emphasis on incorporating novel, evidence-based modalities into the all of the clinics. All clinics use measurement-based instruments to track patient progress and this measurement-based framework serves as a strong platform for clinical research projects. Almost all of the psychiatrists at the Greater Los Angeles VA have appointments at UCLA and there is a strong bridge between the institutions to promote research and innovative clinical care. This combination of resources is rare and provides a unique opportunity for you to explore career possibilities and then develop a deep foundation for the rest of your career. I look forward to meeting you and introducing you to our program.

Sincerely,

Scott Fears MD, PhD  
Division Chief, Subspecialty Mental Health Care  
VA Greater Los Angeles Healthcare System



## Welcome from the Outpatient Division Chiefs



Dear Future Residents,

We are excited about the opportunities that are available in our residency program and are looking forward to meeting you.

The Greater Los Angeles VA uniquely serves our veteran population with evidence-based treatments from medication therapy and psychotherapy to interventional treatments like Transcranial Magnetic Stimulation. We have an incredible Trauma Recovery Services program and many other resources for PTSD treatment. A number of specialty mental health clinics, staffed by UCLA faculty, allow for a more specialized experience in Mood Disorders, Substance Use Disorders, or Psychosis. We focus on whole patient care and our integrative health and healing program is a success with our veterans. Our faculty love to teach and share.

Serving the veterans can be incredibly rewarding and the impact that you can make during and after your training will be extraordinary.

Sincerely,

Calvin Yang, MD, PhD  
Division Chief, General Mental Health Care  
VA Greater Los Angeles Healthcare System



# ***OUTPATIENT MENTAL HEALTH***

## **CORE TEACHING CLINICS**

### **General Outpatient Mental Health Clinic**

Smitta Patel, MD, MPH  
Mon PM

The General Outpatient Mental Health Clinic is for Veterans who present with a variety of psychiatric diagnoses and whose needs would not be better served by one of the specialty outpatient mental health programs. Common disorders that are treated in our clinic include: depression, anxiety, non-combat PTSD, psychotic, Bipolar Disorder and substance use. Individual, couples/family and group therapies are made available to our patients, in addition to psychological testing and vocational rehabilitation.

Learning Objectives:

1. Diagnosing and treating all psychiatric disorders for patients in a Veteran population.
  2. Collaborating effectively with clinicians within an interdisciplinary team which includes therapists and case managers.
  3. Maximizing the psychiatric and overall care of outpatients by navigating and optimizing the use of a complex healthcare system.
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### **Primary Care Mental Health Integration (PCMHI) Clinic**

Dean Sasaki, MD & Scott Fears, MD, PhD  
Mon AM

The Primary Care Mental Health Integration (PCMHI) Clinic is an evidence-based model of collaborative care which seeks to expand mental health access, assessment, and treatment in the outpatient primary care setting. At the Greater Los Angeles VA, we are dedicated to training future clinicians to function at the interface of primary care and mental health. We provide supervision involving direct clinical care, collaboration with fellow providers, case-based discussions, didactic seminars, and quality improvement initiatives.

Our PCMHI team embedded in primary care consists of a nurse care manager, psychology staff, and psychiatry attendings & trainees all working alongside our primary care providers. In this clinic, psychiatry residents will join our Monday morning teaching clinic to provide outpatient consultation for patients newly referred by primary care and provide short-term follow-up while facilitating access to longitudinal VA mental health care.

Learning Objectives:

1. Evaluate patients under supervision and make appropriate treatment recommendations reflecting a collaborative approach to care.
2. Demonstrate competence with the psychiatric interview and present clinical findings to members of the collaborative care team.
3. Determine a personalized approach to working successfully as an interprofessional team member and liaison in a busy outpatient primary care setting.
4. Discuss the benefits of collaborative care approaches for patients, healthcare providers, and the overall healthcare system.

## **Mood Disorders Clinic**

Walter Dunn, MD, PhD, Scott Fears, MD, PhD, Marc Heiser, MD, PhD, & Ian Cook, MD  
Wed AM & PM

The Mood Disorders Clinic is an outpatient clinic that focuses on the assessment and management of bipolar disorder and treatment of refractory depressive disorders. The clinic is embedded within the supportive resources of the VA Mental Health Clinic and includes administrative and psychology staff to help manage patient appointments and urgent issues. Residents will learn how to assess complicated mood disorders and formulate treatment plans that include relatively complex pharmacology including prescribing Lithium and Clozapine. They will also learn to evaluate and refer patients for somatic treatments such as Electroconvulsive Therapy (ECT), Transcranial Magnetic Stimulation (TMS), and Ketamine infusions. The clinic provides flexibility for frequent follow-up of complicated patients and provides a good opportunity to work frequently with severe cases that require more intensive outpatient treatment.

### Learning Objectives:

1. Residents will learn to assess complicated mood disorders and formulate treatment plans that include pharmacological, psychotherapy, and somatically-based interventions.
  2. Residents will become proficient in the prescribing of advanced pharmacological interventions including the use of Clozapine, Lithium, and long-acting injectable antipsychotics.
  3. Residents will have the opportunity to learn about and recommend novel therapeutics for mood disorders including TMS and Ketamine infusions.
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## **Psychosis Clinic**

Yvonne Yang, MD, PhD, Barry Guze, MD, Ippolytos Kalofonos, MD, PhD, & Jared Greenberg, MD  
Mon AM & PM

The Psychosis Clinic specializes in the treatment of patients with primary psychotic disorders. We currently operate on 2 half-days with several residents and two to three attendings each half day and manage a total of 250 patients. Our educational focus is to provide the best care possible to our patients by implementing new and underutilized psychosis treatments including Clozapine, long-acting injectables including the three-month injectable Trinza, Valbenazine for Tardive Dyskinesia (TD), and non-pharmacological interventions including Cognitive Behavioral Therapy (CBT) for psychosis. We have a required weekly didactic which includes journal club presentations by residents (2 per year for each resident) and medical students, and lectures by faculty experts in their field. Residents have the opportunity to teach UCLA medical students and to be the first to prescribe cutting-edge medicine in this clinic. We are located in the outpatient mental health building on the south campus. Clinic hours are Mondays 8am-12pm and 1pm-5pm.

### Learning Objectives:

1. Residents will have the opportunity to complete initial assessments and manage patients with a wide range of diagnoses within the psychosis spectrum.
  2. Residents will become comfortable with prescribing Clozapine and switching to long-acting injectables.
  3. Residents will learn about non-pharmacological treatments including CBT for psychosis as well as different models of treatment including Acceptance and Commitment Therapy (ACT).
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## **Anxiety Disorders Clinic**

Kate Taylor, PhD (*Director*); Erika Nurmi, MD, PhD & David Willison, MD, PhD  
Thu PM

The Anxiety Disorders Clinic primarily focuses on using Cognitive Behavioral Therapy (CBT) to treat Veteran patients with anxiety disorders. Medication management is also available in this clinic.

### Learning Objectives:

1. Residents will learn differential diagnosis of anxiety disorders and will learn to deliver cutting-edge, evidence-based psychotherapeutic approaches to treating these disorders, including the latest methods for delivering CBT and exposure-based treatments.
  2. Residents will receive training and supervision in CBT by a licensed clinical psychologist and/or a psychiatrist with expertise in the treatment of anxiety and related disorders.
  3. Residents will receive training and supervision in medication management for anxiety disorders by a psychiatrist with expertise with this population.
  4. Residents will carry a caseload of 2-3 patients whom will typically receive weekly CBT with or without medication management.
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## **PTSD/Trauma Recovery Services Clinic**

Mark Barad, MD, PhD & Bruce Kagan, MD, PhD  
Wed AM

The Trauma (TRS/PTSD) Clinic will give residents the opportunity to see returning Iraq and Afghanistan War Veterans for initial evaluations, medication management and exposure-based Cognitive Behavioral Therapy (CBT). Residents will evaluate incoming Veterans at the beginning of the year and then as necessary throughout the year. Residents will learn to complete both an unstructured and thorough clinical evaluation and the semi-structured CAPS (Clinician Administered PTSD Scale) interview. They will use CAPS to follow the progress of their patients in treatment. Each resident will treat a mix of "easy" and "difficult" patients over the year based on CAPS scores and comorbidities.

Residents will learn and deliver medication management and evidence-based therapies such as Prolonged Exposure Therapy (PE) and Cognitive Processing Therapy (CPT) to each patient, and learn how to adapt the manualized therapy to the needs of each individual and the exigencies of comorbidities.

Supervision will be provided by Drs. Barad and Dunn and 2 residents on Wednesday mornings, or Drs. Barad and Nurmi and 2 residents on Thursday afternoons along with specialized psychologists. Two additional residents will spend 6 months in the Trauma Clinic, and then 6 months in the Anxiety Clinic which operate side-by-side on Thursday afternoons. Many psychotherapy sessions will be directly observed using video conferencing equipment. Residents will leave the session to meet with a supervisor and discuss the case at some point during each patient visit.

### Learning Objectives:

1. To learn and perfect a thorough diagnostic evaluation including both informal screening interviews and structured interviews for Post Traumatic Stress Disorder (PTSD) and for common comorbidities including Depression, Bipolar Disorder, Generalized Anxiety Disorder, Panic Disorder and drug abuse.
2. To learn the principles of medication management of PTSD as a paradigm for the treatment of anxiety disorders in general.

3. To learn how to deliver effective exposure-based therapy and cognitive restructuring to patients with this treatment-resistant disorder. Learning to do good exposure-based therapy with combat PTSD patients will make other anxiety disorder psychotherapy relatively easy. Also, because psychotherapy for PTSD is often emotional and difficult (without having the manipulative aspects of treating borderline personality), it is a particularly good experience for a therapist to acquire emotional sea legs while keeping the therapy on course.
4. To become familiar with the full range of literature about a psychiatric disorder where there is some knowledge of etiology and physiology.
5. To learn how to generalize the principles of CBT for PTSD and the treatment of other psychiatric disorders.

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### **Substance Use Disorders Clinic**

Larissa Mooney, MD & Benyamin Amrami, MD  
Fri AM

The Substance Use Disorders Clinic is a multidisciplinary clinic that incorporates intensive outpatient, general outpatient and opioid treatment program services. Substance use disorders treated include alcohol, opioid, cannabis, stimulant, sedative-hypnotic, and tobacco use disorders. Behavioral addictions (e.g. gambling) and impulse control disorders are also seen.

#### Learning Objectives:

1. Residents will have the opportunity to gain expertise in evaluation and diagnosis of co-occurring substance use and psychiatric disorders and evidence-based pharmacological treatment approaches for these disorders.
2. Residents will gain exposure to methadone and buprenorphine treatment for opioid use disorder.
3. Residents will gain experience with the use of long-acting naltrexone (Vivitrol) for alcohol and opioid use disorders.
4. Residents will have the opportunity to provide pharmacotherapy for tobacco cessation.

#### Sample didactic topics include:

1. Pharmacological management of addictive disorders (e.g., opioid, alcohol, stimulant, and tobacco use disorders) and co-occurring psychiatric disorders.
2. Evidence-based psychosocial treatments for addictive disorders (e.g., motivational interviewing, Cognitive Behavioral Therapy (CBT), contingency management).
3. Clinical and neurobiological effects of substances (e.g. alcohol, cannabis, stimulants).
4. Clinical case and journal article reviews.

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### **Interprofessional Academic-Homeless Patient Aligned Care Team (HPACT) Clinic**

Andrew Shaner, MD, Margaret Stuber, MD, Ippolytos Kalofonos, MD, PhD, Roya Ijadi-Maghsoodi, MD, & Ken Wells, MD, MPH  
Mon & Thu AM, Tue & Wed PM

The IA-HPACT is a cutting-edge special VA program focusing only on homeless Veterans until they are stably housed and able to independently care for their physical, social, and mental health. The team is interprofessional and includes internists, nurse practitioners, psychiatrists, psychologists, social workers, pharmacists, and clerks. This highly collaborative approach, with access to a vast array of housing and rehabilitative services, allows us to help veterans we could not previously reach. This is an ideal clinic for residents interested in learning about integrated care, working with under-resourced populations, and

learning more about the social determinants of health, while caring for our Veteran homeless population—which is the largest in the nation, and taking part in the federal initiative to end Veteran homelessness.

IA-HPACT is one of seven sites funded by the VA to teach trainees from multiple disciplines how to work as an interprofessional team. In this innovative training program, psychiatric residents work closely with faculty and trainees from other disciplines and professions including advanced practice nurses, social work, internal medicine and psychology. This opportunity prepares residents to work in the rapidly expanding field of interprofessional healthcare.

The curriculum focuses on three main topics (1) interprofessional teamwork, emphasizing integration of mental healthcare into primary care, (2) the social determinants of health, and (3) humanistic healthcare for marginalized patients. The resident will not only learn, but also teach trainees from other disciplines. The clinic offers case conferences, didactics, team huddles, and opportunities to be involved in quality improvement initiatives, if interested.

Psychiatry residents are a very important part of the trainee team. We especially recommend clinics on Monday and Thursday mornings, but we can arrange excellent interprofessional experiences during half-day clinics also on Monday, Tuesday, and Wednesday afternoons.

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### **Women's Mental Health Clinic**

Caryn Bernstein, MD & Roya Ijadi-Maghssoodi, MD  
Tue PM & Thu AM

The Women's Clinic is a multidisciplinary self-contained clinic within Building 500. We share the clinic with internal medicine, OB/GYN, psychology, nutrition, and have a designated pharmacist. The mental health team cares for more than 1,000 women, including a growing number of women with depression and Post Traumatic Stress Disorder (PTSD) resulting from their deployments to Iraq and Afghanistan. Sexual trauma during military service is also a prevalent issue. Residents have their own panel of patients whom they will see multiple times during the academic year.

#### **Learning Objectives:**

1. Residents will develop diagnostic and psychopharmacologic skills, as well as learn about the female life cycle and its role in the differences in presentation and course of mental illness in women.
2. Residents will get comfortable obtaining a focused trauma history.
3. Residents will learn the risks and benefits of psychotropic medications and untreated mental illness during pregnancy and lactation.
4. Residents will learn about different psychotherapy modalities to treat psychiatric illness, including Post Traumatic Disorder (PTSD) and Borderline Personality Disorder (BPD), with special attention to patients with a history of polytrauma.
5. Residents will have an opportunity to work with a very diverse patient population. Lecture topics will include awareness of power and privilege in patient interactions and LGBTQ mental health.



## **ELECTIVE TEACHING CLINICS**

### **Interventional Psychiatry Service**

Walter Dunn, MD, PhD, Marc Heiser, MD, PhD & Ian Cook, MD, PhD  
Tue PM

The Interventional Psychiatry Service is a newly established clinical and research service which will primarily provide Transcranial Magnetic Stimulation (TMS) treatment to veterans with Major Depressive Disorder (MDD). We will also offer off-label treatment for conditions supported by the literature including tinnitus, auditory hallucinations, PTSD, etc. In addition to learning the theoretical basis and evidence base for Transcranial Magnetic Stimulation (TMS), residents will receive hands-on experience in delivering treatment with different types of TMS systems. This clinic will also conduct research studies of novel TMS applications for psychiatric and neurological disorders. We are partnering with the UCLA Neuromodulation Service to offer residents the opportunity to rotate at our “partner” UCLA site to gain broader exposure to different patient populations and TMS practices. Rotation at UCLA is optional.

Learning Objectives:

1. Residents will learn about the theoretical basis for TMS and the evidence-based supporting FDA-approved indications and off-label uses of TMS.
2. Residents will develop hands-on proficiency in operating TMS systems from multiple manufacturers.
3. Residents will have the opportunity to help facilitate the introduction of Ketamine infusions to the VA as a novel intervention for treatment-resistant depression. Residents will learn about regulatory, safety, and logistical issues involved in establishing a new treatment within the VA healthcare system.

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### **Adult Attention Deficit Hyperactivity Disorder (ADHD) Consultation Clinic**

David Willison, MD, PhD  
Tue PM

The ADHD Clinic is a new clinic being developed at the VA to address the needs of the patients who frequently seek diagnosis and treatment for ADHD at a variety of psychiatric clinics at the VA. Given the challenges of making this diagnosis in the clinically complex veteran population, this clinic will be run with input from psychologists and psychiatrists who can collaborate to establish definitive diagnoses and rule out other potential confounding diagnoses (e.g., learning disorders, developmental disorders, personality disorders, substance use disorders, mood/anxiety disorders, and malingering).

Residents will learn the diagnosis of ADHD in children and adults, gain a working understanding of the classes of medications and therapies used to treat ADHD, and the management of ADHD in populations with Traumatic Brain Injury (TBI), Post Traumatic Stress Disorder (PTSD), and a history of substance use disorder.

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### **Telemental Health Clinic**

Sravan Kakani, MD; Alexander Fan, MD; Beth Fraum, MD  
Mon AM, Tues AM, Wed PM, Thurs AM

The TeleMental Health program provides psychiatry and psychology resources for the evaluation and treatment of a variety of disorders to veterans located at community-based outpatient clinics (CBOCs). Specifically, this TelePsychiatry clinic serves an adult outpatient population in the Bakersfield, Lancaster, and Santa Maria CBOCs where there is on-site primary care, psychology, social work, and laboratory. Residents will 1) become proficient in using Clinical Video Telehealth (CVT) to conduct patient interviews; 2) collaborate with on-site providers (see above) and off-site services (i.e. pharmacy); 3) serve as the primary general psychiatrist for one's own caseload of patients. Residents can also learn to use VA Video Connect (VVC) to conduct interviews on patient's personal devices, when appropriate.

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### **Mental Health Intensive Case Management Program (MHICM)**

Elizabeth Bromley, MD; Caryn Bernstein, MD; Emily Defraites, MD  
Wed AM

MHICM is an intensive case management program. MHICM is the VA version of Assertive Community Treatment (ACT) or Full Service Partnership (FSP). We have 100 patients, 3 attendings (Bromley, Bernstein, DeFraites), and 8 case managers (RNs, MSWs, Psychologist) who function as primary clinicians for the patients. Case managers see their patients often, sometimes several times a week. We have a drop-in clinic on Wednesdays. Residents can follow patients closely (e.g., every week). Residents are encouraged to meet patients with case managers in the room and to travel to the patient's residence for visits (i.e., "in the field"). Patients have severe mental illnesses, primarily chronic psychotic disorders. Residents will become familiar with the use of Clozapine and complex psychopharmacology for individuals with treatment refractory psychotic disorders. Complex medical comorbidities are also common. Care coordination with primary care can also be a focus.

Once a month, Wednesday clinic takes place in the community. The residents will be accompanied by an attending and will visit Board and Care facilities and/or other sites where MHICM patients are treated. More time in the community is possible if the resident prefers. Other opportunities for research, leading groups, etc., are available, as the resident prefers. Current research/QI emphases are peer-led smoking cessation and recovery-oriented discharge from MHICM (i.e., for patients who have made considerable gains in the program).

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### **HIV Psychiatry Clinic**

Smitta Patel, MD, MPH  
Tue PM

The HIV Psychiatry Clinic provides consultation and ongoing care of patients with HIV within the VA Infectious Disease Clinic (IDC). Adult and geriatric psychiatry trainees are expected to participate as members of the interdisciplinary treatment team that includes infectious disease specialists and fellows, nurse practitioners, physician assistants, a social worker, psychologist, and IDC pharmacy specialists. A team approach is taken to address complex differential diagnostic psychiatric and neuropsychiatric workups and treatment plans involving comorbid infectious diseases, cognitive disorders, aging, substance abuse, polypharmacy, PTSD, and psychosocial problems in the context of HIV.

### **Movement Disorders Psychiatry Clinic**

Denise Feil, MD, MPH

Tue PM

The Greater Los Angeles VA is 1 of 6 national Parkinson's Disease Research, Education and Clinical Centers, which is a VA Center of Excellence for Parkinson's Disease. Residents will gain clinical expertise in managing the non-motor, psychiatric and cognitive symptoms of movement disorders in an integrated clinical care setting within the Neurology Movement Disorders Clinic. They will also gain a clinical understanding of the neurological aspects of diagnosing and treating movement disorders relevant to psychiatry such as tardive dyskinesia, Lewy Body Dementia (DLB) and Parkinson's Disease (PD). Additional educational and research opportunities will also be available.

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### **Neurobehavior Clinic**

Mario F. Mendez, MD, PhD

Thu AM

The focus of the Neurobehavior Clinic will be on brain-behavior disorders and the interface between neurology and psychiatry. Residents will be able to recognize brain-behavior disorders beyond the dementia and delirium spectrums. They will have the opportunity to evaluate and manage psychiatric symptoms in patients with comorbid neurological diseases. Residents will also become skillful at completing neurocognitive exams, a tool that will serve the psychiatrist the rest of their career.

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### **Memory Clinic/Geropsychiatry Clinic**

David Sultzer, MD; Stephen Chen, MD; Denise Feil, MD, MPH

Wed PM

The Memory Clinic is a subspecialty program that assesses older adults with new-onset or ongoing cognitive difficulties. The population includes those with cognitive challenges related to neurocognitive disorders such as Alzheimer's disease or other degenerative conditions, traumatic brain injury, psychiatric disorders, medications, or solely a result of the aging process. It is a consultation clinic, with referrals from the patient's primary care or mental health team. New patient assessments include a comprehensive cognitive evaluation, with differential diagnosis and intervention recommendations. A cohort of patients are followed longitudinally. The Clinic emphasizes practical and efficient, yet thoughtful and thorough assessments. Evaluation of neuroimages is included. Trainees from several training programs in geropsychiatry, geriatric medicine, and psychiatry are currently participating. The treatment team includes a full-time social worker.

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## **Forensic Psychiatry Clinic**

Robert Weinstock, MD, Connor Darby, MD, Andrew Kim, MD, JD

Tue & Wed PM

In the Forensic Clinic, residents will have the special opportunity to see the challenges the mentally ill face when they are entangled in the criminal justice system. Residents will work as consultants with Veterans in the Veterans Justice Outreach (VJO) Program. The VJO Program serves patients with a wide range of mental illness to avoid unnecessary criminalization and extended incarceration. Residents will act as liaisons with local justice system partners, VJO case managers, and primary treatment providers. Additionally, residents will perform evaluations for the Disruptive Behavior Committee (DBC) and Ethics Committee at the VA. Residents will be supervised on how to apply their psychiatric expertise to specific legal questions to formulate forensic reports to assist in this consultative role. Learning objectives include: becoming proficient in making ethics-based clinical decisions; performing violence and sexual violence risk assessments; formulating forensic opinions and writing forensic reports; understanding the specific legal issues that relate to the field of psychiatry and the legal regulation of psychiatry; and developing pharmacological and non-pharmacological treatments and strategies for mentally ill persons in the criminal justice system.