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| CENTRE FOR ADDICTION AND MENTAL HEALTH  | 2022-20231001 Queen St. SiteToronto ON M6J 1H4250 College St. SiteToronto ON M5T 1R833 Ursula Franklin St Site (formerly Russell St.)Toronto ON M5S 2S1Dr. Yanying ZhouPostgraduate Site DirectorEmail: yanying.zhou@camh.ca Tel: 416-535-8501 ext. 30874Sherryl Dizon Medical Education PG CoordinatorEmail: sherryl.dizon@camh.caTel: 416-535-8501 ext. 30711 |

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# **HOSPITAL OVERVIEW**

The resident teaching program at the Centre for Addiction and Mental Health (CAMH) is focused on residents’ educational needs for mandatory and senior selective rotations. In addition to the rotation specific programs for each rotation, the teaching program at CAMH includes a number of seminars and presentations, which are available to all residents.

## Grand Rounds:

Grand Rounds occurs on Friday from 12:00-1:00pm in Training Room A at the Queen Street Site. Grand Rounds are presented by local experts, residents, staff physicians and visiting lecturers.

## Division Rounds:

The Divisions of Forensic Psychiatry, Child and Adolescent Psychiatry, Emergency, Addictions, and Mood and Anxiety offer education rounds specific to their subspecialty areas. Rounds are presented by local experts, residents, staff physicians, interprofessional staff, and visiting lecturers. For more information, please contact the Division Rounds Coordinators:

• Dr. Shaheen Darani (Forensic Psychiatry, shaheen.darani@camh.ca),

• Dr. Lesley Buckley (Addictions, leslie.buckley@camh.ca),

• Dr. Oshrit Wanono (Child and Adolescent Psychiatry, oshrit.wanono@camh.ca),

• Dr. Bruce Fage (Emergency Department, bruce.fage@camh.ca)

• Dr. Neely Bakshi (Mood and Anxiety, neely.bakshi@camh.ca)

## Psychotherapy:

Psychotherapy supervision is available in Dynamic Psychotherapy, Cognitive Behavioural Therapy, Interpersonal Therapy and Group and Family Therapies. The Psychotherapy Site Coordinator is Dr. Jan Malat: jan.malat@camh.ca.

## Research:

All Divisions of CAMH are involved in research and residents are encouraged to become involved in research projects during their rotations, contact the Vice-President of Research Dr. Aristotle Voineskos at 416-535-8501 ext. 34378 or by email aristotle.voineskos@camh.ca

## Seminars:

CAMH teaching includes the Professorial Seminar, Grand Rounds, Division Rounds, Psychotherapy Seminars, Psychopharmacology Seminars, Formulation Seminars, Interviewing Seminars, Clinical Conference and a number of academic lectures by visiting speakers.

Residents in any program of CAMH can also obtain Cultural Interpretation Services and Ethics consultations. For further information about CAMH Seminars, please feel free to contact

Dr. Yanying Zhou.

# **LONGITUDINAL AMBULATORY EXPERIENCE (LAE)**

## CAMH General Psychiatry and Health Systems Division

(12 months, Queen Street Site)

**Dr. Daniel Blumberger**

Co-Chief, General Adult Psychiatry and

Health Systems Division

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**Dr. David Gratzer**

Co-Chief, General Adult Psychiatry and

Health Systems Division

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**Dr. Yanying Zhou**

Coordinator of Resident Training

General Psychiatry and Health Systems Division

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**Dr. Neely Bakshi**

Coordinator of Resident Training

General Psychiatry and Health Systems Division

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**Dr. Juveria Zaheer**

Medical Head, Gerald Sheff and Shanitha Kachan Emergency Department

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Email: juveria.zaheer@camh.ca

**Dr. Bruce Fage**

Coordinator of Resident Training

Gerald Sheff and Shanitha Kachan Emergency Department

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Email: bruce.fage@camh.ca

The PGY 2 and 3 LAE will take place one day a week throughout the 12-month PGY2 rotation. It is the second year in the five-year longitudinal outpatient experience that is an integral component of their residency training. Residents will be assigned a LAE supervisor, with whom they will be doing one observed consultation each week. The outpatient General Psychiatry Service at CAMH has an outstanding group of faculty supervisors and an excellent interprofessional team. Residents’ supervisors will provide direct feedback at the end of each interview. Residents will be responsible for preparing psychiatric consultation reports for each new assessment and will receive detailed feedback on the reports from their supervisor. They will have the opportunity to follow-up with a number of patients throughout the year, providing clinical management (including psychotropic medication and therapy in their skillset) and liaising with the patient’s community treatment team. The new consults, who have diverse psychiatric conditions (e.g., mood and anxiety disorders, psychotic disorders, personality disorders, substance use disorders, psychosocial stressors, trauma and medical comorbidities), are referred by community physicians.

Supervisors will provide an hour of supervision of residents’ follow-up clinical work each LAE day. During their LAE day, residents will also have the opportunity to conduct either a CBT or psychodynamic psychotherapy case. Residents will be assigned a psychotherapy supervisor, who will provide weekly feedback at a mutually convenient time.

Current LAE supervisors:

Dr. Bruce Fage

Dr. Tamara Milovic

Dr. David Matthews

Dr. Neely Bakshi

Dr. Jason Joannou

Dr. Adam Tasca

Dr. Kevin Rohani

Dr. Shilpa Ghate

Dr. Lakshmi Ravindran

Dr. Yuliya Knyahnytska

Dr. Stefan Kloiber

Dr. Daniel Greben

Dr. John Farewell

Dr. Mishelle McIntyre

Dr. Yanying Zhou

# **MANDATORY CORE ROTATIONS – PGY 2**

## PGY 2 - CAMH General Inpatient (four months, 1051 Queen St W, Crisis and Critical Care)

**Dr. Daniel Blumberger**

Co-Chief, General Adult Psychiatry and Health Systems Division

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**Dr. David Gratzer**

Co-Chief, General Adult Psychiatry and Health Systems Division

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**Dr. Yanying Zhou**

Coordinator of Resident Training

General Psychiatry and Health Systems Division

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During their four-month inpatient rotation, residents will have the opportunity to work on the General Psychiatry Unit (GPU) and Acute Care Unit (ACU). They will spend a majority of their time on the GPU and rotate through the ACU. Residents will be assigned a primary inpatient supervisor throughout this term, and can expect to get experience working with more than one supervisor. The GPU inpatient staff are excellent supervisors with vast clinical experience. Residents will be exposed to common acute psychiatric presentations encompassing all major diagnostic domains (i.e., mood, psychosis, personality, anxiety and substance use) and become proficient in managing aggression in acutely agitated patients. Furthermore, residents will gain experience in mental health law, including preparing for and presenting evidence at Consent and Capacity Board hearings.

Current inpatient supervisors:

Dr. David Gratzer

Dr. Ishrat Husain

Dr. Bruce Fage

Dr. Tamara Milovic

Dr. Jason Joannou

Dr. Andrew Lustig

Dr. Adam Tasca

Dr. Kevin Rohani

Dr. Michael Mak

## PGY 2 - CAMH Child Psychiatry (four months, Queen Street site, 80 Workman Way)

**Dr. Benjamin Goldstein**

Chief, Child and Adolescent Psychiatry Division

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Email: benjamin.goldstein@camh.ca

**Dr. Oshrit Wanono**

Coordinator of Resident Training

Child and Adolescent

Psychiatry Division

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CAMH is an excellent setting to gain experience working with children, adolescents and parents, and to be exposed to a variety of presenting problems or diagnoses. The presenting problems will span both the internalizing and externalizing disorders and include mood, anxiety, attention-deficit/hyperactivity disorder, oppositional defiant disorder and autism spectrum disorders. Residents will be working in the outpatient department with staff in the Mood and Anxiety Service, the Consultation Service and the Better Behaviour Service. In addition, residents can choose to obtain more specialized assessment or treatment experiences by working with youth with autism spectrum disorders, concurrent disorders or forensic difficulties. Residents will also have an opportunity to learn about crisis intervention with adolescents through the UCC.

Residents will gain experience in assessment and treatment using a variety of modalities, including psychotherapy and psychopharmacology. The resident will gain experience starting medications in children and adolescents and monitoring treatment response. The resident can also gain experience providing a variety of psychotherapies including CBT, parenting interventions, interpersonal therapy, motivational interviewing and play therapy. The resident will have the opportunity to provide individual treatment and participate in group interventions. The program currently offers group treatment for anxiety disorders, autism spectrum disorders, depression, disruptive behaviours and parenting.

The program has approximately 16 full-time psychiatric staff, all actively involved in academic activities. The program is multidisciplinary. Many staff are involved in research. Staff’s research interests include pathways of care, depression, autism, genetics and epidemiology and intervention programs for youth with disruptive behaviours. Staff will be delighted to involve residents who are interested in obtaining further knowledge. Psychiatric staff are also involved in medical student teaching and interested residents will have the opportunity to gain experience teaching medical students.

Faculty and supervisors:

Dr. Stephanie Ameis

Dr. Marco Battaglia

Dr. Darren Courtney

Dr. Benjamin Goldstein

Dr. Shivani Jain

Dr. Naima Javaid

Dr. Dafna Kahana

Dr. Meng-Chuan Lai

Dr. Marissa Leong

Dr. Susan Quesnel

Dr. Lauren Riggin

Dr. Amit Rotem

Dr. Amanda Sawyer

Dr. Debbie Schachter

Dr. Peter Szatmari

Dr. Oshrit Wanono

Dr. Marcia Zemans

## PGY 2 - CAMH Addictions Rotation (two months, Queen Street site)

**Dr. Leslie Buckley**

Chief, Addictions Division

Tel.: 416-535-8501ext. 31920

Email: leslie.buckley@camh.ca

**Dr. Daniela Lobo**

Coordinator of Resident Training

Addictions Division

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Email: peter.voore@camh.ca

The PGY2 addictions rotation will take place four days per week during two months. Residents will be exposed to a variety of patient presentations, treatment modalities and treatment settings. Residents will work with outstanding addiction medicine and addiction psychiatry supervisors, as well as with an experienced multidisciplinary team of excellent counsellors, nurses and social workers.

During their two-month rotation, residents will work in two different settings:

1. **Medical Withdrawal Service (MWS)** (three days per week for one month): MWS is a 12-bed inpatient unit serving patients who have, or are at risk of, complicated withdrawal and people who have physical and mental health conditions requiring monitoring during withdrawal. Patients admitted to the unit often use multiple substances. The most common substances people seek help for in MWS are alcohol, opioids and benzodiazepines. Residents will learn how to manage substance withdrawal and initiate buprenorphine and methadone.
2. **Concurrent Addictions Inpatient Treatment Service (CAITS)** (three days per week for one month): CAITS is a 24-bed inpatient unit serving patients who have received acute withdrawal care and need further stabilization of addiction and concurrent mental health disorders. Aside from assessment and stabilization, the goal for admission is to help patients transition to outpatient or extended residential treatment and to address psychosocial aspects that can interfere with the recovery process (e.g., homelessness, disability support). Residents will have the opportunity to assess patients with concurrent disorders, participate in treatment and discharge planning, learn motivational interviewing and observe group treatment sessions.

Current supervisors:

**COMPASS:**

Dr. Leslie Buckley

Dr. Jan Malat

Dr. Ketan Vegda

Dr. Daniela Lobo

Dr. Jonathan Bertram

Dr. Emily Kendell

Dr. Kirstie Peden

Dr. Susan Franchuk

Dr. Tanya Hauck

Dr. Kay Shen

Dr. Monique Moller

Dr. Nikki Bozinoff

**MWS:**

Dr. Keyghobad Araki

Dr. Francesca Di Paola

**CAITS:**

Dr. Narges Beyraghi

Dr. Emily Kendell

Dr. Pamela Kaduri

# **MANDATORY CORE ROTATIONS – PGY 3**

## PGY 3 - CAMH Geriatric Psychiatry (four months, Queen Street site)

**Dr. Tarek Rajji**

Chief, Geriatric Psychiatry Division

Tel: 416 535-8501 ext. 32275

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**Dr. Aviva Rostas (on leave until April 2022)**

Coordinator of Resident Training

Geriatric Psychiatry Division

Tel: 416 535-8501 ext. 39235

Email: aviva.rostas@camh.ca

**Dr. Sarah Colman**

Covering Coordinator of Resident Training

Geriatric Psychiatry Division

Tel: 416 535-8501 ext. 39185

Email: sarah.colman@camh.ca

The goal of this four-month rotation in geriatric psychiatry is to teach residents how to assess and treat older patients with various mental disorders. The Geriatric Mental Health Services at CAMH provide comprehensive evaluation and treatment for older adults experiencing depression, psychosis, anxiety, sleep disturbances, memory or behavioural problems, and other mental health problems associated with aging. Residents are exposed to late-life mental disorders in various settings (inpatient, outpatient, in-home, long-term care facilities). They will gain experience in understanding patients with late-life mental disorders in relation to their families and environment, and in treating them using a variety of psychosocial interventions, pharmacotherapy, or other somatic treatments. The importance of continuity of care is stressed.

Residents have the opportunity to assess and treat patients in a continuum of settings, following patients during acute and sub-acute, hospitalizations, back to community care in outpatient clinics, in-home settings, or long- term care facilities. In all settings, working with their supervisors, residents function as leaders of the multidisciplinary geropsychiatry team.

Residents will also participate in the monthly U. of T. geriatric psychiatry half-days, the monthly journal club organized by the Geriatric Psychiatry Division, and the weekly inpatient Morning Reports. In addition to these specific teaching activities, residents are encouraged to attend other seminars and presentations offered by CAMH and the Geriatric Psychiatry Division at CAMH, e.g. City-Wide Behavioural Neurology and Geriatric Psychiatry Rounds.

Residents are invited (but not mandated) to perform, present, and prepare for publication a case report or an evidence-based review. Under the supervision of the faculty, additional academic and research, opportunities are available to all interested residents.

Faculty and Supervisors (listed alphabetically):

Dr. Babak Abadi

Dr. Petal Abdool

Dr. Daniel Blumberger

Dr. Eric Brown

Dr. Sarah Colman

Dr. Simon Davies

Dr. Breno Diniz

Dr. Angela Golas

Dr. Phillip Gerretsen

Dr. Ariel Graff

Dr. Donna Kim

Dr. Sanjeev Kumar

Dr. Suvendrini Lena

Dr. Benoit Mulsant

Dr. Bruce Pollock

Dr. Tarek Rajji

Dr. Aviva Rostas

Dr. Syeeda Salim

Dr. Ivan Silver

**Inpatient Component**

During their four-month rotation, residents are in charge of 4-5 beds on the two inpatient units of the 48-bed Geriatric Mental Health Services. These units provide comprehensive evaluation and hospitalization for older adults experiencing severe mental disorders. All patients receive a complete medical, psychiatric, and social/ functional assessment. Patients admitted to the unit are acutely ill and are referred by the emergency room or are direct admissions from CAMH geriatric outpatient services and affiliated long-term care facilities. About 35% of patients present with mood disorder (major depression, bipolar disorder), 25% with behavioural and psychological symptoms associated with dementia, 35% with primary psychotic disorders, and 5% with other mental disorders.

Residents can follow their patients throughout their length of stay. Residents are members of a multi-disciplinary team; they have frequent opportunities to observe interviews and to be observed interviewing; they will learn how to use structured instruments to systematically assess late-life mental disorders and measure treatment outcomes; they will learn about psychopharmacology issues specific to geriatric patients; they will interface with primary care practitioners/hospitalists regarding co-morbid medical issues and their impact on late-life mental illness and neurodegenerative disorders; and they may co-lead a therapeutic group and provide brief manual-based psychotherapy to selected patients.

Residents can also participate in rTMS clinics as well as ECT. Residents will become familiar with aspects of the Mental Health Act and Health Care Consent Act relevant to older persons; in particular, how to work with the Office of the Public Guardian and Trustee and patients’ Substitute Decision Makers (SDMs). Interested residents have the opportunity to follow their discharged inpatients in the CAMH geriatric outpatient services.

**Outpatient Component**

* **PACE Clinics** - PACE includes general late-life mental health clinics and specialized clinics focusing on late-life mood disorders, late-life schizophrenia and cognitive disorders;
* **Rapid Assessment Clinic** - for urgent consults from the community or discharges from the inpatient units;
* **Telepsychiatry Clinic** - providing geriatric psychiatry consults around Ontario;
* **Memory Clinic** - consults are seen by a multidisciplinary team including a behavioural neurologist and geriatric psychiatrist along with comprehensive assessments by occupational therapy, social work, nursing and neuropsychology; patients are then followed by a physician in conjunction with a social worker;
* **Neuropsychiatry Clinic** -provides joint psychiatric and neurologic care for patients at CAMH living with mental illness in the context of a range of neurologic comorbidities including Parkinson’s Disease and parkinsonism, seizure disorder, headache, movement disorders, neuromuscular disorders, multiple sclerosis, traumatic brain injury, and the neuropsychiatric sequelae of stroke.
* **In-home Consultation Program** - home visits to homebound patients who are unwilling or unable to attend clinic;
* **Stepping Stones Program** - a supportive housing unit in close proximity to the hospital for stable patients transitioning from the hospital to independent living run as a partnership between LOFT and CAMH;
* **Long-Term Care Consultation Program** - consultations and follow up to a very large service area of long- term care and retirement homes.

Also during their four-month rotation, residents will have one half day outpatient clinic a week during which they assess and follow-up patients in the community, including their eligible patients discharged from CAMH geriatric inpatient units, within Late-Life Mood Disorders Clinic, Rapid Assessment Clinic, Memory Clinic or visiting Long- Term Care Facilities. There is an opportunity to provide individual psychotherapy or group CBT for depression over the duration of the rotation with supervision focusing on psychotherapeutic issues of special relevance to older patients.

## PGY 3 - Severe and Persistent Mental Illness (three months)

**Dr. George Foussias**

Chief, Schizophrenia Division

Tel: 416-535-8501ext. 34390

Email: george.foussias@camh.ca

**Dr. Treena Wilkie**

Chief, Forensic Psychiatry Division

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Email: treena.wilkie@camh.ca

**Dr. Sacha Agrawal**

Coordinator of Resident Training

Schizophrenia Division

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Email: sacha.agrawal@camh.ca

**Dr. Amina Ali**

Coordinator of Resident Training

Forensic Psychiatry Division

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Email: amina.ali@camh.ca

The aim of this rotation is for residents to learn how to support the recovery of individuals with schizophrenia and other severe and persistent mental illnesses. The hospital offers many teams and sites from which residents can choose, spanning hospital inpatient units, our day hospital program, outpatient clinics and community-based teams. This 3-month rotation at CAMH provides a rich and varied opportunities to gain essential diagnostic and therapeutic skills, including accurate diagnosis, effective psychopharmacological treatment, the management of co-morbid substance use and physical health problems, navigating mental health law, assessing and managing the risk of violence and self-injury, assessing and managing cognitive and negative symptoms and providing psycho-social rehabilitation.

Residents will participate in an innovative weekly case-based tutorial that will support the acquisition of a strong knowledge base and an ability to manage complexity.

Available supervisors at CAMH are listed below (alphabetically):

Dr. Ofer Agid

Dr. Sacha Agrawal

Dr. Crystal Baluyut

Dr. Patricia Cavanagh

Dr. Monica Choi

Dr. Nicole Davis-Faroque

Dr. Shaheen Darani

Dr. Hesham Desouky

Dr. Pablo Diaz

Dr. George Foussias

Dr. Justin Geagea

Dr. Milena Gosk

Dr. Glenda Horowitz

Dr. Ioana Iordache

Dr. Laura Kennedy

Dr. Michael Kiang

Dr. Serge Leblanc

Dr. Chloe Leon

Dr. Shi-Kai Liu

Dr. Farooq Naeem

Dr. Karen Ng

Dr. Alex Raben

Dr. Jorge Soni

Dr. Adam Toews

Dr. Aristotle Voineskos

Dr. Laura Williams

Dr. Robert Zipursky

Available CAMH rotations:

**1. Slaight Family Centre for Youth in Transition**

The Slaight Centre at CAMH is dedicated to providing state-of-the-art, recovery-based care to youth and emerging adults with affective and non-affective first episode psychosis. Residents work with patients across the continuum of care, from the emergency room, to a specialized early psychosis inpatient unit, to the outpatient clinic in a dynamic, research intensive clinical environment.

**2. Psychosis, Recovery and Treatment Inpatient units**

CAMH has four specialized inpatient units that serve individuals with schizophrenia and other severe and persistent mental illnesses. Residents learn how to support affected individuals during the most acute phases of their illness, with particular emphasis on the safe and effective use of psychotropic medications and ECT, and mastery of mental health law.

**3. Partial Hospitalization Program**

The Partial Hospitalization Program (PHP) offers a unique opportunity for residents to work in a day hospital setting with individuals with complex mental illness who require intensive clinical support. Through frequent contact with patients and close collaboration with a dynamic inter-professional team, residents learn thorough diagnostic assessment, effective management of symptoms and side effects and careful assessment of risk.

**4. Assertive Community Treatment (Downtown West, Central and East)**

CAMH has three assertive community treatment (ACT) teams, each serving a defined area of the urban core. ACT teams provide a unique opportunity for residents to work in the community with patients with high acuity and complex needs. There is an emphasis on inter-professional collaboration and, through home visits, learning experientially about the social determinants of health and the psychiatrist’s role as advocate.

**5. Intensive Case Management (Downtown West, Central and East)**

CAMH has three intensive case management (ICM) teams, each serving a defined area of the urban core. ICM teams provide an opportunity for residents to work collaboratively with case managers to deliver high-quality, recovery-oriented, clinic-based care to individuals with schizophrenia and related disorders. Emphasis is placed on managing the full range of symptoms of schizophrenia (including negative and cognitive symptoms), as well as concurrent substance use and physical health disorders.

**6. Forensics**

The Forensic Psychiatry Division provides recovery-based care for inpatients and outpatients with severe and persistent mental illness who are under the auspices of the Ontario Review Board (ORB). Residents will gain knowledge and skills in preparing reports for and providing evidence at CCB and ORB hearings. If the resident is interested, there is opportunity to gain clinical exposure to other areas of forensic psychiatry including the sexual behaviours clinic, assessments of fitness and criminal responsibility and mental health diversion assessments.

# **MANDATORY CORE ROTATION – PGY 4**

## PGY 4 - CAMH Addictions Rotation (2 months)

**Dr. Leslie Buckley**

Chief, Addictions Division

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**Dr. Daniela Lobo**

Coordinator of Resident Training

Addictions Division

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The PGY 4 Addictions rotation at CAMH has transitioned to full CBD curriculum in 2021. All residents will have exposure to our Rapid Access Addiction Medicine clinic (RAAM) which is staffed by both addiction medicine and addiction psychiatrists, as well as nurses. All residents will also have supervision from addiction psychiatrists, with the goal of achieving competency in assessing and managing complex concurrent disorders presentations in our patients.

In addition, residents will be able to choose to participate in one of the following specialized programs: Addictions Consultation Service, Interprofessional Pain and Addictions Clinic, Rainbow Program, Problem Gambling and Technology Program, and Youth Addictions Service. Motivational approaches, assessment and interviewing will be stressed in all services. Residents will learn psychopharmacology for the treatment of alcohol, opioids and other substances. There will be opportunities for brief patient follow-up. As this is a new rotation, we welcome resident feedback and suggestions to further improve resident learning and experience.