

# TEMPLE PSYCHIATRY

## Spring 2025 Newsletter



- Letter from the Chair (2)
- Letter from the Chief Medical Officer (3)
- Letter from the Program Director (4)
- Psychotherapy Insights (5)
- Resident Spotlight: Class of 2028 (8)
- New Faculty Spotlights (15-18)
- The New CRC: An Interview with Drs. Graham and Karasin (19)
- Fellowship Match (21)
- Resident Accomplishments (23)
- Creative Submissions (24)
- Residency in Photos (25)
- Newsletter Staff (20)

# LETTER FROM THE CHAIR

## Campus Growth and Change: Spring Facility Updates

We have so much to share in this edition of the newsletter! Change and growth are evident throughout our campus, and I'm excited to highlight several significant facility updates that are enhancing our ability to serve patients and the community.

### New Outpatient Pharmacy Launch

This spring, we proudly launched our very own outpatient pharmacy — a much-needed service for our hospital community. This internal resource allows both outpatients and employees to fill prescriptions conveniently on-site. Importantly, our inpatient units are also utilizing the pharmacy to fill prescriptions prior to discharge, ensuring that patients leave the hospital with the medications they need in hand — not just a prescription. This improvement is helping to streamline discharges and support better outcomes post-care.

### Crisis Center Nears Completion

We are also thrilled to announce that our new crisis center is nearly ready to open. A well-attended ribbon-cutting ceremony was held on May 15, with distinguished guests including Temple University President John Fry, Pennsylvania Secretary of Health and Human Services Dr. Valerie Arkoosh, and several state representatives. The speakers recognized the critical role of the crisis center in serving our community. Once final touches are completed — we're awaiting back-ordered doors — the center will go through regulatory approval and is expected to open by August 2025.

### Transformative \$2.5M Gift

In January, I had the pleasure of meeting with former Episcopal Hospital CEO Kathleen Barron, who shared exciting news: following the closure of the Philadelphia Nursing Home, the Fairmount Long Term Care board chose to donate \$2.5 million to Episcopal Hospital. This generous gift will fund several much-needed campus improvements, including:

- A safe and welcoming outdoor space for inpatients
- A new meeting space for local neighborhood organizations

- Redesigned spaces for both the community pantry and the wound care center in the Tower Building

Design work is already underway, and we look forward to breaking ground soon.

### Upgraded Safety with New Weapon Detection System

We are committed to keeping our campus safe and welcoming. Soon, all entrances will be equipped with a state-of-the-art weapon detection system. The unobtrusive, stadium-style technology uses 3-foot-tall poles that visitors walk through seamlessly. If a weapon is detected, security is discreetly alerted and will respond appropriately. The system ensures safety without disrupting the flow of foot traffic

### Expansion of Women's and Families Services

The brand new Temple Women's and Families campus is now open for outpatient OB/GYN, Family Practice and Pediatric care as well as same day surgeries and will soon open for inpatient obstetrics care. As the hospital progresses toward a full opening, we are proud to share that we have secured a grant from the William Penn Foundation. This funding will support the addition of an integrated care therapist within the obstetrics team, ensuring a more holistic and supportive experience for our patients. As every psychiatrist knows, mental health care is a vital component of maternal health. Pregnant and postpartum individuals often face significant emotional and psychological challenges, and having mental health support integrated into their care helps improve outcomes for both parent and child.



**Jessica Kovach, M.D.**

*Chair of Department of Psychiatry*

# LETTER FROM THE CHIEF MEDICAL OFFICER

**Dear Department of Psychiatry, Alumni, and Faculty,**

My name is Kevin Caputo and I am pleased to serve as your new Chief Medical Officer of Episcopal Hospital and Chief Medical Officer of Behavioral Health for TUHS. I have been in this role since March 31, 2025 and am excited to join a wonderful group of colleagues and learners. I come here directly from a brief stint as a Medical Director for Magellan Healthcare. I went to college at RPI in Troy, NY, and medical school at SUNY Upstate Medical Center in Syracuse, NY.

I came to Philadelphia to complete my Psychiatric Residency at Thomas Jefferson University Hospital, and have spent the bulk of my career at the Crozer Health system. I practiced clinically in a variety of settings: inpatient, outpatient, clinical trials, crisis, substance abuse, and integrated health. In 2000, I became the Chief Behavioral Officer for the system, a role that combined Chairman of the Department of Psychiatry, and Operational service line leader. In that role I was able to expand the department from 9 psychiatrists to 63 providers, grow the inpatient services from 24 to 106 beds, successfully initiate over 30 new programs, and develop and initiate a new Psychiatric Residency. Through my coursework at the American Association of Physician Leadership, I was able to grow the service line and ensure profitability.

I have had other leadership roles in general. At Crozer I ran the specialty physician network from September 2014-2016 and was media spokesperson for all Behavioral Health issues. Outside of Crozer, I was first Chief Medical Officer for PHMC, and served as an FBI consultant.

The role of CMO at Episcopal is a role that serves many stakeholders. They include the department of Psychiatry, which is the largest, but also the Emergency Department, the Wound Care Center, the Radiology Department, the Laboratory, and the medical floor (C6). I believe that Episcopal Hospital is a hidden gem in the Temple system. We do great work here for a vulnerable patient population. My goal is to improve communication within and among the many constituencies to deliver

the most patient-centric care that all of our patients deserve.

One of my goals is to challenge everyone to think out of the box, and be creative in how we deliver care. As a fresh set of eyes, I hope to understand why we do things a certain way at Episcopal. If it is working, that's great. If it does not, my role is to facilitate change and help to implement it. The biggest challenge that I have encountered in my nascent role is patient violence. I will need much help in trying to understand why there is so much violence on the inpatient psychiatric units, and more importantly what we can do to change it.

In my broader role as the Chief Medical Officer of Behavioral Health for TUHS, I am conducting a needs assessment to see what services the system, the community, and the academic stakeholders are in need of. I hope to fill those gaps in a thoughtful, fiscally responsible manner in the coming years.

I have met many great people in my short time here. There is a tremendous collaborative spirit that is very refreshing. My early work has been to systematize processes, learn about the organization, and gain more support for inpatient psychiatry. I am hopeful that we will ultimately establish ourselves as the Behavioral Health hub, and go-to organization in the city of Philadelphia.

**Thank you ,  
Kevin P Caputo,  
MD , FAPA**



**Kevin Caputo, MD, FAPA**  
*Chief Medical Officer*



# LETTER FROM THE PROGRAM DIRECTOR

**Dear Department of Psychiatry, Alumni, and Faculty,**

The Temple University Hospital Psychiatry residency program is off to a great start this year as we usher in a new crop of trainees. Our interns bring with them a wealth of diverse experiences and academic and scholarly achievements. Their energy and enthusiasm for learning psychiatry is infectious, and we cannot wait to see what their next four years will bring! Additionally, we welcomed a new PGY2, Dr. Neil Chen, from the St. Louis University Psychiatry Residency program, who has been busy acclimating to our robust emergency psychiatry rotation and transitioning seamlessly with his pg2 peers who served as active participants in his recruitment.

The summer is often a busy yet exciting time of transitions—graduation, post graduate year promotions, academic year scheduling, and orientation. At the national level, our program directors' association remains dedicated to optimizing recruitment efforts, understanding AI, and supporting educators and trainees as we adapt to dynamic legislative changes. Our program recruitment committee is actively working on updating our residency website and planning to participate in and host various virtual recruitment open houses. Our Instagram page has never looked better! We recognize that the success of our recruitment each year depends upon the residents' involvement, contributions, and satisfaction with the program. Recruitment season will once again be conducted virtually with approximately eleven interview days. Applicants will have the opportunity to allocate ten signals to psychiatry programs of interest in ERAS, as they did last year. We receive over 1000 applications to our program each year, so this signaling system has helped guide our screening process. Approximately 75% of our interview spots last year were filled by candidates who signaled the program. Our first, post-COVID, in-person second-look event was a huge success, and we are hoping to continue that this year.

The PGY2 float system was implemented at the beginning of last academic year in lieu of a 24hr call schedule – a change initiated by resident feedback. This year we will be tweaking the float rotation so that it is coupled with neurology instead of the High Acuity C/L service. Education on the higher management CL service is more conducive to a four-week block given the opportunity to observe the patient's trajectory as the resi-

dent manages the psychiatric aspects of these medically complex cases. Meanwhile, the neurology consultation service is more amenable to a less continuous rotation block given the decreased frequency of follow ups and continuity of care required in that setting. A restructuring of the outpatient psychiatry rotation was initiated by resident feedback and comparison of our program to those nationwide. While there have certainly been some hiccups in the operationalization of these changes, we anticipate that the continued addition of more direct attending supervision and earlier introduction of medication management in the outpatient setting will continue to enhance the outpatient psych education while maintaining our strong psychotherapy training.

I want to highlight the significant campus enhancements over the past year and currently in progress that directly reflect hospital leadership's efforts to promote a culture of safety and increase resources for our patients – expansion of outpatient offices to support our increased outpatient clinics and promotion of wellness and support amongst peers such that residents are now collocated to one side; creation of a new Crisis Response Center (August 2025) to better support the volume, needs, and acuity of our patients while strategically and intentionally creating a space in which this can be done with safety and dignity in mind; addition of an outpatient pharmacy in the main lobby (no longer outsourcing discharge scripts, direct support for our clinic patients), hiring of Episcopal Campus Director of Security in November 2024 (former chief of police), hiring of Director of Environmental Services (August 2025) specifically for Episcopal Campus, creation of substance use disorder clinic which serves as the primary site of our PGY2 addiction psychiatry rotation under the direct supervision of our addiction psychiatrist; weapons detection system implementation at main entrances (contract in review), body scanning device for CRC patients (delivered and currently undergoing staff training) to reliably identify contraband; and, lastly the expansion of our campus food pantry to serve our community.



**Ruby Barghini, M.D.**

*Program Director* 4



# PSYCHOTHERAPY INSIGHTS:

## *“It’s Medicine, Right?”*

I finished my psychiatric evaluation and asked the patient, “Is there anything else that we didn’t discuss or that I should know?” The patient pauses, and then responds, “Oh, yes, I have a medical card.” There is another pause, and they add, “It’s medicine.” Of course, I have dutifully asked the patient about their medical history, current medications, and tobacco, alcohol, and recreational drug usage. The patient did not mention their marijuana (MJ) use. Was I not thorough in my history? Was the patient trying to conceal their MJ use? Or is this a new era in which society is trying to understand the role of MJ and how to discuss it? Certainly the days of the scare tactic public service announcements such as the film *Reefer Madness* and the Scared Straight program to educate juveniles about the perils of drug use are giving way to an era in which MJ is accepted as a medicine and recreational substance. What do psychiatrists do when confronted with a patient who reports medical or recreational MJ use?

Just as society’s view of MJ is changing, so are the available products. The average percentage of THC, the most significant psychoactive component, tripled from 4% to 12% from 1995 to 2014 (ElSohly et al, 2016). Currently, plant product averages 20% THC, with concentrates available up to 80% (United States Department of Justice Drug Enforcement Administration, 2014). Cannabis botanists are using tech-

niques to develop myriad strains of various potencies and combinations of cannabinoids. Therefore, when a patient acknowledges MJ use, ask them if they know what percentage THC they are using; one would be surprised how informed patients are about their product choice and reasons. Engage in the conversation.

Yes, there is medicinal value in MJ for specific disorders. Despite the Commonwealth of Pennsylvania allowing people to be certified to obtain a medical card for twenty-four serious medical conditions, MJ has only been shown to be therapeutically effective for some of those conditions, including chemotherapy-induced nausea and vomiting, appetite stimulation in AIDS, neuropathic pain, spasticity, and two forms of pediatric epilepsy (Hill, 2019). MJ’s actions on the endocannabinoid system are still being understood. The system appears to be involved in the body’s stress management (Lutz, 2015) as well as other physiological functions, including immune, cardiovascular, and endocrine regulation (Lowe, 2021). Given that most patients present with symptoms related to stress and poor coping mechanisms, mechanisms, it seems logical for many to use MJ to achieve relief. Nevertheless, one must consider if MJ is treating the core problem or masking it to achieve relief. Nevertheless, one must consider if MJ is treating the core problem or masking it.



# PSYCHOTHERAPY INSIGHTS:

## *“It’s Medicine, Right?”*

Stress can lead to anxiety; however, anxiety can be both a problematic symptom and a catalyst for positive change. In training I had a supervisor who cautioned against the use of benzodiazepines to treat anxiety, indicating that if a patient is anxiety-free, they may not feel the need for change. Without change, they may not get better. Obviously, there is an indication for pharmacotherapy for anxiety disorders. One needs to tailor treatment interventions to each patient’s needs. The question becomes whether MJ use is helping or impeding the patient by causing a sense of improvement without any meaningful change. Nineteenth-century French essayist and poet Charles Baudelaire noted in his 1860 treatise *Les Paradis Artificiels* how hashish, a MJ product, “gives with one hand what it takes away with the other—that is to say, it feeds the imagination, without allowing one to profit by the gain” (Baudelaire, 1996, p. 74). A century later, the controversial motivational syndrome was described by David Smith (1968). A psychiatrist should have a discussion with their patient about their patient’s MJ use, its positive and negative effects, and the role it plays in their life to help the psychiatrist address motivation and stress management directly. Some patients are convinced of the merits of MJ use; they only recognize its negative effects once they stop using it.

Ongoing use of MJ has been associated with negative life success. In a longitudinal study in Christchurch, New Zealand investigators followed individuals from birth to age twenty-five and found a strikingly positive correlation between higher MJ use and lower levels of degree attainment, lower income, higher welfare dependence, higher unemployment, lower relationship satisfaction, and lower levels of life satisfaction (Ferguson and Boden, 2008). With today’s higher potency products, other problems can emerge including worsened anxiety, toxic psychosis, hyperemesis syndrome, and problems with concentration

and focus creating an ADHD-like syndrome. Moreover, patients with comorbid ADHD can experience worsening symptoms (Francisco, 2023). MJ use in at-risk youth is associated with earlier development of schizophrenia and a worse prognosis for the disease with continued use. Finally, our understanding of the effects of MJ on the developing adolescent brain is emerging (Hoch, 2025).

Despite MJ’s documented therapeutic potential, it is not a benign drug. When working with patients who are using MJ, talk with them about their reasons for using it and the positive and negative effects they notice. Look at the intersection of a patient’s coping mechanisms and the role MJ is playing in helping, delaying, or preventing them from addressing their issues. Ultimately, one of the psychiatrist’s key jobs is to help a patient understand how they think, feel, and act. This includes understanding their MJ use.



# PSYCHOTHERAPY INSIGHTS:

## *References*

Baudelaire, C. (1996). Artificial paradises (S. Diamond, Trans.). Carol Publishing Group. (1860). ElSohly, M.A., Mehmedic, Z., Foster, S., Gon, C., Chandra, S., & Church, J.C. (2016). Changes in cannabis potency over the last 2 decades (1995–2014): Analysis of current data in the United States. *Biological Psychiatry*, 79(7), 613–619. doi:10.1016/j.biopsych.2016.01.004

Francisco AP, Lethbridge G, Patterson B, Goldman Bergmann C, Van Ameringen M. (2023). Cannabis use in Attention - Deficit/Hyperactivity Disorder (ADHD): A scoping review. *Journal of Psychiatric Research*, 157, 239-256. doi:10.1016/j.jpsychires.2022.11.029

Hill, K.P. (2019). Medical use of cannabis in 2019. *JAMA*, 322(10), 974–975. doi:10.1001/jama.2019.11868

Hoch E, Volkow ND, Friemel CM, Lorenzetti V, Freeman TP, Hall W. (2025). Cannabis, cannabinoids and health: a review of evidence on risks and medical benefits. *European Archive of Psychiatry and Clinical Neuroscience*, 275(2), 281-292. doi:10.1007/s00406-024-01880-2

Lowe H, Toyang N, Steele B, Bryant J, Ngwa W. (2021). The Endocannabinoid System: A Potential Target for the Treatment of Various Diseases. *International Journal of Molecular Science*, 22(17), 9472. doi:10.3390/ijms22179472

Lutz B, Marsicano G, Maldonado R, Hillard CJ. (2015). The endocannabinoid system in guarding against fear, anxiety and stress. *Nature Review: Neuroscience*, 16(12), 705-718. doi:10.1038/nrn4036

Smith, D.E. (1968). Acute and chronic toxicity of marijuana. *Journal of Psychedelic Drugs*, 2(1), 37–48.

United States Department of Justice Drug Enforcement Administration. (2014). What you should know about marijuana concentrates also known as: THC Extractions. <https://www.dea.gov/sites/default/files/resource-center/Publications/marijuana-concentrates.pdf>



**Peter A. DeMaria, Jr., M.D.,  
DFASAM, DFAPA**

*Clinical Professor of Psychiatry  
Coordinator of Psychiatric Services  
Tuttleman Counseling Services  
Temple University*



## RESIDENT SPOTLIGHT: CLASS OF 2028

Neil Chen (he/him) is originally from Oak Brook, IL. He attended Vanderbilt University in Nashville and Rice University in Houston, and subsequently attended medical school at St. Louis University. He chose Temple for its rigorous training experience, centralized behavioral health services including a psychiatric ED, work-life flexibility, and proximity to family. He is primarily interested in child/adolescent and consult-liaison psychiatry; he hopes to eventually continue teaching and working with residents in an academic setting. Outside of medicine, Neil and his wife train together for competitive ballroom dance, care for their many cats, and eat extraordinary amounts of food. His most memorable experience at Philly was believing that he got pancreatitis after he ate at Chubby Cattle's all-you-can-eat in Philly's Chinatown. (It was not pancreatitis, just gluttony.) For future interns, he stresses the importance of regular sleep, exercise, a healthy diet, and hobbies as foundational in becoming a hardworking, happy, and knowledgeable resident.



Ester Choi, MD (she/her) is originally from Seoul, South Korea. She received a bachelor's degree in psychology and business at Northwestern University in Chicago and attended medical school at Temple. Ester was drawn to the strong clinical training and supportive environment at Temple's Psychiatry Residency. She is interested in child-adolescent psychiatry, cross-cultural psychiatry, and global mental health. Outside of work, she can be found playing golf, making lattes, and exploring new restaurants. Her favorite experiences in PA have been watching the Phillies game at Citizens Bank Park, visiting Hershey Park, and trying every ice cream place in Center City. Her top restaurant recs are Suraya, Mawn, and The Love. Her advice for incoming interns is to ask questions, help each other, and make time for the people you love!

# RESIDENT SPOTLIGHT: CLASS OF 2028



Jessica (Jessie) Connolly, MD is from Garden City, NY. She received her undergraduate degree from Bucknell University, in Lewisburg, PA, her Master's degree from George Washington University in Washington, D.C. and her medical degree from New York Medical College in Valhalla, NY. She chose Temple because of its high acuity and has thoroughly enjoyed the collaborative culture. She is looking forward to gaining exposure to different areas within psychiatry in her second year of residency, but is currently interested in psychotherapy and Child and Adolescent psychiatry. When she is not working, she enjoys spending time with her dog, Luna, baking and taking spin classes. Her favorite thing to do in Philadelphia walking around Rittenhouse Square with her dog. Her favorite restaurants so far have been Harp & Crown, The Love and Parc. Her advice for incoming interns is that you're not expected to know everything right away; residency is a transition and everyone's here to learn.

Jessica Epere, MD (she/her) is originally from Bowie, MD. She got her undergraduate degree from Cornell University in Ithaca, NY and attended medical school at Tulane University in New Orleans, LA. She chose Temple for the program's diverse patient population, location in a bustling city, and commitment to work-life balance. She is interested in child and forensic psychiatry, as well as incorporating psychotherapy into her practice. When she's not at work, you can typically find her enjoying some form of media entertainment (current favorites are Common Side Effects on HBO Max and the podcast "Unrestorable"), doing cozy activities, or taking a day trip to NYC for a Broadway show. Her favorite experiences since moving to Philadelphia were visiting the Otherworld art installation and attending a Zack Fox live DJ set. Top restaurant recs are Yakitori Boy and Chubby Chicks. Her biggest advice for incoming interns is: Focus on the big picture and don't sweat the small stuff. Also trust yourself, you've made it this far!





## RESIDENT SPOTLIGHT: CLASS OF 2028

Marisol Harrington, MD (she/her) is originally from Pleasanton, CA. She got her undergraduate degree from Dartmouth College in Hanover, NH and attended medical school at Temple University in Philly. She enjoys working with the North Philadelphia population and being challenged by the multiple comorbidities that our patients bring to the table. Outside of work you can find her running (slowly), reading (anything), attempting new dessert recipes, and generally basking in the sun. She cannot stop recommending moving to the suburbs of Jersey (think farmers markets, trees, free parking??!!) Top restaurant recs are Fiorella and 1-900-ice-cream. Advice for interns? Don't forget about your life and your people outside of the hospital - say yes to a long weekend away or dinner on a Thursday night!



Shahriar Islam, MD (he/him) is originally from Queens, NY. He got his undergraduate degree from Rutgers University in New Brunswick, NJ and attended medical school at Stony Brook University in Stony Brook, NY. He loves Temple for the program's down-to-earth culture made possible by both the attendings, residents, and ancillary staff. He also values the program's unique focus on addiction and community psychiatry which is enhanced by its diverse patient population from various socioeconomic and cultural backgrounds in Philadelphia, and the extensive clinical exposure provided by its large inpatient capacity of about 120 inpatient beds. Outside of work, he lives a pretty simple life filled with a good drama or comedy show, hanging with his nieces, nephews and cousins, and dabbling in shooting some film. His favorite experience since moving to Philadelphia was probably hosting his niece's birthday after a long week of day float. It taught him about the importance of putting effort into the things that matter in life. His biggest advice for incoming interns is to learn that not knowing is part of the journey, and the people in Temple will have your back when you don't know!



## RESIDENT SPOTLIGHT: CLASS OF 2028



Brie Mahnke, MD, MPH (she/her) is originally from Bloomington, IL. She got her undergraduate and medical degrees from Indiana University and her MPH in health policy from Harvard University. She loves Temple for the program's high acuity, substantial Spanish-speaking population, and openness to resident feedback. She is interested in community/street psychiatry and palliative care, and plans to incorporate health policy work into her career. Outside of work, she can be found nurturing her sourdough child Wilson, doing yoga, reading, or traveling. Her favorite part of moving to Philadelphia has been finding a new yoga studio home. Top restaurant recs are Suraya and CHAR in Fishtown. Her biggest advice for incoming interns is to prioritize sleep and get Step 3 over with ASAP!

Molly Nealon, MD (she/her) is originally from Schenectady, NY. She got her undergraduate degree from DePaul University in Chicago, IL and attended medical school at St Louis University in Missouri. She loves Temple for the program's strong addiction exposure, high acuity, and focus on work-life balance for residents. She is interested in incorporating psychotherapy into her practice, whether that be inpatient or outpatient. Outside of work, she can be found reading novels, lounging with her cats Zelda (as in Fitzgerald) and Zadie (as in Smith), or attending pottery classes. Her favorite experience since moving to Philadelphia was watching National Treasure on Independence Mall. Top restaurant recs are YKI and Pietramala in NoLibs. Her biggest advice for incoming interns is to find hobbies that give you a sense of accomplishment and allow you to work towards and achieve non-professional goals. That fulfillment pays off at work too!





# RESIDENT SPOTLIGHT: CLASS OF 2028

Stephanie Omaliko, MD (she/her) is originally from Houston, TX. She got her undergraduate degree from The University of Texas at Austin in Austin, TX and attended medical school at Boonshoft School of Medicine in Dayton, Ohio. She loves Temple for its diverse patient population, strong psychotherapy training, and supportive, collaborative faculty environment. She is interested in adult psychiatry, whether that be inpatient or outpatient. Outside of work, she can be found painting, caring for her plants, or doing a DIY home decor project. Her favorite experience since moving to Philadelphia has been joining a run club. Top restaurant recs are Suya Suya and Circles Thai. Her biggest advice for incoming interns is stay curious, cultivate empathy, and prioritize your own mental wellness as much as your patients.



Jordan Rojas, MD MA (he/him) is originally from Seattle, WA. He received his undergraduate degree in Biochemistry from the University of Washington in Seattle, WA and attended medical school at Temple (the Lewis Katz School of Medicine). He loves Temple for the strong training in addiction, the tight knit and collegial environment, and the commitment to providing high quality care for underserved populations. He has a strong interest in addiction and psychotherapy, and is leaning towards working outpatient in the future. Outside of work, he can be found playing video games, working out, or watching basketball (Rockets/Warriors [massive Steph Curry fan]). His favorite experience since moving to Philadelphia is exploring the Philadelphia Museum of Art (and Mutter museum, everyone gets freaked out haha) with family and friends. Top restaurant recs: Unit Su Vege in Spring Garden, I'm not vegan but love this place. His biggest advice for interns: get to know the staff members and build a good relationship with them, it makes working in such a high acuity environment so much easier/better!



# RESIDENT SPOTLIGHT: CLASS OF 2028



Nina Shah, MD (she/her) is originally from Newtown Square, PA. She completed her undergraduate degree at Haverford College and attended medical school at Sidney Kimmel Medical College at Thomas Jefferson University. She was drawn to Temple for the program's commitment to resident education and wellness and the opportunity to work with a diverse patient population in an underserved community. She is planning to pursue a fellowship in Child and Adolescent Psychiatry. Her favorite part of residency so far has been learning from her co-residents and supervisors. Outside of work, Nina enjoys knitting, playing with her cat, Milo, and going for walks around the city. She would recommend checking out the weekly farmer's market at Rittenhouse Square – in the winter, one of the farms brings their donut machine and sells fresh apple cider donuts. Advice she would give incoming psychiatry interns is to keep up with your relationships with friends and family.

Kevin Yu, MD (He/Him/His), was born in NYC and grew up in New Jersey. He studied Biology at Penn State for undergrad, before coming to Philadelphia to attend Drexel University College of Medicine. He chose Temple due to wanting to remain in Philadelphia and appreciating the passion that Temple faculty had for the program. He is still deciding on which subspecialty of psychiatry he would like to practice but is considering child and adolescent psychiatry. His favorite part of residency so far is the acuity of the patient population and his interactions with his co-interns. Outside of residency, he enjoys playing video games, trying new restaurants, and spending time with friends and family. For food, he recommends the Happy Hour at Pearl and Mary Oyster Bar and EMei. One piece of advice for new interns would be: ask a lot of questions! Residency can be very confusing and it takes some time to adjust to a new hospital, and everyone comes in with a different knowledge base and expectations. Asking questions sooner rather than later can help you pick up the basics faster.





## RESIDENT SPOTLIGHT: CLASS OF 2028



Ross Meaden, MD (he/him) is originally from New York City (Manhattan). He got his undergraduate degree from Washington University in St. Louis in St. Louis, MO and attended medical school at SUNY Upstate in Syracuse, NY. Outside of work, he enjoys hiking, reading manga/watching anime, experiencing the Philly food scene, and playing video games with his friends on discord. His favorite experience since moving to Philadelphia was going to the Eastern State Penitentiary haunted house with his wife. Top restaurant recs are Suraya and Little Nonna's. His biggest advice for incoming interns is to immerse yourself in the work and be honest with yourself about what you do and do not like. Also, take advantage of your time off and don't feel guilty about it. Intern year can be tough at times and taking time for yourself is a healthy way to deal with the stress.

A special goodbye to Ross, who will be changing paths to pursue his career goal of interventional pain medicine through PM&R at Washington University in St. Louis. We will miss you Ross and congratulations on your Match!



# NEW FACULTY SPOTLIGHT: DR. CHAMBERS



## **Why did you choose to join the faculty at Temple?**

I appreciated the acuity, commitment to excellent clinical care, and the supportive environment offered within the department

## **What do you like most about working in the inpatient setting?**

I like that every day is a little bit different, and I like doing clinical teaching with residents and students on the unit

## **During residency, did you see yourself pursuing any particular fellowship or specialty?**

I thought about doing C/L because I enjoyed working with women and thought I might want to do something like perinatal psychiatry, but ultimately

decided I enjoy being a generalist and working with all different sorts of patients

## **What are your goals for the next few years?**

Expand my clinical practice and keep working with patients who need to be treated at a high level of care for a variety of reasons. Continue to develop as an educator, working particularly with the medical students in my new role as Associate Clerkship Director

## **Who has influenced you the most during your career so far?**

I have had a number of influential attendings, but the ones that stuck with me most have a deep commitment to evidence based treatment paired with practicality and a patient-centered approach to carrying out the treatment

## **What might people not know about you?**

I started my training in Family Medicine before switching specialties to Psychiatry

## **What do you do for fun outside of work?**

Travel, spending time with my family, and lately I've gotten into doing a little gardening.

## **What is your top restaurant or activity recommendation in Philadelphia?**

Local 44 in West Philadelphia - the food is great and they have a nice Quizzo!

***Hometown: Berks county, PA***

***Medical school: Marian University, Indianapolis, IN***

***Residency: Jefferson Einstein Hospital, Philadelphia, PA***



# NEW FACULTY SPOTLIGHT: DR. NEGRINI



## What are you working on right now?

My current research project is in the substance use clinic: I want to study the 12 step program to chart outcomes that are more helpful toward recovery and helping people to internalize their locus of control and integrate self-forgiveness. The 12 step program is the best for treating AUD and we want to study systematically why it works.

## Who has influenced you the most during your career so far?

I listen to a lot of podcasts and read books. One book, Shrinks: The Untold Story of Psychiatry by Dr. Lieberman, a former APA president who helped to write the DSM, is about the history of the field and of the DSM. Another book I read is by Elyn Saks, she was a professor of law who developed schizophrenia and wrote this memoir about her life (The Center Cannot Hold). It has a very detailed description of the symptoms of schizophrenia and what it is like to experience it from the inside. This can help us to approach our patients in a human way and to understand the phenomenology of symptoms.

## Why did you choose to join the faculty at Temple?

I was looking for three things when I was job hunting: I wanted to be in Philadelphia because I have a lot of friends here, I wanted to be in an academic environment, and I wanted to be in outpatient. Temple gave me two of these three, plus research opportunities. Having a more flexible afternoon after seeing patients in the morning lends itself to a research focus, and now I am not so interested in switching to outpatient so quickly.

## What do you like most about working in the inpatient setting?

I like the fact that we see a lot of patients with a rich clinical presentation. In outpatient, you only hear what the patient has to say about the hospitalization: you're sort of missing out on the action. Working with a resident also gives me more time to look into things.

***Hometown: Rio de Janeiro, Brazil***

***Medical school: Federal University, Rio de Janeiro, Brazil***

***Residency: Sant Barnabas Hospital, Bronx, NY***



# NEW FACULTY SPOTLIGHT: DR. NEGRINI

## What advice do you have for current residents?

1. Develop a relationship with a mentor
2. Feel confident that because you got this far, that means you have what it takes
3. You don't learn everything you need in residency, that's an illusion. Making a wrong decision or not knowing something does not mean you don't have the right to call yourself a doctor
4. This is better understood as a calling than a profession. This means you don't know what is coming for you until you answer that call. As you journey on, the call shapes who you are and shapes you into the doctor you are supposed to be by making mistakes

## What might people not know about you?

I lived 10 years of my life as a celibate member of a religious order before choosing to prioritize my career in medicine. I also lived in Peru for 3 1/2 years!

## Do you have any eclectic or interesting hobbies?

I like to play the piano, and I play an instrument called ocarina. It's like a transverse flute. It's a lot easier to play than the piano, actually. I listen to all kinds of music, but I play classical the most. I wrote one piece for piano but lately I have been focused more on research.

## What is your top restaurant or activity recommendation in Philadelphia?

Restaurant: Fogo de Chau, a Brazilian steakhouse. It's a little pricey but it's worth the treat if you find the right time.

Activity: The Wissahickon (hiking, bike riding, diving at Devil's Pole), the Rodin museum, the Museum of the American Revolution

# NEW FACULTY SPOTLIGHT: DR. SOMMER



## **Why did you choose to join the faculty at Temple?**

I really enjoy teaching, so I was looking for a position that had good opportunities with the residents.

## **During residency, did you see yourself pursuing any particular fellowship or specialty?**

I did a little bit of psychoanalytic training here in Philadelphia. I loved it, but didn't find it practical at the moment, so I went to inpatient.

## **What are your goals for the next few years?**

I just want to enjoy myself working here, honestly.

## **Who has influenced you the most during your career so far?**

David Sidransky is a brilliant scientist and took me under his wing when I arrived in the USA.

## **What do you do for fun outside of work?**

I have a big family - 6 kids. My oldest is 23, youngest is 5. Five boys, one girl. I love it. It's fascinating to see how the personality forms. All my kids are different, but they do have some similarities to each other.

## **Do you have any eclectic or interesting hobbies?**

I started playing tennis a little bit, and I like to watch my daughter play tennis with my wife. I play soccer with one of my other kids. We go hiking, usually in the Poconos. We travel a lot, most recently we went to Greece and Turkey. Next I'm going to Germany.

## **What is your top restaurant or activity recommendation in Philadelphia?**

Walnut St Theatre, the oldest theatre in America. One of my kids is acting there now. The building is nice, and the plays are nice, the actors are good no matter what you see. It's always worth the money.

***Hometown: East Germany***

***Medical school: Charité– Berlin University Medicine, Berlin Germany***

***Residency: Albert Einstein Medical Center, Philadelphia, PA***

# THE NEW CRC: AN INTERVIEW WITH DRS GRAHAM AND KARASIN



**Dr. James J. Graham III, DO**  
CRC Medical Director  
Associate Professor



**Dr. Jamie A. Karasin, MD**  
CRC Attending  
Assistant Professor

The long-awaited CRC revamp is nearing its opening date this summer. Here's what two of our CRC attendings, Dr. Graham and Dr. Karasin, have to say about this exciting upgrade!

*JG: Dr. Graham; JK: Dr. Karasin*

## **How will having the new space benefit our patients/community?**

JK: This new CRC provides a more appropriate and compassionate setting for behavioral health crises. Also allows for improved collaboration between mental health professionals including nurses, physicians, students and certified recovery specialists. The newer set-up ensures improved monitoring, safety, and treatment planning for patients. Finally, having more private spaces respects patient dignity and confidentiality, which can improve trust and engagement.

Overall I am optimistic the new CRC can help transform the way care is delivered in emergencies—by being faster, more humane, more effective, and more connected to the broader health and social system. It saves lives, promotes recovery, eases systemic burdens, and builds a healthier, safer, and more resilient community.

## **What are some of the changes residents can expect as far as workflow?**

JG: As with everything, there are a lot of unknowns until we actually get into the space and start working. Changes are probably going to happen as we get used to working in the new space, seeing how patients flow through the CRC and where everybody will do their portion of the assessment.



# THE NEW CRC: AN INTERVIEW WITH DRS GRAHAM AND KARASIN



*Temple University President John Fry addresses attendees at May 15th's ribbon cutting event.*

## **What are some advantages of the new space?**

JG: First off, it was built from the ground up as a crisis center, with input from physicians, nurses, and MHTs. This allowed us to customize it for our needs— every area where a patient might be has at least two doors, we have more seclusion rooms (which have space to fit a gurney!), and bathrooms are more accessible for patients and staff. It is also a really bright and open space with nice, big windows. The big windows also make for good lines of sight.

JK: I'm looking forward to having more windows and an improved working environment which will hopefully help to boost mood and morale. It should feel like a more open, modern, and welcoming space to work in for staff/trainees. Having a larger space also allows us to treat more patients in a safe manner.

## **What will you miss about the old CRC?**

JK: The memories made in the old space with co-residents and staff (from overnight call as a resident and newer memories as an attending).

JG: I will miss the familiarity and knowing where everything is. I have worked in the CRC in some capacity since 2012 when I started my intern year, and things have changed a bit but it's always been in the same spot on PM3. I wonder how many times I will accidentally hit 3 on that elevator once we move.

## **What is left to do before we can start using the new space?**

JG: The last thing physically missing from the space is the doors. Once those are in, we have to obtain inspections and occupancy permits from the fire department, from the city, DBH/IDS, the Joint Commission, et cetera.



*One of several patient spaces in the new Crisis Response Center.*

## Fellowship Match

**Addiction Psychiatry**  
*Dr. Elsa Stoff (PGY4) -  
University of California*



**Dr. Elsa Stoff, MD**



**Dr. Robert Simons, MD**

**Consultation Liaison Psychiatry**  
*Dr. Robert Simons (PGY4) -  
Memorial Sloan Kettering Cancer  
Center/ Weill Cornell Medical Col-  
lege*

**Child & Adolescent Psychiatry**  
*Dr. Eric Huynh (PGY3) -  
Northwestern*



**Dr. Eric Huynh, MD**



## Fellowship Match



**Dr. Samuel Rosenblatt, MD**

*Forensic Psychiatry  
Dr. Samuel Rosenblatt (PGY4) - Case  
Western*

*“I am drawn to forensic psychiatry because it demands clear thinking, ethical judgement, and integrity in complex situations and offers the chance to shape justice through clinical insight.”*

## Young Alumni Spotlight

**Setting: Outpatient Psychiatry**

**Role:** Medical Director at Jefferson Health in NJ.

**Areas of Work:**

- Outpatient Psychiatry
- Currently working in an early intervention program through a grant from NJ for patient's with HIV. Patients in this program are provided a team of Behavioral health provider, infectious disease provider, social work, and case management.

**Recent Recognitions:**

- Featured in an SJ Magazine article on dementia and memory loss

**Goals:**

- Dr Patel aims to launch an LAI clinic and is working to integrate partnerships with Weight Management (eating disorders) and Bariatrics (closer post-op follow-up)



**Dr. Sahil Patel, MD**

# RESIDENT ACCOMPLISHMENTS

Seo Yeon (Ester) Choi: Beyond Generalizations: Tailoring Mental Health Approaches for Diverse Asian American Subgroups, Poster presentation, American Psychiatric Association (APA) Annual Meeting, Los Angeles, CA, May 2025

Jessica Epere: STOPTHEBURN: A Randomized Controlled Trial of Death Cafés for Burnout Prevention in Intensive Care Unit Employees

[STOPTHEBURN: A Randomized Controlled Trial of Death Cafés for Burnout Prevention in Intensive Care Unit Employees - PubMed](#)

Shivsai Gongalla: Histotripsy - hype or hope? Review of innovation and future implications

[Histotripsy - hype or hope? Review of innovation and future implications - PubMed](#)

Shivsai Gongalla, Hussain Jessani, Joan Oh: Bridging the Gap in Transcranial Magnetic Stimulation Training: Considerations for Standardized Education in Psychiatry Residency Programs. Poster presentation, 13th Annual Meeting of the Clinical TMS Society, San Diego, CA. Jun. 2025.

Camila Ramirez: An overview of the currently available and emerging long-acting formulations of risperidone for schizophrenia and bipolar disorder

[An overview of the currently available and emerging long-acting formulations of risperidone for schizophrenia and bipolar disorder - PubMed](#)

Qianyu Wang: Relationship Between Anxiety Psychotropic Medications and Pulmonary Functional Outcomes in Smokers With COPD: An Analysis of the SPIROMICS Cohort, Poster presentation, American Psychiatric Association (APA) Annual Meeting, Los Angeles, CA, May 2025



# THE PROMISE

**We have emerged from an era  
of stagnation.**

**The outstanding question of a  
next step,**

**The thought-provoking work  
pointedly illustrates this  
disconnect.**

**New and meaningful  
empathy,**

**Noteworthy enjoyment.**

**Connection- this paradigm  
shift**

**Focusing on the potential can  
potentially fill in the gaps.**

**A thoughtful sugar reward,**

**A beautiful example**

**For conceptualizing in detail,**

**We look forward and are no**

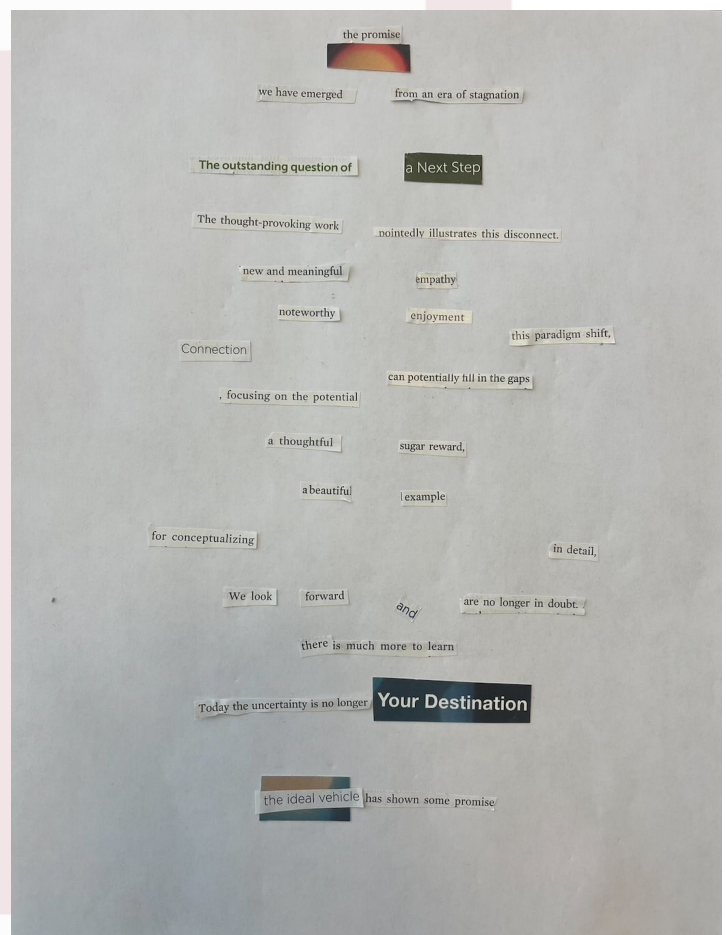
**longer in doubt.**

**There is much more to learn**

**Today the uncertainty is no**

**longer your destination**

**The ideal vehicle has shown  
some promise.**



**Allison Zuckerberg, M.D.**

*Ransom poem, American Journal of Psychiatry, Oct. 2024 edition*

# RESIDENCY IN PHOTOGRAPHS





# RESIDENCY IN PHOTOGRAPHS





# RESIDENCY IN PHOTOGRAPHS





# RESIDENCY IN PHOTOGRAPHS



## **Newsletter Staff: Spring 2025**

### **Co-Editors:**

*Grace Kelley, M.D.*

*Parker Lee, M.D.*

*Molly Nealon, M.D.*

*Allison Zuckerberg, M.D.*

### **Faculty Advisor:**

*Shaun Plotnick, M.D.*