services, diagnosis and treatment of neurological disorders, and consultative activity with schools, social agencies, and other community resources. To provide facilities for this type of comprehensive training, the Department utilizes Georgetown University Medical Center, the District of Columbia General Hospital, the Washington Veterans Administration Hospital, Sibley Memorial Hospital, and the Department of Public Health Adolescent Clinic. The program is approved for three years of general psychiatry training and two years of child psychiatry training by the American Medical Association and the American Board of Psychiatry and Neurology.

Psychiatry and Neurology.

Close supervision is provided at all levels of training. This supervision, coupled with increasing responsibility for patient care, contributes to the resident's growth and maturation. As the resident develops in his capacity for independent thought, he is encouraged to impart his knowledge by assuming the role of teacher with nurses, medical students, interns, and residents. To foster the type of constructive critical objectivity which is essential in his work as a psychiatrist, the resident is expected to participate in supervised research and

to report on this activity prior to the completion of his training.

In summary, the Georgetown program—with psychodynamics as its basic science—provides a comprehensive experience with abundant opportunities for the development of the individual interests of the future psychiatrist physician. As in all educational endeavors the primary aim of this period of training is to impart a scientific attitude that fosters continuing inquiry and curiosity, flexibility, and a receptivity to changing concepts and roles.

First Year of Residency

During the first year of residency training, the emphasis is upon carefully selected didactic exercises and a sequence of intensive clinical experiences with a wide variety of patients for whom the resident assumes major responsibility under circumstances of maximum supervision and day by day instruction. There are three clinical facilities, all closely affiliated with Georgetown, where the resident is assigned in rotation for varying lengths of time. The three facilities include: the Acute Psychiatric Service of the District of Columbia General Hospital, two active wards at the Washington Veterans Administration Hospital, and the psychiatric unit at Sibley Memorial Hospital, a private community hospital.

The first year begins with a planned series of orientation and introductory meetings for the resident group in its entirety. These meetings take the form of lectures, discussions, films, tours and visits to significant places in the metropolitan area of Washington. The resident is encouraged to apply his early knowledge of the elements of psychiatry to the social and physical environment in

which he will spend three years pursuing his postgraduate education.

Considerable attention during the first year is given to psychopathology and clinical diagnosis. Included under the latter are: the interview as a diagnostic instrument, psychological techniques, paramedical diagnostic procedures, the critical evaluation of clinical information and its formulation, and the communication of diagnostic conclusions in verbal and written reports. The beginning resident is introduced to the major treatment modalities: chemotherapies and physical therapies, milieu therapies, and the spectrum of psychotherapies. The continuous individual psychotherapy of selected patients is encouraged early in the training year and for this type of work additional supervision is provided. Patients seen for diagnosis and treatment by residents during their first year tend to be inpatients at the participating facilities; however, day-care patients, out-patients, and emergency patients are also seen.

Clinical experiences are thoroughly and continuously supervised with the resident working side by side with full-time Georgetown faculty members in nearly all first year assignments. Case conferences and planning and management conferences are conducted daily under circumstances ranging from very informal

to elaborately formal.

The first year resident assumes some responsibility for the instruction and supervision of third year medical students on clerkships from Georgetown University School of Medicine. This teaching responsibility is shared with visiting and full-time psychiatrists. Opportunities for special experience in clinical research, forensic psychiatry, in-patient child psychiatry, problems of addiction, and art therapy are available during the first year of training.