

March 20, 1989

Ms. Amanda Hopkins-Alexiadis
Psychiatric Institute, Fort Worth
815 Eighth Avenue
P.O. Box 69
Fort Worth, TX 76101

Dear Ms. Hopkins-Alexiadis,

In response to an inquiry by Ms. Robin Moore for a survey of ECT practice and accompanying training at PIA hospitals in Texas, I indicated that training was best provided at the two established courses at Duke University and SUNY at Stony Brook. The SUNY course is a five day, 'hands-on' course which is taught by six members of the faculty. Intensive sessions discuss clinical indications, ECT techniques, nursing care, anesthesiology, medical aspects, instrumentation, theory, and consent. (A description is enclosed.) Such an intensive course cannot be duplicated outside our facility at this short notice. Therefore, we believe it would be preferable to have members of your staff attend the next course, planned for mid-June.

But if such attendance is not feasible, we believe we can create a reasonable facsimile for your staff at Fort Worth. As it is not possible for any of us to teach consistently and continuously for the required minimum two or three days, it would be necessary to include more than one member of our teaching faculty, and I would invite Dr. Lawrence Greenberg, attending psychiatrist and Mrs. Irene Carasiti, ECT nurse. Both have worked with me for more than five years in our ECT unit.

A program would be focussed on practical clinical issues: indications for ECT, selection of cases, consent, medical examinations, demonstration of treatment practice (dosage, electrode placement, frequency), adverse effects and their management, identification of high-risk cases, and malpractice concerns. Such sessions would require a clinician to spend time in the clinical facility to determine the types of cases to be used in the clinical sessions; and to survey the treatment facilities for ECT. A suggested two-day curriculum is attached.

The addition of a third day will allow sessions for nurses and anesthesiologists; didactic sessions on ECT theory; discussions of the role of the consultant, management of the high-risk patient, credentialing and privileging, and extended applications as maintenance ECT, treatment of adolescents, and neurologic and medical (non-psychiatric) applications of ECT.

It would be possible to invite Mrs. Carasiti to work with your nurses in parallel on one of the first two days.

In discussing the facilities now at the Psychiatric Institute, I was told that patients are not now being treated with ECT. We consider a hands-on demonstration so useful, that every effort should be made to take the students to a facility where ECT is actually given; or, to allow us to demonstrate ECT at the Institute in suitable cases.

We design our teaching to encourage our students to teach others at their institutions. We provide each student with texts, videotapes, and readings to supplement the textbooks. For the proposed training program, we will supply one (or multiple) set(s) of the texts and videotapes at our discount of \$475. A set of the supplementary readings is duplicated at the nominal charge of \$10 and either one or multiple sets can be provided.

We have not developed charges for such an off-site training course but are prepared to use the fee schedule for off-site patient consultation and court appearance as a reasonable basis. We will set a daily fee of \$2,000 for each of the psychiatrists and \$1,000 for Mrs. Carasiti. In addition, travel costs at first class rates and local hotel and meal costs will be charged as paid.

We can develop this program in the period Sunday-Wednesday, April 23-26.

I can be reached at my office most mornings at 516-444 2929. Our FAX number is 516- 444 7534. I trust these ideas are helpful, and thank you for your inquiry.

Sincerely yours,

Max Fink, M.D.
Professor of Psychiatry

PROPOSED COURSE: CLINICAL ASPECTS OF ECT

Day (-1): Preparation afternoon/evening

Visit treatment facility; review charts and interview patients in course of ECT, being considered for ECT, or recently completed ECT. Interviews with other patients who may provide bases for discussion. Visit ECT treatment facility; meet with ECT nurse/ physician/ anesthesiologist. Plan actual course with project coordinator.

Day 1:

- a.m. Indications for ECT: didactic; patient interviews; videotapes. (MF)
- p.m. Pre-treatment examinations (LG)
Technical issues in treatment; instrumentation; electrode placement (LG)
Discussion of risks; risk management; malpractice issues (MF)
Consent (LG or IC)

Day 2:

- a.m. Treatment demonstrations (MF, LG)
- p.m. Nursing and anesthesiology questions (LG)
Frequency and number of Rx; indications for termination; concurrent and sequential use of drug therapies (LG)
Maintenance ECT (MF)

Day 3:

- a.m. Medical issues; high-risk case management; role of consultants (LG)
Other indications: Neurologic; medical (MF)
- p.m. Concurrent sessions:
 - Nurses: Role of nurses in ECT (IC)
 - Pre and Post-ECT management
 - Consent procedures
 - Group therapy for patients
 - Anesthesiologists: Medical risks of ECT (LG)
 - Pre-ECT examinations
 - Ultra-brief anesthesia
 - Airway management
 - High risk medical cases; pregnancy
 - Physicians: Theories of ECT (MF)
 - Credentiailling and privileging
 - Malpractice issues
 - Instrumentation
 - Continuing education for professionals
 - Community education

Training Materials

BOOKS:

Fink, M. CONVULSIVE THERAPY: Theory and Practice, Raven Press, 1979.

American Psychiatric Association: Task Force Report #14, Washington, D.C., 1978.

Abrams, R. ELECTROCONVULSIVE THERAPY. Oxford University press, 1988.

Malitz, S. and Sackeim, H. ELECTROCONVULSIVE THERAPY: Clinical and Basic Research Issues. New York Academy of Sciences, New York 1986.

JOURNALS:

CONVULSIVE THERAPY, Raven Press, New York. Quarterly.

VIDEOTAPES:

INFORMED ECT FOR PATIENTS AND FAMILIES. Somatics Inc., Lake Bluff, Il., 1986.

MIND AND BODY. Health Information Network. Distributed by MECTA Corporation. Portland Oregon, 1987.

SUPPLEMENTARY READINGS IN ECT

The set of books and videotapes may be obtained at our cost of \$475 each. The supplementary readings can be duplicated here at about \$10 each or we can supply an unbound set for your duplication.