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President's Message

Citizenship in APA

I recently had the opportunity to attend the State Leadership Conference sponsored by APA's Practice Directorate and Practice Organization. This conference aims to educate, recognize and tap the resources of the officers and staff of State and Provincial psychological associations for the purpose of addressing practice issues in general and lobbying Congress on key issues. In recent years, the Presidents of Divisions that have significant practice interest have been invited to participate in this conference.

I enjoyed the conference in general, the discussion groups and breakout sessions, and the education on how to lobby Congress. Lobbying aims this year were a) ensuring successful merger of the Mental Health Parity Bills passed by the House and Senate so as to achieve activation this year, b) restoration of funds cut from Medicare, and c) correction of inequities for psychologists and other mental health professionals that have arisen in Medicare allocations during the current year. The agenda, facts and strategies for lobbying were developed by APA's Practice Organization on our behalf and implemented through Congressional contacts generated by the State Associations' leaders.

The conference experience was professionally and personally rewarding. I had the opportunity to meet the new leadership of the Practice Directorate, Dr. Katherine Nordal, and many leaders in APA and States governance. I had a chance to discuss our Division's ongoing and serious concerns about CPT codes and Medicare regulations that hamper training of new professionals. I learned that APA governance operates much like our Congress, through the work of committees, coalitions and action groups.

Perhaps most eye-opening was that I knew so few people at the Conference. I got the distinct sense that the Division of Clinical Neuropsychology garners a great deal of admiration; we have been enormously successful as a discipline, perhaps because we have been quite focused on "our" issues. It was also clear, however, that we would benefit tremendously within APA from working to implement as broadly as possible the goal currently articulated by our Executive Committee, to routinely share our success, energy and wisdom with our

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Back issues of the Division 40 Newsletter are now
 available on line at the Division 40 Archives
 The URL address is:
<http://www.div40.org/newsletter.html>

From The Editor

Welcoming our New Editor

I am very happy to introduce Michael McCrea as the new editor of Newsletter 40. Last August, the newsletter editorship changed from the hands of Nancy Chiaravalloti, following completion of her three-year term, to Bonny Forrest. After producing the Winter 2008 edition, Bonny was drafted into service for other roles, both in the division and in APA. We appreciate Bonny for stepping into the role as Newsletter 40 editor, even if it was for only a short time, and thank her for serving the division in that capacity. Dr. McCrea has since accepted the role of editor. Mike has a number of novel ideas regarding the newsletter and will be putting these into effect over the next three years. He welcomes input from other division members regarding the newsletter and its future contents. We are all excited to have Mike join us in this new role.

William B. Barr, Ph.D., ABPP
 Chair, Publications & Communications Committee

I am honored and delighted to accept the role of Editor for Newsletter 40. My belief is that the greatest strength to drive the highest quality publication is the Division 40 membership itself. In other words, many of you will likely be hearing from me with a friendly request to contribute to the newsletter at one time or another over the next three years. I look forward to delivering a publication that keeps our membership well-informed on activities within Division 40 and important developments in the broader specialty of clinical neuropsychology.

Michael McCrea, PhD, ABPP
 Editor, Newsletter 40

Mild Cognitive Impairment is Getting Old

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The widely cited Petersen criteria¹ for mild cognitive impairment (MCI) will turn 10 years old next year. These criteria actually appeared in earlier versions in 1996² and 1992³. The term originated with Reisberg and colleagues⁴ in the late 1980's and the idea of benign versus malignant cognitive aging⁵ dates back at least to the early 1960's. A PubMed search on 'mild cognitive impairment' produces about 3,550 references, including about 670 appearing in the last year. Some version of MCI criteria could appear in the DSM-V⁶. The concept and diagnosis of MCI have obviously gained traction in the past decade.

However, the concept and criteria have detractors. At least four reasonable criticisms have been leveled at the now old (late 90's) version of MCI:

- 1) "MCI is just early or preclinical Alzheimer's disease (AD), so why not call it that." ⁷
- 2) "A significant proportion of MCI cases revert to normal so it is not a reliable diagnosis." ⁸
- 3) "The rates of progression from MCI to dementia are variable so the concept is unreliable." ⁸
- 4) "Memory is not the only impaired cognitive function in preclinical dementia." ⁹

Obviously, the first and second criticism cannot both apply. If MCI is simply early AD it should not revert to normal or even remain static. But, in fact, in multiple studies, some people that meet criteria for MCI revert back to normal status clinically and psychometrically¹⁰.

Criticisms 2-4 arise primarily from heterogeneity in MCI cohorts under study. From the outset, the concept of MCI applied to the region in the functional continuum where low functioning 'normal' overlapped with early dementia (See Figure 1). However, discrepancies in the literature giving rise to criticisms 2 and 3 may stem as much or more from the way MCI criteria are operationalized than from heterogeneity embedded in the concept. There are many dimensions along which studies of MCI conditions must be compared in order to understand the discrepant findings^{11,12}. Among these are:

- **Sample Frame**
 - Population, general medical setting, memory disorder clinic
- **Approach**
 - Prospective, retrospective
- **Complaint criteria**
 - Other, self, none
- **Method of diagnosis**
 - Psychometric, clinical
- **If psychometric method**
 - One or many domains
 - One or many tests
 - Learning, recall, savings, recognition

In other words, any MCI cohort is made up of people arising from both the normal aging and the preclinical dementia groups. The factors listed above influence the relative proportion of each group in the

MCI sample. This in turn strongly influences the countervailing factors like rates of reversion to normal versus progression to dementia.

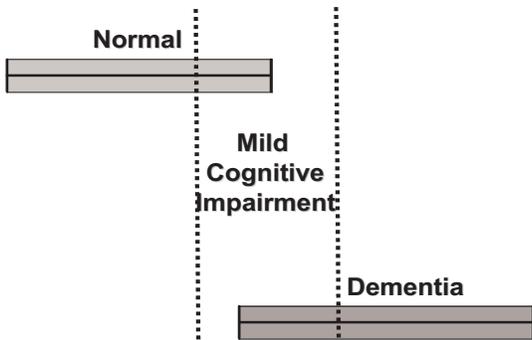


Figure 1. MCI describes the area of overlap between low functioning normal and 'preclinical' dementia

The fourth criticism is quite valid. As studies of MCI accumulated, evidence emerged that semantic fluency and executive function deficits are often present in persons in the preclinical period before AD diagnosis. This contributed to the inclusion of the concept of multi-domain MCI. Moreover, the pre-dementia patterns of cognitive deficit(s) are being recognized for Lewy Body, vascular, and other dementias. These pre-dementia profiles do not necessarily involve memory impairment. Thus, the concept of non-amnesic MCI has emerged. Finally, not all etiologies of people with mild cognitive

deficits are degenerative, so using history to “guestimate” etiology has been added to the diagnostic nomenclature. As a result, we now have the ‘new’ consensus diagnostic criteria for MCI¹³ as suggested in Table 1.

As the MCI concept ages, its long-term viability becomes less clear. Advances in imaging (e.g. PiB¹⁴) and genetics (e.g. Presenilin¹⁵) raise the possibility of identifying AD and other dementia risk well before any measurable cognitive change exits. Recent proposals regarding diagnostic criteria for Alzheimer’s disease¹⁶ eliminate the requirement for the presence of dementia, effectively ‘absorbing’ amnesic MCI into AD criteria. For the near future, however, MCI seems to have reached adulthood and serves as a risk state permitting us to pursue prevention methodologies in ways not seen in the good ole days.

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Table 1. International Consensus on MCI. (Winblad et al., 2004)

MCI Type	Number of affected domains	Etiology			
		Degenerative	Vascular	Psychiatric	Trauma
Amnesic	single	AD	VaD	Depression	TBI
	multiple	AD/DLB		Depression	TBI
Non-Amnesic	single	FTD			TBI
	multiple	DLB	VaD		TBI

Notes : AD (Alzheimer’s disease), VaD (Vascular dementia), DLB (Lewy body dementia), TBI (traumatic brain injury)

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Author's Notes

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International Conference on Behavioral Health and Traumatic Brain Injury

Patterson, New Jersey, October 2008

This landmark meeting of invited national and international expert neuroscientists, behavioral specialists, and physicians will convene at the St. Joseph's Regional Medical Center in Patterson, New Jersey on October 12-15, 2008. Its purpose is to generate a comprehensive report to the U.S. Congress with concrete recommendations to address the psychological health difficulties and traumatic brain injuries of our returning military veterans. Experts will specifically examine relevant science and research, treatment modalities, family and community resources, current and proposed policies, and ethical issues. The product will be a consensus statement that will ultimately impact science and services for all individuals afflicted with post-traumatic stress disorder and traumatic brain injury.

In addition, an all-day continuing education program, open to all interested health professionals and the public, will take place on Monday, October 13th, at the Montclair State University. For more information about these events and sponsorship opportunities, please contact Ms. Lindsey Meade at 973-754-2001 or Dr. Rosemarie Moser at 609-895-1070.

Advances in Neuroimaging and MCI

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The field of imaging in mild cognitive impairment (MCI) is expanding rapidly as more investigators focus their attention on identifying and understanding pre-dementia states. This article will focus on recent structural and functional imaging studies of MCI. Magnetic Resonance Imaging (MRI) is the most commonly employed method for studying structural brain changes in MCI, while functional MRI and nuclear medicine techniques are used to examine changes in brain function. Collectively, these imaging techniques are providing a detailed understanding of the brain changes that occur in pre-dementia states.

Structural Imaging

Neuroanatomic structure can be conceptualized at different levels (e.g., whole brain, lobar, Brodmann's areas, networks, specific structures, etc.). Analogously, structural studies of MCI can also be thought of as lying along a continuum ranging from the examination of whole brain changes, to region-of-interest approaches, to the most finely grained analyses which are conducted at the resolution of MR images. These various techniques will be reviewed.

Boundary Shift Integral

Boundary Shift Integral (BSI) is a structural imaging technique that examines changes in whole brain and ventricular volumes. The boundaries of the brain and ventricular surfaces are identified on serial MR images that are subsequently compared over time. Whole brain atrophy and ventricular enlargement rates correlate with disease development and progression. For example, in cognitively normal subjects, higher rates of whole brain and ventricle atrophy are associated with greater relative risk of subsequent conversion to amnesic MCI (aMCI) or Alzheimer's Disease (AD). [1]. Furthermore, individuals with aMCI who progress to AD demonstrate an accelerated rate of whole brain atrophy (and corresponding ventricular enlargement) over time compared both to people that remain cognitively normal and to individuals with aMCI who remain clinically stable.[2]

Region of Interest

Region of Interest (ROI) analyses were one of the earliest MRI-based structural techniques used to assess brain changes in aMCI. Because medial temporal lobe structures such as the hippocampus and entorhinal cortex demonstrate the earliest neurofibrillary pathology in AD, they are of particular interest in ROI analyses.[3] One of the first studies of hippocampal volume in aMCI found that degree of hippocampal atrophy predicted subsequent development of AD.[4] More recently, investigators reported greater volume loss in the entorhinal cortex than in the hippocampus in aMCI, while hippocampal volume loss is more pronounced in early AD.[5] There is also evidence that changes in hippocampal subfields are associated with disease progression. For example, the CA1 and CA2 subfields of the hippocampus are smaller in aMCI than normal controls [6], and smaller CA1 regions and subicular involvement are associated with increased risk for progression from MCI to AD[7].

Diffusion Weighted Imaging

Diffusion Weighted Imaging (DWI) is an MRI technique that is sensitive to the random motion of water molecules in brain tissue. Measures of the apparent diffusion coefficient (ADC) depict changes in how water

diffuses in the brain due to altered brain structure at the microscopic level. Water diffuses more easily in the hippocampus of patients with aMCI and AD than in cognitively normal elderly.[8, 9] This is thought to be due to the expansion of extracellular space secondary to the loss of neuron cell bodies and dendrites. Investigators have also demonstrated increased water diffusion in extra-temporal regions of aMCI patients, including the posterior occipital-parietal cortex, right parietal supramarginal gyrus, and the right frontal precentral gyrus.[10]

DWI also provides information on the integrity and directionality of white matter tracts, frequently referred to as Diffusion Tensor Imaging (DTI). DTI studies have shown that there are reductions in white matter tract integrity in multiple brain regions in aMCI including the superior longitudinal fasciculus, arcuate fibers underlying the superior frontal gyrus, superior and posterior thalamic peduncles, arcuate fibers of the superior temporal lobe at the temporal-parietal juncture, and the posterior cingulate bundle.[11-13]

¹H Magnetic Resonance Spectroscopy

Proton MR spectroscopy (¹H MRS) is another MRI technique that is sensitive to brain changes at the cellular level. With ¹H MRS, major proton containing metabolites in the brain are measured during a common data acquisition period. The metabolite N-acetyl aspartate (NAA) is a marker for neuronal integrity while myo-inositol (mI) is predominantly present in astrocytes and may be a possible marker for glial activity. The posterior cingulate is commonly studied because it is a limbic cortical region involved fairly early in AD.[3] The metabolite changes in aMCI are generally intermediate between normal elderly and patients with AD[14], and correlate with the rate at which aMCI progresses to AD.[15] More specifically, mI levels correlate with performance on the Auditory Verbal Learning Test and Dementia Rating Scale in patients with aMCI.[16]

Voxel-Based Morphometry

Voxel-based morphometry (VBM) is an automated analysis technique that examines changes in gray matter density over the entire brain at the voxel level. Most VBM studies of aMCI reveal gray matter loss in medial temporal lobe structures.[17-19] Additional areas affected include temporal, parietal and frontal regions, thalamus, hypothalamus, and the cingulate gyrus. However, not all studies show the same degree of involvement in these extra-temporal brain regions. Longitudinal VBM studies of aMCI demonstrate that, as individuals progress clinically, gray matter loss spreads from medial temporal regions to the inferior temporal lobe, temporoparietal association cortex, and frontal regions. [19-21] Among those with non-amnesic MCI, subjects with predominant language impairment showed gray matter loss in the left anterior inferior temporal lobe while those with attention/executive impairment showed gray matter loss in the hypothalamus and basal forebrain.[22]

Functional imaging

As the name implies, functional imaging techniques are used to assess different aspects of brain function, typically by examining blood flow and glucose metabolism. These techniques will be discussed in turn followed by recent findings in amyloid imaging which does not technically measure brain ‘function’ per se, but rather enables detection of amyloid plaques in vivo.

Arterial Spin Labeling

Arterial Spin Labeling (ASL) is a relatively new MR imaging technique that uses magnetically labeled water in arterial blood to measure cerebral blood flow (CBF). ASL offers several advantages over SPECT and PET (described later) in that it is non-invasive, does not require radiation exposure, and ASL images (which are low resolution) can be aligned with high resolution anatomic images that are acquired during the same scanning session for precise anatomic localization of blood flow changes. ASL studies of aMCI show

evidence for decreased cerebral blood flow in the right inferior parietal lobe[23], posterior cingulate and precuneus[24] relative to cognitively normal elderly.

Functional Magnetic Resonance Imaging

Functional magnetic resonance imaging (fMRI) examines changes in blood oxygenation (i.e., an indirect measure of neuronal activation) as subjects engage in cognitive tasks. The majority of fMRI studies of aMCI use memory tasks to study functional changes. Some studies of hippocampal activation during episodic memory tasks reported decreased hippocampal activation during encoding [25-29] while others found increased hippocampal activation.[30-32] Results of fMRI activation in extra-temporal regions during memory tasks in aMCI are also mixed, with evidence for decreased activation in the frontal cortex and posterior cingulate gyrus [27, 29, 33], and increased activation in the precuneus and posterior cingulate gyrus. [29]

Some of the variability in fMRI results in aMCI is likely due to the specific demands of the memory task as well as how aMCI is defined clinically. For example, in one study less impaired aMCI subjects showed greater activation compared to controls, while more impaired aMCI subjects showed less activation. Furthermore, the more impaired aMCI subjects' activation levels were similar to patients with mild AD.[34] Of note, objective memory impairment was not required for the aMCI subjects included in this study. These same investigators followed a group of very mild aMCI subjects and found that greater task related hippocampal activation at baseline correlated with a greater degree and rate of cognitive decline over a mean of 5.9 years, suggesting that fMRI may provide a biomarker for individuals at higher risk for future cognitive loss.[35]

Investigators have also used fMRI to examine the effects of acetylcholinesterase inhibitors on brain function in aMCI. Increased frontal activity was observed during a working memory task in individuals with aMCI who were on stable doses of donepezil relative to non-medicated controls.[36] After six days of taking galantamine, an aMCI cohort showed increased activation relative to their

baseline in the left prefrontal areas, anterior cingulate, left occipital areas, and left posterior hippocampus during a face encoding task and increased activation in the right precuneus and right middle frontal gyrus during a working memory task.[37]

Another way to potentially understand differences in brain function in aMCI is to examine the Default Mode Network (DMN). This network can be detected while subjects rest quietly during scanning. Brain regions involved in the putative DMN include the inferior parietal lobule, posterior cingulate/retrosplenial cortex, and medial prefrontal cortex. There is growing evidence that individuals with aMCI and early AD experience alterations in DMN activity.[38-40] Since no input from the subject is required, studies of the DMN may avoid the potential confounding of differential response rates between patient groups and normal elderly as a function of task difficulty level.

Single Photon Emission Computed Tomography

Single photon emission computed tomography (SPECT) also measures CBF or perfusion, but unlike ASL, requires injection of a radioactive tracer. Among those with aMCI who progress to AD, one study showed that reduced CBF in the posterior cingulate gyrus was present at least two years before patients met criteria for dementia.[41] In another longitudinal SPECT study, individuals with aMCI who progressed to dementia had reduced CBF in the hippocampus, parahippocampus, parietal lobe, and brainstem as well as increased CBF in the cingulate gyrus and frontal and occipital lobes.[42] However, the mean age of the aMCI group in this study was relatively young (61.6 at baseline); thus, these results may not generalize to older patients.

Fluorodeoxyglucose Positron Emission Tomography

Fluorodeoxyglucose Positron Emission Tomography (FDG PET) uses glucose tagged with a radioactive tracer to measure local cerebral metabolic rate of glucose uptake. The spatial distribution of the decrease in glucose metabolism in patients with aMCI is similar to but less pronounced than in patients with AD. Individuals with aMCI show hypometabolism in limbic structures including

the hippocampus, posterior cingulate, mamillary bodies, and medial thalamus.[43] There is also evidence for involvement in temporal and parietal association cortices in addition to limbic structures.[44] As with other imaging modalities, the metabolic alterations observed with FDG PET correlate with disease development and clinical progression. For example, reduced hippocampal glucose uptake in normal elderly correlates with later cognitive decline.[45] Among individuals with aMCI, those who convert to AD show lower FDG uptake in the right temporoparietal cortex than those who do not.[46]

Amyloid Imaging PET

Amyloid imaging represents one of the most significant and promising advances in dementia imaging research. It is well established that amyloid plaques and neurofibrillary tangles are the hallmark pathologic features of AD. The most widely used in vivo amyloid labeling tracer is the PET ligand Pittsburgh Compound B (PiB).[47] Studies using PiB show that the highest amyloid density in AD occurs in the prefrontal cortex, lateral temporoparietal cortex, posterior cingulate, precuneus, and striatum.[47-49]. On average, the amount of PiB binding in aMCI falls between that observed in cognitively normal elderly and AD. Of those aMCI subjects who are clearly PiB positive, the topographical distribution of the binding pattern is essentially identical to subjects with AD.[50-52] A recent study showed that combining PiB uptake values with hippocampal volumes in aMCI and AD may provide better diagnostic classification than using either method alone.[53]

Summary

Structural and functional imaging techniques provide converging evidence for involvement of multiple brain regions in aMCI. The most frequently implicated areas include the medial temporal lobe, the posterior cingulate, and temporo-parietal regions. However, correlations between imaging results and diagnoses are not perfect in all instances, thus investigators are beginning to examine the utility of multimodality imaging to increase sensitivity and specificity in the hopes of providing a more

meaningful depiction of the temporal sequence and distribution of pathology in aMCI and AD. Some of the variability in the current imaging studies likely reflects differences in how investigators operationalize aMCI, whether subjects are drawn from epidemiologic vs. memory clinic samples, and the specific imaging technique(s) used.

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President's Message
Continued from page 1

professional comrades in other areas of psychology.

While Division 40 has over 4,000 members and affiliates, APA has about 150,000 members. APA is the largest and most powerful group of organized psychologists in the world. The influence of the Association on national issues is immense. We benefit from the Association's advocacy efforts and relationship with Capital Hill. Guidelines for our teaching, practice and research have their origins and mechanisms of enforcement within the Association. The Association largely develops the agenda of the day in psychology that guides our direction from funding to practice.

Still, our Association and the work that it does for us are only as good as its members make it. If we do not work with our Association, it cannot work for us. If we choose do not participate in setting policy, then we have no right to complain about the policy that is set for us. If we want a voice in shaping psychology, then we must show up at the table and contribute.

So how can you be a better citizen of APA? You can:

1. Encourage your students, early career colleagues and peers to become members of APA.
2. Learn how the governance of APA works (see the section on Structure under <http://www.apa.org/governance/>).
3. Put your name forward for consideration in APA governance roles by (a) contacting the Chair of our Division's Committee on APA Relations (currently Dr. Deborah Attix; koltai@duke.edu); (b) contacting relevant Boards or Committees within APA (<http://www.apa.org/governance/>); and contacting members of the Division's Executive Committee (www.div40.org).
4. Seriously consider invitations to participate in APA governance activities when they come your way. It is very difficult to get on most APA boards and committees and, thus, it is quite an honor to be selected and prestigious to represent D40 when this occurs.
5. Give money to the APA's Practice Organization to support lobbying work on our behalf.
6. Be mindful in our professional interactions that

the professional infrastructure that supports the mission of our Division is aligned not only with our identities as neuropsychologists but with our primary identities as psychologists.

To those of you who are already participating in this work, we owe you a great debt of gratitude. To those who are contemplating giving of your time, talent or resources, let us hear your voice.

Thomas A. Hammeke, PhD, ABPP-CN
President, Division 40

APA Council of Representatives Report

Division 40 Council Representatives

Linas A. Bieliauskas, PhD, ABPP; Jennifer J. Manly, PhD,
Joel E. Morgan, PhD, ABPP; Barbara C. Wilson, PhD, ABPP

Every August and February, the 175 members of the Council of Representatives and the Board of Directors convene to discuss, debate, and vote on the business and budget of APA. Although the agenda of each of these biannual meetings is packed, the February meetings seem to provide a more lively atmosphere than the August meeting - perhaps because the year's budget is approved in the winter and because the convention is not going on simultaneously, leaving more time for Caucus meetings and discussion on the floor.

The February 2008 Council Meeting was no exception. Here is a brief and Division 40-centric summary of the other events of the meeting:

Providing a Voting Seat on Council for the Four National Ethnic Minority Psychological Associations

This was the issue that motivated much of the activities of the February meeting. Some background: in the Fall of 2007, a Bylaws amendment was sent to the APA Membership that would add new seats on council for the four ethnic- minority psychology organizations: the Asian American Psychological Association, the Association of Black Psychologists, the National Latina/o Psychological Association, and the Society of Indian Psychologists. The amendment just narrowly failed; while 63.29% of the voting members approved, a two-thirds majority is needed to change APA bylaws. One of the more frustrating aspects of this vote was that only about 11% of APA membership voted on this Bylaws change.

The failure of this amendment was at variance with the proposal for Bylaws amendment which was nearly unanimously approved by Council. There seemed to be disconnect between the issues of importance in Council and the actions of the membership. The Council voted to place the Bylaws amendment on the ballot again, along with inclusion of more information and education about this issue for the membership. In the long term, the Council did some soul searching (via discussion on the floor and breakout group discussions) about how we can more effectively engage APA members who may or may not be Division members, and how best to invigorate the conversation between Council and those we represent.

Adding the seats for the Four National Ethnic Minority Psychological Associations would be outside the regular council representation apportionment process; no current or future division or state representation would be at risk for losing their seats if the Bylaws amendment passes. You will hear more about this issue in the coming months.

State of the APA Budget

The CEO of APA, Dr. Norman Anderson, reiterated that the budget of the Association is narrowing and that requests for funds from directorates, committees, boards will not be able to be fulfilled in as high a rate as in prior years. Standing boards and committees and directorates have been asked to carefully prioritize requests that would affect the budget.

Division 40's own Paul Craig, who is now the APA Treasurer, led a discussion of the importance of balancing the APA budget and rainy day planning. The council voted to reaffirm the "live within our means" policy by adding to the Association rules 1) the goal that the surplus budget each year will be between 1% to 2% of the budgeted revenues, and 2) that this goal be assisted by increasing the cash flow from building operations (APA owns real estate in Washington DC) from 2.5 million to 3.5 million beginning in 2009. The

increase in cash flow would not change any of the long-term investment policies or procedures of the association.

Use of 2008 Council Discretionary Funds

Council voted to support a number of activities with its discretionary funds, some of which should be of interest to Div 40 members:

- A task force to study council representation.
- A three-day conference to provide quantitative training and support for students from underrepresented groups.
- The 2008 APA National Conference on Undergraduate Education in Psychology. The conference will be held June 22-27 at the University of Puget Sound in Tacoma, Wash.
- An APA Presidential Task Force on the Psychological Needs of U.S. Military Service Members and their Families.
- A task force to develop an APA designation process for postdoctoral psychopharmacology education and training programs.
- A meeting of the National Standards for High School Psychology Working Group and the National Standards Advisory Panel.

Web re-launch update

A large chunk of the APA budget in 2007 went to fund an overhaul of www.APA.org. Your Council Reps were interested to hear that the APA website ranks second for mental health web sites after NIMH. Given this level of potential use, and as APA's "calling card" to the public, the website must be state of the art – therefore there is a great deal of work to be done. The complete rollout of the website is due in early 2009. Division 40 members should know that at the Annual Convention in August in Boston there will be a web re-launch booth in the convention exhibit hall where you can see the partial preview of the new site and provide the re-launch team with feedback.

Other issues of interest to Division 40 members

The Council approved an increase in the Interdivisional Grant Program funds to \$25,000 per year for each of three years (2009-11). Division 40

has benefitted from interdivisional grants in prior years; our success with this will hopefully keep pace with the growth in funds set aside for these efforts.

There was a fascinating discussion regarding the formation of a new division of Qualitative Inquiry. Ultimately, the request for a new division failed because it did not receive the two-thirds majority votes necessary to pass. The discussion on the floor included statements from Division 5 (Evaluation, Measurement, and Statistics), and their Executive Board offered the petitioners a place in their division. In similar news, and ending a candidate process that began in 2006, Council approved Division 56 (Trauma) as a permanent APA division.

Council voted to adopt the Resolution on the American with Disabilities Act, which reaffirms APA's policy on disabilities and strengthens the association's ability to pursue disability-related activities at state and federal levels.

President-elect Dr. James Bray, announced the establishment of a Task Force to plan a psychology practice summit, with Dr. Carol Goodheart as co-chair of the summit.

Finally, the Council voted to send a Bylaws amendment to the full APA membership to make the current APAGS member of the Board of Directors a voting member of the Board.

Division 40 Program Summary 2008 APA Convention

APA Convention. Division 40 has assembled a diverse and exciting program at the annual APA convention in Boston, August 14-17. The keynote and invited speakers are well known leaders in neuropsychology, and will address topics including pediatric, adult, and professional issues. A panel of invited speakers will present on a wide range of topics. These include Dr. Daniel Schacter (“Constructive Memory: Episodic Simulation of Future Events”), Dr. Jennifer Vasterling (“Neuropsychological Outcomes of War Zone Deployment”), and Dr. John DeLuca (Can We Rehabilitate Cognitive Rehabilitation After Brain Damage in Humans?) and nine other important scholars. In addition, there will be two poster sessions and several symposia and workshop sessions covering a range of topics. Special sessions will be included to honor the awarded submissions and new Fellows of the division. The program schedule appears below. For any questions about the program, please contact the program chair, Dr. Michael Basso (michaelbasso@utulsa.edu).

Thursday, August 14, 2008

- 7:00 – 9:50 Executive Committee Meeting (Hammeke)
- 8:00 – 9:50 Workshop: Medicare Participation, Billing, and Fraud's Red Flags (Georgoulakis, Moore, Pedulla)
- 10:00 – 11:50 Symposium: Evaluating and Negotiating Conflicts in Neuropsychological Supervision (Harris & Luis)
- 10:00 – 11:50 Symposium: Becoming a Clinical Neuropsychologist: From Graduate School to Board Certification (Strang, Weber, Shear, Donders, Rey-Casserly, Ris)
- 12:00 – 12:50 Invited Speaker: Dr. Wilfred van Gorp “Neuropsychological Predictors of Return To Work in HIV Infection”
- 1:00 – 1:50 Invited Speaker: Dr. Robert Hanlon, “Criminal Forensic Neuropsychology: Murder or Neuropsychology of Murder.”
- 2:00 – 2:50 Invited Speaker: Dr. Daniel Marson, “Assessment of functional change in patients with mild cognitive impairment and dementia: Research and clinical practice.”
- 3:00 – 3:50 Invited Speaker: Dr. John DeLuca, “Can we Rehabilitate Cognitive Rehabilitation after Brain Damage in Humans?”

Friday, August 15, 2008

- 8:00 – 8:50 Invited Speaker: Dr. Timothy Ahles, “An Interdisciplinary Approach to the Study of Cognitive Issues in Women with Breast Cancer”
- 9:00 – 9:50 Invited Speaker: Dr. Jennifer Manly, “Cognitive Assessment of Ethnic Minorities: Deconstructing Race and Education”
- 9:00 – 9:50 Poster Session – Division 40
- 2:00 – 2:50 Invited Speaker: Dr. Daniel Schacter, “Constructive Memory: Episodic Simulation of Future Events”
- 2:00 – 3:50 Symposium: Ethical Assessment of Linguistic Minorities: Cultural Competence and Interpreter Use (Moore, Wong, Judd, Morere)
- 3:00 – 3:50 Invited Speaker: Dr. Jennifer Vasterling, “Neuropsychological Outcomes of War Zone Deployment”
- 4:00 – 4:50 Early Career Award (Woods)
- 4:00 – 4:50 Discussion: Health Disparities in Neuropsychology: Funding, Training and Research

(Mason, Byrd, Mason)
5:00 – 5:50 Blue Ribbon Awards

Saturday, August 16, 2008

8:00 – 9:50 Symposium: Creating an Ecologically Valid Battery of Neuropsychological Tests (Liljedahl, Obolsky)
9:00 – 9:50 Invited Speaker: Dr. Russell Barkley “The Executive Functions and ADHD: Conceptual and Diagnostic Issues”
10:00 – 10:50 Invited Speaker: Dr. Jeffrey Knight Issues in Conceptualizing and Assessing TBI and PTSD in Polytrauma Veterans
10:00 – 11:50 Symposium: Findings in Executive functioning in ADHD and Pediatric Bipolar Disorder (Fried, Petty, Henin, Doyle, Grodzinsky)
11:00 – 11:50 Invited Speaker: Dr. Neil Pliskin “Is Electrical Injury a Closed Head Injury?”
12:00 – 12:50 Discussion: Population Screening for TBI in Post-Deployed OIF/OEF Veterans: A Double-Edged Sword (Belanger, Vanderploeg, Collins)
12:00 – 12:50 Poster Session
1:00 – 1:50 Invited Speaker: Dr. Marlene Oscar Berman, “Alcoholism's effects on brain and behavior”
3:00 – 3:50 Presidential Address: (Hammeke)
4:00 – 4:50 Business Meeting
6:00 – 7:50 Social Hour

Sunday, August 17, 2008

8:00 – 9:50 Fellows Award Presentations
9:00 – 9:50 Student Awards
10:00 – 11:50 Symposium: Do drugs of abuse produce cognitive rigidity? Co-sponsored with Division 28 (Lynch & Grant)
12:00 – 1:50 Symposium: Test Norms in Aging Studies: Can we define normal? (Barr, Santi, Manly, Marcopulos; Rentz, Smith)

**APA Division 40
Program Committee Members 2008**

Michael Basso <i>2008 Chair</i>	Tara Lineweaver
Steven Paul Woods <i>2008 Co-Chair</i>	Aaron Malina
James H. Baños	Paul Malloy
Heather Gail Belanger	Stephen Miller
Rishi Bhalla	Chris Morrison
Thomas G. Bowers	David V. Nelson
Adam Brickman	Barton Wayne Palmer
Dennis Combs	Michael W. Parsons
Sally Frutiger	Robert Harris Paul
Keith Hawkins	Robert Perna
Robert Dallas Jones	Gina Rehkemper
Tricia Zawacki King	Douglas Whiteside
Eric Larson	Christina Wilson
Michael Lavoie	Brian P. Yochim

Association for Neuropsychology Students in Training (ANST) Update

John Strang, ANST Chair
Erica Luboyeski, ANST Programming Officer
Emily Vaughn, ANST Communications Officer

ANST is the student association within the American Psychological Association's (APA) Division 40. If you are a student affiliate member of Division 40, you are automatically a member of ANST. ANST provides several ways of connecting with neuropsychology student colleagues:

ANST listserv: Joining the ANST listserv is an excellent way to build community with student neuropsychologists from around the country. With over 400 subscribers including students, interns, postdoctoral fellows, and professional and academic neuropsychologists, we have a wealth of resources at hand. Of late, we have encouraged focused discussions by presenting monthly topics. Recent discussions include student internship experiences, the postdoctoral match process, and issues relating to family life and training. To join the list, send an email to

LISTSERV@LISTS.APA.ORG

In the body of the message (not the subject line), type:
SUBSCRIBE DIV40ANST John Doe (use your own name)

ANST Education Sessions: ANST joins with the Association of Postdoctoral Programs in Clinical Neuropsychology (APPCN) and the American Board of Clinical Neuropsychology (ABCN) to offer educational sessions at the annual APA Convention and International Neuropsychological Society (INS) meeting. These popular sessions provide students the opportunity to hear leaders in the field discuss the stages of becoming a clinical neuropsychologist. ANST is grateful to Paula Shear, PhD, Robin Hanks, PhD, Russell Bauer, PhD, and Linas Bieliauskas, PhD for outstanding presentations at the 2008 INS Education Session. Our next program will be at the 2008 APA Convention in Boston, 10-12am on Thursday, August 14th. We hope you can attend!

ANST Chapter Affiliate Program: The Chapter Affiliate Program was developed to coordinate communication between ANST and students across the country. Students serving as a Chapter Representative act as a liaison between students in their school/program and the ANST executive committee to meet the following needs: (1) assist the ANST committee in disseminating important information about training and professional issues relevant to the field of Neuropsychology, as well as to provide a concrete mechanism for feedback between students and the governing bodies of Division 40 and ANST, (2) ensure that students at all levels of training in neuropsychology are well informed of education and career opportunities, (3) provide a regular forum for students to discuss, debate, and provide feedback on a variety of issues that can be shared with students across the country.

Students interested in becoming a Chapter Representative should visit the ANST website, complete the chapter materials, and forward their information to Erica Luboyeski at d40anst@yahoo.com. We look forward to hearing from you!

ANST website: Our website (<http://www.div40.org/ANST/index.html>) offers resources for neuropsychologists in training, including instructions for joining relevant listservs, educational venues, and details regarding the Chapter Affiliate Program.

ANST exists to support and represent the students of Division 40. If you are interested in participating in ANST or have questions or ideas, please let us know by emailing us at d40anst@yahoo.com.

Science Advisory Committee

John Lucas, PhD, ABPP, Chair

The Science Advisory Committee (SAC) facilitates the scientific mission of Division 40 by communicating and promoting the integration of scientific goals within the Division, within APA, and across professions. Specific goals of the SAC include promoting the study and application of knowledge regarding brain-behavior relationships, advocating for the recognition of D40 as a science division of APA, recognizing and encouraging student research in neuropsychology, and addressing scientific issues raised by the membership.

Database Project. The SAC is nearing completion of a web-based directory/database for the Div40 Science membership. Division members who are engaged in funded research will be invited to join the database and enter information about their area(s) of research expertise. This directory is intended to assist members who are interested in sharing their expertise with the APA Science Directorate by serving on panel discussions, participating in work groups, providing congressional testimony, interfacing with media, etc. A beta-version of the database interface and functionality is currently being tested and is expected to go live online during Summer 2008.

NIH Reviewer List. The SAC responded to a request from the APA Science Directorate for names of potential peer reviewers for NIH study sections. After posting announcements across neuropsychology listservs, a list of 12 self-nominated Div40 members was compiled and forwarded to Pat Kobor.

Board of Scientific Affairs (BSA) Meeting. Dr. Bonny Forrest attended the Fall BSA meeting as SAC liaison. Issues raised during that meeting of potential interest Div40 members include:

- 1) *Support for psychology students pursuing science careers.* APA is interested in developing programs to support advance graduate students in science at the annual convention. Div40's new student travel grants program is an example of one such effort.
- 2) *Re-engaging Scientists at the APA Convention.* Initiatives are being discussed that would make APA and the convention more attractive to scientists, including changes to convention programming, timing of the program, and a changes to the APA dues structure. Dr. Forrest represented Div40 at a Task Force meeting on this topic on September 15-16, 2007 in Washington, DC.
- 3) *A Statement on Observers and Third Parties in Psychological Testing and Assessment* was approved by the BSA and will be sent to Council for final approval.

FDA/Industry Roundtable. Div40 sponsored a Roundtable Discussion on the role of neuropsychological assessment in clinical trials following the conclusion of the INS meeting, on Feb 9-10, 2008. This event was organized and chaired by Dr. Ronald Lazar of Columbia University, with the assistant of Div40 SAC representative Dr. Ramona Hopkins. Discussants included Drs. R. Bilder, M. Butters, J. Festa, R. Hopkins, D. Loring, C. Meyers, A. Troster, & M. Sano. FDA and industry representatives included Drs. B. Albala (Shionogi USA), B. Dunn (FDA drug), D. Farrar (Thoratec), J. Fischer (Takeda), and J. Swain (FDA device). The benefits and burdens associated with neuropsychological assessment in FDA/industry trials were reviewed and issues related to test choice, administration, and analyses were discussed. The conclusions of this meeting will appear in a forthcoming position paper.

Division 40 Awards

Congratulations to the following 2008 award winners:

2008 Robert A. & Phyllis Levitt Early Career Award:

Steven Paul Woods, PsyD
Assistant Professor (In Residence)
Department of Psychiatry
University of California, San Diego

2008 Benton-Meirer Scholarships

Utaka Springer
Department of Clinical & Health Psychology
University of Florida

Bonnie Sachs
Department of Clinical & Health Psychology
University of Florida

Division 40 Grants Program

In 2007, Division 40 created a new grants program to support the scientific and professional development of early career neuropsychologists and advanced neuropsychology graduate students. The inaugural cycle of this program awarded two competitive research grants in the amount of \$10K each to applicants proposing to collect pilot data with the aim of securing future extramural funding. In addition, two student/postdoc travel grants in the amount of \$2500 each were awarded to graduate students to support travel to the 2008 APA Convention in Boston, MA. Congratulations to the following grant recipients:

Junior Investigator Pilot Grant Recipients

Brianne Bettcher, PhD
Temple University
Title: *Empirically-based interventions for error monitoring deficits in dementia*

Jessica Chapin, PhD
Cleveland Clinic
Title: *Functional significance of fMRI memory reorganization in patients with medically-intractable temporal lobe epilepsy*

Student Travel Grant Recipients

Heidi Bender
New York University

John Den Boer, PhD
Barrow Institute

Science Advisory Committee (SAC) 2008 Awards for APA Convention Submissions

SAC Cognitive Neuroscience Award

James F. Sumowski, PhD
Title: Functional Neuroimaging of Cognitive Reserve in Multiple Sclerosis

SAC Applied Neuroscience Award

Kristen L. Votruba, PhD
Title: Spaced Versus Massed Practice in Aphasia Therapy

Harcourt Assessment Awards

Katie Finley, MA
Title: Interchannel Relationships for Emotional Perception Across the Life Span

Lisa M. Moran, BS
Title: Apolipoprotein E4 in Pediatric Mild Traumatic Brain Injury

Early Career Psychologist Committee

Deborah Weber, PhD, Chair

Early Career Psychologists (ECPs), defined as being within seven years of the receipt of their doctorate degree, have increased significantly (nearly 4%) in APA during the last year. Additionally, Division 40 currently has the second highest number of Early Career Psychologists in APA, and the numbers are increasing. To help meet the needs of ECPs within Division 40, the Early Career Psychologist Committee was recently formed. The members include:

- Deborah Weber, Ph.D. - a pediatric neuropsychologist and the current APA Science Policy Fellow
- Karin Hoth, Ph.D. - a neuropsychologist at the National Jewish Medical and Research Center and University of Colorado Health Sciences Center
- Barry R. Ardolf, Psy.D.- a neuropsychologist at the Dallas VA Medical Center
- Christy Emmons, Psy.D. - a pediatric neuropsychologist from Children's Hospital of Pittsburgh
- Heidi Bender, Ph.D. – a postdoctoral fellow in neuropsychology at NYU Comprehensive Epilepsy Center and winner of a D40 Career Development Award

In order to ensure that clinical neuropsychology continues to be a leading specialty of psychology, an active Early Career Psychologist constituency within Division 40 and APA is essential. One of the first tasks of the new Division 40 Early Career Psychologist Committee is to identify current ECP members within the Division and to conduct a needs assessment survey in order to identify and prioritize issues relevant to ECPs in neuropsychology. The newly formed Division 40 ECP Committee will seek to provide networking opportunities for professionals to come together to discuss important training, practice, and research issues in neuropsychology. Additionally, the ECP Committee will seek to support and encourage finding and/or creating opportunities that further the professional development and leadership potential of ECPs in the field of neuropsychology.

The Division 40 Early Career Psychologist Committee is also working closely with the APA Committee on Early Career Psychologists (CECP). One of the goals of CECP is to ensure that the unique concerns and needs of our diverse constituency are well represented in their discussions, activities, and future APA elections. Given the changing demographics of the APA membership, we believe it is vital for all APA divisions, boards, and committees to work together to involve ECPs in policy and governance decisions of the APA as well as to help ECPs establish an identity within our professional community. Additionally, Division 40 is represented on the Early Career Psychology Network (ECPN) by the chair of the Committee, Deborah Weber. The ECPN consists of one ECP representative from each of the Divisions and State, Provincial and Territorial Psychological Associations (SPTA). The forum is designed to: discuss priorities and programming ideas; share strategies to increase recruitment, retention, and involvement of ECPs in professional associations; provide feedback on CECP initiatives and activities; foster collaboration between APA Divisions and SPTAs; and disseminate information about opportunities and resources for early career psychologists

If you are interested in finding out more about how you can be involved in Division 40 or APA please feel free to contact me at deb_weber@yahoo.com to discuss these issues further or to discuss opportunities to collaborate on activities of concern to ECPs.

Additionally you can join the CECP Early Career Listserv, a forum dedicated to the needs of early career psychologists that includes ECPs from across APA Divisions and the State and Provincial Psychological Associations. To subscribe to the list, send an email to listserv@lists.apa.org with the following text in the body of the message:

SUBSCRIBE EARLYCAREER (example: **SUBSCRIBE EARLYCAREER** Robert Smith). More information about the CECF can be found at <http://www.apa.org/earlycareer> including a brochure on Building Bridges: Opportunities for Learning, Networking, and Leadership at <http://www.apa.org/earlycareer/Building%20Bridges%20Brochure.pdf>

**Public Interest Advisory Committee
(PIAC) Update**

Doug Johnson-Greene, Ph.D., ABPP, Chair

The primary mission of the Public Interest Advisory Committee (PIAC) is to increase public awareness of Division 40 and the practice of clinical neuropsychology. Through the work of this committee, we hope that the public sector will become more informed about neuropsychology, and reciprocal communication will be enhanced. We also serve as a resource to the membership through educational, mentoring, and consultative services.

PIAC is comprised of the chairs and members of three subcommittees; Ethnic Minority Affairs (EMA), Women in Neuropsychology (WIN), and Ethics; Liaisons and Monitors to eight APA Public Interest Directorate Committees, and special advisors to PIAC. Those Division 40 members who are interested in any of these committees or posts are encouraged to contact the PIAC Chair. We have a particular need currently for new members for the Ethics Committee, which will be chaired by Mike Basso in August 2008. Recent highlights for PIAC since the last newsletter include the following:

APA Consolidated Meetings: Six PIAC liaisons will be attending the spring consolidated meeting in Washington D.C. (March 2008). During the three-day conference liaisons will be meeting with their respective APA committees to provide guidance and advice on issues of importance to neuropsychology and our division.

Neuropsychology Brochures: By the time you receive this newsletter the Division 40 website will have Spanish and French translations available of our Pediatric and Adult Neuropsychology brochures.

Can you say Neuropsychologie Clinique?

WIN and EMA: The Women in Neuropsychology (WIN) Committee under the leadership of Cheryl A. Luis, Ph.D., ABPP and the Ethnic Minority Affairs (EMA) Committee under the leadership of Desiree Byrd, Ph.D. continue to provide mentoring and educational events at INS and APA that have been extremely well attended this year. We owe Cheryl, Desiree, and their committee members our gratitude for their considerable effort on behalf of the Division.

**Publications & Communications (P&C)
Committee**

William B. Barr, PhD, ABPP, Chair

The P&C Committee is responsible for the operations of the Division 40 website, Newsletter 40, and the division's archives. Recent work on the website has included development of an interactive list of training programs and a new site for division members with research expertise. In coming months, the committee's efforts will focus on updating our Division Archives. Division members with interest and/or expertise in website development, journalism, or archiving are invited to participate in this committee.

Nominations for Division 40 Fellows Sought

APA Fellow status is an honor that recognizes evidence of unusual and outstanding contribution to or performance in the field of psychology that has had impact beyond a local, state, or regional level. We in Division 40 view election as a Fellow as an honor not only for the individual but for the Division as well, and we welcome the nomination of outstanding division members for this distinction.

Nominations of Initial Fellows:

The nomination procedure for a Division 40 member applying for Fellowship requires the completion and submission of a "Uniform Fellow Blank," which is available on the Division 40 website as a downloadable pdf file. Individuals who are current APA Fellows and who can address the nominee's accomplishments in the area of Neuropsychology need to complete endorsement letters, written within the calendar year of nomination. A minimum of three (3) letters is required. Requisite supporting materials include a current vita, a listing of the nominee's publications with "R" for refereed indicated, and the nominee's self-statement setting forth the accomplishments that warrant Fellow status in Division 40. Division 40 strongly encourages women and minority members to apply for Fellowship.

Nominations of Current Fellows:

APA Members who are already Fellows in other Divisions may also become Fellows in Division 40 through a streamlined process. If another Division supports the nominee, supporting documentation from that Division should be submitted, clearly indicating the name of that Division and a contact person. Nominees are required to submit a current Curriculum Vita, a listing the nominee's publications with "R" for refereed indicated, and the nominee's self-statement setting forth the accomplishments that warrant Fellow status in Division 40. Once the Fellows Committee, Board of Directors, and Council of Representatives have approved an APA Member for Fellow status in one division, they do not need

further approval from APA to become a Fellow in additional Divisions.

All nomination materials should be completed and submitted to the Division's Fellowship Committee (not APA Central Office) by December 12, 2008, and supported nominations will be submitted to the APA Membership Committee for the February deadline. Successful nominations are announced in August following the APA annual meeting. Nomination materials can be obtained online and questions should be directed to: Ida Sue Baron Ph.D., ABPP; Chair, Division 40 Fellows Committee, 10116 Weatherwood Court; Potomac, MD 20854; TEL: (301) 340-2119 (office); FAX: (301) 340-2119; E-mail: ida@isbaron.com.

ANNOUNCEMENT

**New Funding Cycle for
Scientific Development Grants**

Division 40 is pleased to announce funding opportunities to support the scientific and professional development of early career division members. One Junior Investigator Pilot Grant in the amount of up to \$10,000 is available to applicants within 7 years of obtaining their doctoral degree. This award is intended to support the collection of preliminary data for the purpose of securing subsequent extramural funding in a line of neuropsychological inquiry. In addition, one student travel grant in the amount of up to \$2,500 is available to neuropsychology graduate students or first-year postdoctoral residents to attend the 2009 APA convention in Toronto.

Deadline for receipt of applications for both awards is September 1, 2008. Further information regarding eligibility requirements, application materials, and award criteria is available on the Division 40 website at: <http://www.div40.org>. Applicants may also contact John A. Lucas, PhD, Chair, Div. 40 Scientific Advisory Committee, at jlucas@mayo.edu for more information

**APA Division 40 Executive Committee
Meeting Minutes**

Friday, August 17, 2007 6:45-9:50 AM
San Francisco Marriott Hotel, Walnut Room
San Francisco, CA

Present: Drs. Barr, Basso, Bauer, Bobholz, Chiaravalloti, Cullum, Donders, Espy, Hammeke, Johnson-Greene, Lucas, Manly, Morgan, Pliskin, Rosenstein, Shear, Weber, Wilson, Yeates

Invited Guests: Drs. Glenn Smith (Incoming Division 40 President-Elect), Cathi Grus (APA Education Directorate), Randy Phelps (APA Practice Directorate), Elizabeth Hoffman, Stephanie Johnson and Virginia Holt (APA Science Directorate), Ms. Nathalie Gilfoyle (APA General Counsel), Mr. Tom Erickson (President, Board of Certified Psychometrists), Ms. Gail Rosenbaum (Representative, National Association of Psychometrists)

1. The meeting was called to order by Dr. Yeates at 6:45 AM. He thanked the Division 40 Executive Committee (EC) and the committee chairs for attending this morning's meeting and for their work in the past months.
2. Declaration of Conflicts of Interest: It was announced that Dr. Donders has a potential conflict of interest for certain discussions as he is Vice President of APPCN; Drs. Lucas, Barr and Bobholz are members of the ABCN board; Dr. Rosenstein is a member of the AACN board; Dr. Hammeke is a past president of ABCN; Drs. Hammeke, Bauer, and Manly are editors or associate editors of journals sponsored by other neuropsychological organizations. These individuals will recuse themselves from any discussions and votes for which these conflicts of interest are relevant.
3. Secretary's Report: The minutes of the February 2007 EC meeting were reviewed and approved. The log of votes that the Executive Committee took by e-mail ballot between February 2007 and August 2007 was approved and will be appended to the minutes of the present EC meeting.
4. Treasurer's Report: Dr. Donders reported that

year-end statements from APA were received in January and confirmed that Division 40 ended FY2006 in a solid financial position, with an ending Fund Balance was \$321,227. This represents a net gain of \$24,574 over the course of the year (starting balance on 01/01/2006 was \$296,653). Although the division is clearly "in the black," it still needs to be realized that the surplus has shrunk as compared to previous years (e.g., \$79,314 in FY2005), necessitating continued judicious use of available funds. Financial statements available through May 2007 indicate an interim fund balance of \$418,762. Note that considerable expenses will be incurred in August related to travel, awards, and stipends related to the annual convention. Also, note that there has not yet been any request for funds yet for some fairly large targeted expenditures (e.g., Membership brochure translations, SAC website) but that the Division is still committed to those projects. Officers and committee chairs have continued to be appropriately conservative in using travel funds.

The EC voted to approve a FY2008 budget totaling \$143,750 and to approve carryover costs from FY2007 to FY2008 for Scientific Advisory Committee line items related to the database project, grant awards, and the ACRM conference. Because membership income has been relatively stable, the Division has decided not to increase dues for FY2008.

5. Update on Journal Neuropsychology: Dr. Yeates reported that he and Drs. Shear and Bauer had participated in several conference calls with Dr. Stephen Rao, incoming editor-in-chief of the journal Neuropsychology, to discuss the possibility of making this publication an official Division 40 journal. These conference calls clarified the conditions on which the Division would consider adopting Neuropsychology as its official journal; Dr. Rao is consulting with the Association to learn whether it will be possible to reach agreement on these points.
6. Action Item / Definition of Neuropsychologist. The EC discussed the ongoing revisions of the Division's definition of a neuropsychologist with Nathalie Gilfoyle (APA General Counsel), Cathi

Grus (APA Educational Directorate) and Randy Phelps (APA Practice Directorate). Drs. Donders, Rosenstein, Lucas, Barr, Bobholz and Hammeke recused themselves from the discussion and vote. The EC voted unanimously to reaffirm a commitment to preparing guidelines that define a neuropsychologist and to take the steps necessary to seek APA approval for these guidelines. The wording of the definition continues to undergo revisions, and a task force will be appointed to oversee the process of finalizing suggested wording, soliciting member comments, and submitting appropriate guidelines to Council for approval.

7. Action Item / CPT Codes and Reimbursement Issues. The EC discussed recent challenges with reimbursement under the new CPT codes with Randy Phelps (APA Practice Directorate) and Cathi Grus (APA Education Directorate). This meeting with representatives of both Directorates was requested because the Division wanted to highlight the impact of the current reimbursement practices on both training and practice. (See Practice Advisory Committee report below for more detailed information about these issues.) Drs. Phelps and Grus emphasized the importance of having concrete training plans for students at all levels of training that are not dependent on evaluating Medicare patients. They are also concerned about the possibility of training programs experiencing increasing numbers of audits for Medicare fraud. (See Practice Advisory report below.) They discussed their work seeking inclusion of Psychology in the GME. The EC affirmed its commitment to raising awareness in neuropsychology training programs and across Divisions of the implications that these billing policies have for training in neuropsychological assessment and in clinical psychology more generally. Dr. Yeates thanked Drs. Phelps and Grus for their attention to this critical threat to neuropsychological practice and trainin.
8. Action Item / Revision of the Model Act for State Licensure of Psychologists. APA's Model Act serves as a prototype for drafting state legislation regulating the practice of psychology. State

legislatures are encouraged to use the language of the Model Act and the policies it espouses as a basis for their own state licensure laws. The Division's Representatives to Council presented information about the draft revision to the Model Act that is to be discussed at the upcoming Council meeting. There is considerable concern about the proposed language that refers to prescribing psychologists as "medical psychologists," as this term may lead to challenges in terms of the type of training that third parties may believe is required to perform certain psychological services. The Act was drafted in this way to be in keeping with language that appears in the Louisiana law. Our Council Representatives are to work towards a compromise position that replaces the "medical psychologist" language with wording that explicitly recognizes prescribing psychologists.

9. Action Item / National Association of Psychometrists (NAP). Mr. Tom Erickson (President, Board of Certified Psychometrists) and Ms. Gail Rosenbaum (Representative, National Association of Psychometrists) requested to meet with the EC to discuss credentialing of psychometrists. They reported that procedures to credential "Certified Specialists in Psychometry" (CSP) are already in place and that they are working now on proposed procedures for "Registered Psychometrists," which would be a time-limited designation that allows individuals to work as a psychometrist while obtaining the experience necessary for higher certification. The discussion centered on the possibility that CMS billing would be facilitated by the presence of uniform standards for credentialing psychometrists. NAP requested that the EC consider voting to support their credentialing mechanism. Dr. Yeates thanked the NAP representatives for their presentation and said that the Division will carefully consider this request, particularly as it has important implications for clinical care, scope of practice legislation, and reimbursement issues.
10. Membership: Dr. Monica Rivera Mindt reported that, as of June 30, 2007, this year the Division gained 78 new Members and Associates and 308

new Affiliates (307 Students, 1 International).

The Division currently has in its possession approximately 10,000 Clinical Neuropsychology brochures and 20,000 Pediatric Neuropsychology brochures. As of June 2007, we sent a total of 43,000 brochures to members, in addition to the many free downloads of these materials from our website.

11. Nominations and Elections: Dr. Bauer, chair of the Nominations Committee, reported the results of the 2007 election of officers. President-Elect: Glenn Smith, Ph.D.; Member at Large: Julie Bobholz, Ph.D.; Representatives to Council: Barbara Wilson, Ph.D. (elected to a second term) and Linas Bielauskas, Ph.D.
12. Fellows: Dr. Eileen Fennell, chair of the Fellows Committee, reported that three nominations have been approved in committee and submitted to Council for a vote (which is typically pro forma). Dr. Fennell's term as committee chair will end following Convention. Dr. Yeates thanked Dr. Fennell for her outstanding work on behalf of the Division. Dr. Ida Sue Baron will serve as the incoming Fellows Chair.
13. Program Committee Report: Dr. Julie Bobholz provided a report on the scientific program. She and program co-chair Dr. Mike Basso expressed their thanks to the other members of the 2007 program committee (Drs. Rishi Bhalla, Adam Brickman, Jill Caffrey, Sally Frutiger, Keith Hawkins, Scott Hunter, Robert Dallas Jones, Tricia Zawacki King, Eric Larson, Michael Lavoie, Tara Lineweaver, Aaron Malina, Susan McPherson, Paul Malloy, Stephen Miller, Anna Bacon Moore, Robert Perna, Gina Rehkemper, Emily Richardson, Elizabeth Ryan, Beth Slomine, Christina Wilson, and Steven Paul Woods).

Recipients of the Blue Ribbon awards have been announced previously. The joint SAC / Harcourt student award winners are Esther Misdraji and Alycia Barlow. Glenn Mesman will receive the SAC award for the best student paper in applied neuropsychology, and Casey Hoffmann will receive the SAC award for the best student paper in cognitive neuroscience. Dr. Marie Schulthies (Drexel University) will

receive the Division 40 Early Career Award.

The Division 40 social hour will be co-sponsored again by Division 22, Harcourt Assessment and Psychological Assessment Resources. It is expected that the Program Committee will stay well within budget for FY 2007.

On behalf of the Executive Committee and the membership, Dr. Yeates thanked Drs. Bobholz and Basso for their outstanding work in composing a diverse and excellent scientific program for 2007. In 2008, Dr. Basso will chair the Program Committee and Dr. Steven Paul Woods will serve as Co-Chair.

14. Publications and Communications: Dr. William Barr, committee chair, congratulated Dr. Nancy Chiaravalloti on her service as Editor of the Division 40 Newsletter. Dr. Yates thanked Dr. Chiaravalloti for her contributions to the Division. Effective following Convention, Dr. Bonny Forrest will become the new newsletter editor. Dr. Michael Cole has now been appointed Webmaster for the Division. The committee will be initiating a search for an archivist.

The Division 40 website has seen a steady increase in "hits" over the past two years. There has been a 40% increase in hits in June and July 2007, compared to the same period in 2006. Much of the increase is attributed to greater use of the Training Directory. Peak usage is in October, in the midst of recruitment season for all levels of training. The Training Directory currently includes 18 doctoral programs, 24 internships, and 59 postdoctoral programs. Updates for the directory will be solicited in September via e-mail. The EC discussed several approaches to maximizing the number of programs that are participating in the directory.

15. Practice Advisory Committee: Dr. Neil Pliskin reported on the activities of the PAC. CPT coding issues are presented at length in these minutes so that our members will be informed about these critically important topics for practice and training.

CPT Coding: In February, the American Psychological Association submitted a request to the CPT Editorial Panel to add some clarifying

language to the CPT codes for psychological and neuropsychological testing. The Testing Codes Workgroup, comprised of members of Division 40, the National Academy of Neuropsychology and the Society for Personality Assessment has worked with CPT staff, CPT Panel members, and staff from the Centers for Medicare and Medicaid Services (CMS) to craft language that would explain when more than one code for testing can be billed together, and which services are captured under each code. The Panel was very receptive to our recommendation, and we hope to see those revisions published in CPT 2008.

Following our work with the CPT Panel, we have focused on persuading CMS staff to revise their current policy document (CMS Change Request 5204) and its accompanying MedLearn Matters article. In a recent conference call with CMS staff we emphasized the need to clarify that the codes for testing by a psychologist (CPT 96101 and 96118) should also be billed for the time the psychologist spends conducting an integrative interpretation and report using all of the patient's clinical data. Our suggestions are now under review by CMS staff. We are hopeful that the agency will take action so that the restrictions implemented by many regional Medicare carriers are soon lifted.

Training Issue. When the Centers for Medicare and Medicaid published its "clarification" of the CPT codes in September 2006, it restated its longstanding policy that Medicare Part B funds are not to be used to bill for the time of trainees. While this ban on trainees has been its longstanding policy, the clearer delineation of services provided by the new testing CPT codes has prompted this restatement, which has a major impact on the large segment of psychologists who educate students at all levels who work with Medicare patients. The Testing Codes workgroup is of course concerned about the problem, and through missives to APPIC and other training groups have tried to heighten awareness of the situation.

The challenge is that, according to the federal

government, psychologists are not classified as physicians, while many other nonmedical specialties are. As such, we cannot qualify for Graduate Medical Education (GME) funds. Yet, the federal government (CMS), which provides GME funding to academic centers for training, considers these funds to be their contribution and therefore forbids billing Medicare Part B money for trainees, because in their eyes this would be double billing the government. While the Education Directorate has been instrumental in obtaining some federal funding for psychology trainees as part of Graduate Psychology Education (GPE), those funds are not enough to underwrite the cost of training psychologists at the internship/fellowship level. There is expected to be a strong impact on the number of available practicum slots within doctoral programs and on the training opportunities available to interns and fellows to test and treat older adults. It will take an act of Congress to resolve this issue, specifically through inclusion of Psychology in the GME program. The PAC and Testing Codes Workgroup have been exploring all possible intermediate steps and the only one that has some potential so far for addressing the therapy component of working with older adults is pursuit of Evaluation and Management (E&M) codes, which will also require congressional intervention.

New York Technician Issue. There has been limited progress on the New York Technician issue. At the most recent NYSPA Council meeting, compromise draft legislation was rejected because of disagreement about: (1) bachelor's vs. master's level technicians, and (2) the use of technicians to administer Wechsler tests and other IQ tests that call for "probes" by the examiner. A secondary question was whether the work of these non-licensed technicians should be limited to neuropsychological evaluations. A NYSPA Technician Subcommittee (of which Drs. Barr and Pliskin are members) will produce a draft bill to be considered at the next Council meeting this fall.

The Role of Neuropsychology and Rehabilitation Psychology in the Evaluation,

Management and Research of Military Veterans with Traumatic Brain Injury. Earlier this year, a position paper by the American Academy of Neurology did not adequately characterize the role of neuropsychology in the care and management of TBI in returning veterans. Recognizing the important role that neuropsychologists and rehabilitation psychologists will play in caring for the large number of our veterans affected by traumatic brain injury, the PAC organized and chaired an inter-organizational Military TBI Task Force of experts, led by Michael McCrea, representing Division 40 (Neuropsychology) and Division 22 (Rehabilitation Psychology), American Academy of Clinical Neuropsychology (AACN), and the National Academy of Neuropsychology (NAN). The Military TBI Task Force has produced a position paper on this topic. The EC voted to endorse the document, subject to a review by APA to learn whether or not the manuscript will need to be vetted prior to publication.

Other Committee Activities:

Dr. Ida Sue Baron represents Division 40 on the APA Integration Group. Dr. Baron and the Practice Directorate have been instrumental in maintaining pressure on the Integration Group to closely monitor and seek resolution of the issue regarding use of test technicians in New York State. Dr. Pliskin reported on developments within the APA Committee for the Advancement of Professional Psychology (CAPP). The main professional issues under consideration by CAPP relevant to Division 40 are the National Provider Identification Number, passage of mental health parity law and congressional initiatives for mental health parity, rollback of proposed Medicare cuts, and inclusion of psychology in the GME. Dr. Pliskin reported in his role as Federal Advocacy Coordinator about work aimed at getting Congress to reconsider a planned implementation of cuts in Medicare payments.

Dr. Yeates and Dr. Randy Phelps of the Practice Directorate thanked Dr. Pliskin for his exceptional efforts on behalf of the membership

in his role as PAC Chair.

16. *Public Interest Advisory Committee:* Public Interest Advisory Committee: Dr. Douglas Johnson-Greene (chair) reported on the activities of the PIAC. This committee continues to meet twice annually (during the North American INS meeting and the APA Convention). All five of the PIAC liaisons attended the APA Spring Consolidated Meetings to meet with their respective committees on behalf of the Division.

The Scientific Advisory Committee (SAC) and PIAC are developing a speaker's bureau list in response to a request from the APA Committee on International Relations in Psychology (CIRP). The Initial list will contain neuropsychology speakers from the New York, New Jersey, and Connecticut area.

There are currently two brochures produced by Division 40, one pertaining to general neuropsychology and one specific to pediatric neuropsychology. English versions are now available in .pdf form on the division website as well as in a printed version from APA Division Services. Spanish versions of these brochures will be available imminently, at no cost on the D40 website and for purchase in printed form.

Subcommittees and Liaisons

Ethics Subcommittee, Dr. Josette Harris, Chair. This committee is collaborating with WIN and EMA to develop joint programming for the 2008 APA Convention.

Liaison, Committee on Ethnic Minority Affairs (CEMA); Chair, Division 40 EMA Subcommittee, Dr. Desiree Byrd. The following new members were added to the EMA Steering Committee: Drs. Karen Mason and Christine Wilson, and Ms. Michelle Madore (Student Representative). EMA hosted a highly successful mentoring event at INS 2007 and has a discussion of career choices planned for this APA Convention. In an effort to increase the pool of competitive graduate school applications from ethnic minority students, EMA will launch its "Pre-Application" program this year in which undergraduates will be invited to submit their graduate applications for pre-review by EMA mentors for revision prior to formal application

to graduate programs. With support of a CEMRRAT grant to support the EMA's Mentoring Network, EMA has developed and will soon launch a web-based survey of Directors of Clinical Training of neuropsychology training programs to assess: 1) diversity recruitment methods 2) numbers of minority applicants, interviewees, and enrolled students, and 3) common weaknesses of applications from minority students. Information from this survey will be used to develop targeted recruitment strategies and graduate school preparation tactics for minority undergraduate students.

Chair, Subcommittee, Women in Neuropsychology (WIN); Liaison, Committee on Women in Psychology (CWP), Cheryl Luis, Ph.D. WIN continues to offer a listserv supported by APA. As a follow-up to last year's WIN Survey, a summary of findings was provided via a handout to WIN attendees at INS. WIN hosted an event at INS 2007 about career development, which was extremely well attended. Programming is now being planned for INS and APA 2008.

Liaison, APA Committee on Children, Youth and Families (CYF), Shelly Heaton, Ph.D. Dr. Heaton continues to serve as liaison to CYF. There is no new business on this committee directly relevant to our membership.

Liaison, APA Committee on Aging (CONA), Angela Jefferson, Ph.D. CONA received approval from the 2007 Council of Representatives Discretionary Funds to establish a Working Group on Cultural Competency in Geropsychology. This working group will "identify core principles for infusing cultural competency into geropsychology, including identification of conceptual and empirical information on cultural competency issues specific to an older American population, and set an agenda for achieving cultural competency in education and training, practice, research, and policy." The APA/ABA Commission on Law and Aging Capacity Assessment in Older Adults Project is actively working on a handbook for psychologists focused on capacity assessment in older adults. This handbook will provide "how

to" information for psychologists working with attorneys and judges in capacity assessments. CONA is working to infuse aging throughout the APA divisions and requested that Division 40 consider developing an aging-focused interest group.

Monitors

APA Committee on International Relations in Psychology (CIRP), Fred Unverzagt, Ph.D., Monitor. CIRP is developing a Speaker's Bureau for the United Nations. She wants to identify New York-area psychologists who can speak at the UN on short notice. The Division 40 SAC and PIAC are collaborating to compile a list of speakers.

Committee on Disability Issues (CDIP), Felicia Hill-Briggs, Ph.D., Monitor. The Task Force on Increasing Accessibility of Test Materials for Graduate Students with Visual Impairments has completed a handbook on testing issues relating to persons with examiners with visual impairments, and a proposal has been submitted to APA to develop a clearinghouse for test manuals that would be made available to persons with visual impairments. The Task Force was chaired by Dr. Johnson-Greene from Division 40. Another Task Force under the auspices of CDIP is involved in developing guidelines for assessment and treatment of persons with disability, including cognitive disabilities. The names of several neuropsychologists have been forwarded to the committee to use as a resource in the development of these guidelines.

Monitors reviewed activities in the following committees and reported no new issues that are relevant to Division 40 over the past six months: APA Committee on Urban Initiatives (Scott Hunter, Ph.D., Monitor), APA Committee on Lesbian, Gay, and Bisexual Concerns (Rex Swanda, Ph.D., Monitor), APA Office on AIDS (Scott Hunter, Ph.D., Monitor), and APA Committee on Rural Health (Debra Sheppard, Ph.D., Monitor).

17. Education Advisory Committee: Dr. Douglas Ris (Chair) reported on the activities of the EAC. The EAC worked with the Publications and

Communications Committee on the training website, which is now active. Dr. Ris and Dr. Shear represented D40 at a Steering Committee meeting (held in Portland on February 8) and subsequent teleconferences to explore a possible Interorganizational Summit on Training and Education. This Committee is currently developing a survey to assess the impact of Houston on training in clinical neuropsychology that is intended to provide more data for an assessment of whether some type of follow-up (e.g., a “Houston II”, or other such augmentation/update) to Houston would be advantageous to the continued development of the specialty. Dr. Ris attended the Spring APA Consolidated Meetings and will be attending the APA Education Leadership Conference, which will address advocacy for federal support of Psychology education and training.

Association of Neuropsychological Students in Training (ANST): An ANST-sponsored symposium on training in neuropsychology will be held during this APA Convention. Dr. Weber will be stepping down as ANST chair in order to assume her new role as chair of the Division 40 Early Career Psychologist committee. Dr. Ris thanked Dr. Weber for her service to ANST. A new chair will be named.

18. Science Advisory Committee: Dr. John Lucas reported as Chair of the SAC.

Database Project: The purpose of the Science Membership Database is to more easily and efficiently identify Division 40 members with interest and expertise to serve on APA committees and work groups, and to assist the EC in responding to calls from APA for timely reviews/critiques of science-related documents. The SAC plans to beta test the interface and functionality of the database in Fall 2007, and go live in early 2008.

Transdisciplinary (TD) Research: The TD subcommittee (Drs. Kozora [chair], Aloia, Butters, Hart, Hopkins, Machulda, Paul) is charged with gathering resources for Division 40 members who are interested in cross-cutting research. Dr. Paul is chairing a symposium at the 2007 APA convention, entitled “Promoting

transdisciplinary and translational research in neuropsychology. Dr. Kozora is preparing an INS symposium submission that will highlight features of two recently successful TD project applications where neuropsychology played an important role.

Board of Scientific Affairs. Dr. Forrest attended the BSA meeting in March. APA is interested in developing a new program to support advanced graduate students in science at the Convention. Initiatives are being discussed that would make the APA Convention more attractive to scientists, including changes to convention programming, timing of the program, and changes to the APA dues structure. Dr. Forrest will represent Div40 as a liaison/observer at the meeting of the Task Force on Recommending Changes to the APA Convention That Would Appeal to Scientists. A Statement on Observers and Third Parties in Psychological Testing and Assessment was approved and will be sent to Council for final approval.

Division 40 Grants Program. A SAC workgroup has been charged with developing a grants program proposal to administer a budget surplus of \$24,574. The work group is led by Dr. Kathie Welsh-Bohmer and includes Drs. Aloia, Byrd, Forrest, Hart, Rilling, and Paul, as well as the Chairs of Education (Dr. Ris), Early Career (Dr. Weber), and Awards (Dr. Loring) committees. This group has developed an initial draft of the objectives, application materials, award sizes, expectations of award winners, and logistics of the process (i.e., application, review, and award).

FDA Roundtable. The EC agreed to send representatives to an FDA Roundtable Discussion on the role of neuropsychological assessment in clinical trials proposed by Dr. Ronald Lazar. Unexpected delays in identifying FDA representatives left too little time to arrange the meeting for the 2007 APA Convention. Dr. Lazar has subsequently requested to hold the meeting at INS in 2008, again with assistance from SAC in meeting logistics and providing input into the representatives invited to the meeting.

Awards. Dr. Loring chairs the Awards committee. The SAC award recipients are listed in the Program Committee report above.

19. Conflicts of Interest Committee. Dr. Erin Bigler, committee chair, reported that all EC members were up to date on their conflict of interest reporting, and there were no substantial concerns.
20. Committee on APA Relations (CAPAR): Dr. Deborah Koltai Attix chairs this committee and serves as a liaison with the APA Committee on Division/ APA Relations (CODAPAR). Dr. Attix and Dr. Manly are planning the Challenges in the Neuropsychological Assessment of Ethnic Minorities: Problem Solving Summit, which now has confirmed funding from Division 40, OEMA, and NAN. The Test Release paper was published in TCN as a position paper of Division 40, APPCN, and AACN. Dr. Attix addressed the issue of communication between Divisions and governance that arose in relation to the Test Release document with CODAPAR at the Spring Consolidated Meetings, and also visited with CTPA on this issue. This was raised in response to difficulties that arose with specific groups when the Div40/APPCN/AACN paper on Test Disclosure was accepted for publication as a position paper, after being vetted by several APA offices, but not all that apparently had an interest. CODAPAR reviewed this carefully, and found that according to their by-laws and policies, Division 40 acted in accordance with expectation and without error. The larger issue of communication between groups is something that they will continue to address, and specific ideas toward this end were generated.
21. Dr. Yeates expressed his thanks to Dr. Adams, who will complete his term on Council in December, to Dr. Bauer who is completing his term as Past President at Convention, and to Dr. Rosenstein, who is completing her term as Member at Large at Convention. Dr. Yeates adjourned the meeting at 9:50 AM.

Respectfully submitted,
Paula K. Shear, Ph.D.
Secretary, APA Division 40

**Summary of Votes that the Division 40
Executive Committee Conducted via E-Mail
Between February 2007 and August 2007**
Appendix to the Minutes of the August 2007
Executive Committee Meeting

1. February 2007. According to the Division 40 Bylaws, Members and Fellows of the division are permitted to attend Executive Committee meetings at the discretion of the President. The EC voted to create the following guidelines to assist in managing requests to observe these meetings:

A request to attend the Executive Committee meeting must be received at least two weeks prior to the meeting, and there will in general be no more than three observers allowed in the meeting at any given time. Observers are permitted to attend but not to participate in the discussions unless invited by the President to do so. Observers are not permitted to make notes or to use recording devices. The President may ask observers to absent themselves from the meeting if an executive session is required. The minutes of the meeting are to reflect the presence of observers but not their names.

These guidelines will be added to the Policy and Procedures Manual.
2. April 2007. The EC voted to provide \$500 in support of the conference entitled "Evidence-Based Practices for Ethnic Minorities" and also to send a representative with support for airfare and hotel stay. Dr. Desiree Byrd, Chair of the Ethnic Minority Affairs subcommittee was asked to work with Dr. John Lucas, Chair of the Science Advisory Committee, to nominate a representative.
3. May 2007. The EC voted that Division 40 will pay 1/3 of the dues and other expenses related to maintaining a representative of the Clinical Neuropsychology Synarchy on the Council of Specialties. (An additional 1/3 of the cost is to be paid by NAN and the final 1/3 to be split between AACN and APPCN.) Division 40 will initially coordinate the collection of payments and the reimbursement for expenses, through our

Treasurer's office.

4. July 2007. The EC voted to pursue approval from APA governance to adopt a revised Definition of a Neuropsychologist and to appoint an individual to oversee the management of this process. The definition continues to undergo revisions.

Minutes from prior Division 40 Executive Committee meetings can be found online at <http://www.div40.org>

Newsletter

Newsletter 40 is the official publication of Division 40.
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Newsletter
