



THE 39TH

DOOR COUNTY SUMMER INSTITUTE

JULY 20 - AUGUST 7, 2026 | EGG HARBOR, WI

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Greetings!

Welcome to the Thirty-ninth Door County Summer Institute (DCSI). We have continued increasing our educational offerings by scheduling more two-day sessions, which we hope provides a more flexible opportunity for all. We hope this year's **seventeen workshops** will assist you in your ongoing professional development, encourage you to return to Door County, and provide an opportunity to recharge and reinvigorate yourself. We reserve the right to limit enrollment depending on available room size.

Carlyle H. Chan, MD

Institute Director and Founder

Professor of Psychiatry and the Institute for Health and Society (Bioethics and Medical Humanities)

Medical College of Wisconsin

About Door County

Door County, WI is an area of captivating scenic beauty. From its steep limestone bluffs to the spacious sand beaches, the 250-mile shoreline is both dramatic and serene. Almost every outdoor activity is available, as the area has four state parks, beaches, hiking trails, and golf courses. It is the home of one of the largest concentrations of artists in the Midwest. There are also numerous musical and theatrical events as well as opportunities for fine dining.

Session Information

From July 20th to August 7th, 2026, 17 separate sessions will comprise this year's Summer Institute. All 5-day sessions are held from 9:00 am to 12:15 pm. All 2-day sessions are held from 8:30 am to 12:35 pm, leaving afternoons free to explore the beauty and wonders of Door County. All seminars are at the Landmark Resort in Egg Harbor, WI. A continental breakfast will be served daily. Casual dress is standard for all sessions.

Special Needs

Please contact us via email (summerinstitute@mcw.edu) at least two weeks in advance of any session if you have special needs.



Session 1: From Clinics to Classrooms: A Collaborative Framework and Coordinated Strategies for Supporting High Risk Students

July 20 – 21, 2026 8:30 am – 12:35 pm

(2 Days Monday – Tuesday)

David Meichenbaum, PhD, is a New York State licensed clinical psychologist specializing in the diagnostic evaluation and treatment of developmental and mental health disorders. For over 20 years, Dr. Meichenbaum has worked at The Summit Center in Amherst, NY, where he is both the Clinical Director of Summit's Behavioral Pediatrics Clinic and the Director of Community Consulting and Clinical Services. Dr. Meichenbaum is a highly sought-after consultant for school districts, offering practical behavioral and educational strategies that focus on the social, emotional, adaptive, and behavioral development of students with autism spectrum, disruptive behavior, and mental health disorders. As both a clinical psychologist and consultant, Dr. Meichenbaum offers a perspective and solutions to increase the development and generalization of skills across settings. Dr. Meichenbaum graduated with his doctorate in Clinical Psychology from the State University of New York at Buffalo, and he completed his clinical internship at Duke University Medical Center. He is returning to present at the Door County Summer Institute for the third consecutive summer.

Donald Meichenbaum, PhD, is a Distinguished Professor Emeritus from the University of Waterloo in Ontario, Canada. Since his retirement, he has been Research Director of the Melissa Institute for Violence Prevention in Miami (www.melissainstitute.org). Dr. Donald Meichenbaum is one of the founders of Cognitive Behavior Therapy, and in a survey of clinicians he was voted "one of the ten most influential psychotherapists of the 20th century." He has received a Lifetime Achievement Award from the Clinical Division of the American Psychological Association and was Honorary President of the Canadian Psychological Association. Dr. Don Meichenbaum has presented in all 50 U.S. states as well as internationally, and he has published extensively. His latest book is entitled "Roadmap to Resilience".

Course Description

High-risk students often require coordinated and intentional support across educational, mental health, and home settings. This 2-day workshop focuses on uniting and aligning educators and mental health providers to create a cohesive and strategically designed approach to student support. Participants will explore how to bridge the gap between these disciplines to establish a united front that promotes meaningful skill acquisition and the generalization across environments. By aligning classroom-based and therapeutic strategies, this collaborative model supports students in accessing instruction and interventions within the least restrictive settings possible. The workshop will address the needs of diverse student populations, including students who struggle academically, students with autism, and students who demonstrate disruptive behavior disorders, anxiety, depression, and school avoidance.

Case examples, group activities, and collaborative problem-solving will be utilized to identify solutions to overcome the various challenges and barriers we face integrating across systems. Attendees will leave with practical, evidence-informed strategies that can be implemented both in therapy sessions and classroom environments to improve student engagement, learning, behavior, and overall success.



Session 1: From Clinics to Classrooms: A Collaborative Framework and Coordinated Strategies for Supporting High Risk Students

July 20 – 21, 2026 8:30 am – 12:35 pm

(2 Days Monday – Tuesday)

Learning Objectives

Participants who engage in this education intervention will be able to:

- Describe the “gap” and solutions for overcoming barriers between educational and mental health settings, to effectively improve outcomes for high-risk students
- Describe components of a unified approach between educators and mental health providers to address the needs of students with academic challenges, autism, disruptive behavior disorders, anxiety, depression, and school avoidance
- Apply evidence-informed strategies across classroom and therapeutic settings to support skill acquisition, generalization, and placement in the least restrictive environment
- Develop actionable collaboration plans that align best classroom practices and clinical interventions to reduce crisis-driven responses, bolster resilience, and promote sustainable student success

Monday

- Identifying and Understanding The “Gaps” and the Importance of Coordinated Support
- Principles for Creating an Integrated Mental Health Support System
- Considerations for Building Mutual Capacity and Effective Collaboration
- The Role of Proactive and Multi-Tiered Solutions
- Understanding Why the Smart Keep Getting Smarter and Other Students Fall Further Behind
- Keys to Developing Expert Teachers: What Expert Teachers Do

Tuesday

- Redefining Consequences: Strategies for Addressing Dysregulation and Challenging Behaviors
- Identifying and Building Adaptive Alternative Skills
- Adapting Evidence-Based Treatments for Mental Health in Schools
- Guidelines to Achieve Generalization and Long-Term Maintenance
- Overcoming Barriers to Sustained Collaboration
- Practical Solutions to Potentially Complex Problems
- Keys to Bolstering Resilience

Session 2: Eating Disorders Across the Clinical Continuum: Diet Culture, Development, Assessment, Body Image, and Treatment Approaches

July 20 – 21, 2026 8:30 am – 12:35 pm

(2 Days Monday – Tuesday)

Melissa Schneider, MA, LPC, CIR, CSTS, is a licensed psychotherapist, speaker, and educator with over 18 years of experience specializing in eating disorders, body image, and diet culture. She is passionate about providing authentic, culturally responsive, inclusive, and evidenced-based treatment and training to other healthcare providers and communities on the complexities of eating disorder prevention and treatment. Melissa has worked across multiple levels of care—including residential treatment, intensive outpatient programming, and private practice—and currently serves as the Eating Disorder Treatment Coordinator at Marquette University’s Counseling Center. For the past three years, she has led a summer colloquium on eating disorders to support the APP Psychiatry Fellowship training at MCW.



Course Description

This session provides a comprehensive overview of eating disorders across the clinical continuum, exploring key risk factors, developmental pathways, assessment strategies, disordered eating patterns, body image considerations, and evidence-based treatment approaches. Participants will gain practical tools to enhance clinical understanding and provide effective, compassionate care through a multidisciplinary treatment approach.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Identify key risk factors, developmental pathways, and vulnerabilities associated with eating disorders across the clinical continuum
- Differentiate disordered eating patterns from clinical eating disorders through effective assessment strategies and case-informed approaches
- Explain the role of body image in the development, maintenance, and treatment of eating disorders
- Apply evidence-based treatment approaches within a multidisciplinary framework to provide effective and compassionate care

Monday

- Eating Disorders:
 - Assessing Provider Biases
 - What is Diet Culture
 - Risk Factors and Development of Eating Disorders
 - The Spectrum of Eating
 - Diagnosis and Assessment
 - Challenges in Treatment for Health Care Providers

Tuesday

- Eating Disorder Treatment:
 - Levels of Care
 - Dialectical Behavior Therapy, Acceptance Commitment Therapy, and Cognitive Behavioral Therapy
 - Body Image Work
 - Resources

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Session 3: Single Session Thinking and Practice: One Session at a Time

July 20 – 21, 2026 8:30 am – 12:35 pm

(2 Days Monday – Tuesday)

Michael Hoyt, PhD, was one of the originators (with Moshe Talmon and Robert Rosenbaum) of the Single Session Therapy approach and is the author/editor of numerous publications, including *Single Session Therapy: A Clinical Introduction to Principles and Practices*, *Single Session Therapies: Why and How One-at-a-Time Mindsets Are Effective*, and *Brief Therapy and Beyond: Stories, Language, Love, Hope, and Time*. He is a graduate of Yale University and completed his NIMH fellowship at the University of California School of Medicine in San Francisco. He has been named a Distinguished Continuing Education Speaker by both the APA and the International Association of Marriage and Family Counselors, a Contributor of Note by the Milton H. Erickson Foundation, and was awarded the prestigious APF Cummings Psyche Prize for lifetime contributions to the role of psychologists in organized healthcare.



Course Description

Single Session Therapy (SST) can be defined as therapy that the therapist and client expect, from the beginning, to potentially comprise a single visit. The therapist acts as if the first session may be the last. SST is therapy approached one-session-at-a-time. Research shows that one session is, de facto, the most common length of therapy; and that SST is often effective for a wide variety of problems. A structure will be presented for organizing the tasks and skills involved in different phases (pre, early, middle, late, follow-through) of therapy. Numerous case examples, including videos, will illustrate techniques useful both in both single sessions and in the course of longer treatments.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Analyze single session/one-at-a-time mindset
- Recognize tasks and skills, including useful questions and specific techniques, associated with different phases of treatment
- Assess numerous single session interventions
- Utilize application to attendees' own clinical cases

Monday

- Introduction
- Key characteristics of Single Session Therapy
- Analyze Single Session Therapy mindset and guidelines
- Using skills by phase of treatment
- Case examples and discussion

Tuesday

- Additional case examples and discussion
- Practice skills
- Take-aways

Session 4: Advanced Applications of Behavior Change: Case Conceptualization and Collaborative Problem-Solving for High-Risk Students

July 23 – 24, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

David Meichenbaum, PhD, is a New York State licensed clinical psychologist specializing in the diagnostic evaluation and treatment of developmental and mental health disorders. For over 20 years, Dr. Meichenbaum has worked at The Summit Center in Amherst, NY, where he is both the Clinical Director of Summit's Behavioral Pediatrics Clinic and the Director of Community Consulting and Clinical Services. Dr. Meichenbaum is a highly sought-after consultant for school districts, offering practical behavioral and educational strategies that focus on the social, emotional, adaptive, and behavioral development of students with autism spectrum, disruptive behavior, and mental health disorders. As both a clinical psychologist and consultant, Dr. Meichenbaum offers a perspective and solutions to increase the development and generalization of skills across settings. Dr. Meichenbaum graduated with his doctorate in Clinical Psychology from the State University of New York at Buffalo, and he completed his clinical internship at Duke University Medical Center. He is returning to present at the Door County Summer Institute for the third consecutive summer.

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Course Description

This workshop is designed to deepen educators' and community/school mental health providers' understanding of how to influence behavior change, for "high-risk" students, through applied case conceptualization and collaborative problem-solving. Emphasis will be on students who have experienced adverse childhood events/trauma, neurodiversity (e.g., ADHD, autism spectrum disorders, or learning disabilities), mental health disorders (e.g., anxiety, depression), and/or school avoidance. Building on the principles introduced in Session 1 (From Clinics to Classrooms), this session focuses on case presentation and analysis to illustrate how behavior change strategies can be effectively implemented across settings. Attendance at Session 1 is helpful but not required; participants may attend this session independently.

A structured case conceptualization model will be introduced to guide assessment, intervention planning, and decision-making. We will explore the art of consulting and motivating behavioral change amongst students, providers, educators, and caregivers, while highlighting clear "to-dos" and "to-don'ts" for effectively collaborating, building generalization, and sustaining gains. Participants are strongly encouraged to bring their own cases for discussion, application, and problem-solving, making this a highly interactive session focused on refining clinical judgment, consultation and instructional skills, and advanced application of behavior change principles.



Session 4: Advanced Applications of Behavior Change: Case Conceptualization and Collaborative Problem-Solving for High-Risk Students

July 23 – 24, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Learning Objectives

Participants who engage in this education intervention will be able to:

- Apply a structured case conceptualization model to assess the needs of high-risk students and guide intervention planning and decision making across clinical, educational, and home settings
- Analyze case examples to evaluate the effectiveness of behavior change strategies and adapt interventions for implementation across multiple environments
- Apply strategies for motivating and supporting behavior change among educators, caregivers, and interdisciplinary teams, including identifying common barriers, “pit-falls”, and solutions
- Refine clinical and instructional decision-making skills by collaboratively problem-solving participant-submitted cases using advanced behavior change principles and evidence-based practices

Thursday

- Adopting and Utilizing a Case Conceptualization Model
- Detecting Antecedent Patches and Unaccommodating Accommodations
- Fostering Independence via Individual Independence Plans (IIPs)
- Techniques for Motivating Change Among Students, Educators, and Caregivers
- Strategies for Increasing Child-Driven Goal Attainment
- Setting Up for Success – Establishing Appropriate Goals
- Collaborative Case Analyses for High-Risk Profiles (ADHD, Autism, depressed, anxious)

Friday

- The Art of Consulting “To Dos” and “To Don’ts”
- Strategies and Techniques for Increasing Flexible-, Positive, and Social-Thinking Skills
- Strategies and Tools for Supporting Students in the Least Restrictive Environment
- Measuring Success – Establishing Doable Data Collection Methods
- Anticipating and Overcoming Barriers
- Participant Case Presentations and Analysis

Session 5: Caring for Our Aging Patients: Geriatric Depression, Anxiety, and Dementia

July 23 – 24, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Art Walaszek, MD, is a board-certified geriatric psychiatrist and Professor of Psychiatry and Medicine at the University of Wisconsin School of Medicine and Public Health. He is past president of the American Association of Directors of Psychiatric Residency Training (AADPRT). He is Vice Chair of the Psychiatry Review Committee of the Accreditation Council for Graduate Medical Education (ACGME). Dr. Walaszek works with the Wisconsin Alzheimer's Disease Research Center, where he is Co-Leader of the Outreach, Recruitment and Education Core, and with the Wisconsin Alzheimer's Institute, where he leads the Public Health Pillar. His research focuses on public health approaches to improving the care of people with dementia. He is the author of Behavioral and Psychological Symptoms of Dementia and editor of Late-Life Depression and Anxiety and Substance Use in Older Adults, all from American Psychiatric Association Publishing.



Course Description

Depression and anxiety disorders threaten our ability to age successfully. Whereas sadness, grief and worry are core parts of being a human, depression and anxiety disorders are not inevitable. But they are emotionally painful, physically uncomfortable, disabling and potentially fatal. Suicide is a significant global health problem, especially among older adults, and depression contributes mightily to the risk of suicide. Thankfully, we can identify people with late-life depression and anxiety, we can diagnose them accurately, and we can offer treatment that works. In other words, people suffering from these conditions can find relief, maintain their independence, and lower their risk of dying due to suicide.

Around 7 million people in the United States are currently suffering from dementia. Though there have been advances in the diagnosis (e.g., blood-based biomarkers) and treatment (e.g., monoclonal antibodies) of dementia, behavioral and psychological symptoms of dementia (BPSD) remain very common, affecting 90% of persons living with dementia. These symptoms - including agitation, depression, apathy, and psychosis - can profoundly affect quality of life, relationships with loved ones, personal safety, autonomy, dignity, and independence. BPSD sometimes arise unpredictably, with terrible timing, when a family is already struggling to address the cognitive and functional consequences of dementia. We will discuss how to comprehensively assess BPSD and then move on to evidence-based approaches to managing BPSD holistically. Our ultimate goal is that the burden of having dementia or caring for someone with dementia can be lifted, at least a little bit.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Describe how to evaluate depression, suicidality, and anxiety among older adults
- Develop a treatment plan for depression and anxiety among older adults, including mitigating the risk of suicide
- Appreciate recent advances in the diagnosis and treatment of dementia
- Describe how to evaluate and treat behavioral and psychological symptoms of dementia (BPSD), including psychological, behavioral, environmental, medication, and caregiver interventions

Session 5: Caring for Our Aging Patients: Geriatric Depression, Anxiety, and Dementia

July 23 – 24, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Thursday

- Welcome and Introduction to Geriatric Psychiatry
- Late-Life Depression & Anxiety: Background
- Assessment, including suicidality
- Management of LLD & Anxiety: Psychotherapy
- Management: Pharmacotherapy, Neuromodulation, Mitigating suicide risk
- Q&A

Friday

- Introduction to Dementia, including recent advances in diagnosis and treatment
- Assessment of BPSD
- Management of BPSD: psychological, behavioral, environmental & caregiver approaches
- Management of BPSD: antipsychotics
- Management of BPSD: other medications
- Q&A

Session 6: Moving to ACTion: Understanding the Processes of Acceptance and Commitment Therapy

July 23 – 24, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Courtney Barry, PsyD, MS, is an Associate Professor in the Department of Psychiatry and Behavioral Medicine at MCW. She is a licensed Clinical Health Psychologist and serves as the Director of Interprofessional Education and Practice for the School of Medicine at MCW. Prior to her faculty appointment, she completed her doctorate in Clinical Psychology, with a specialization in Health Psychology from the Chicago School of Professional Psychology. She completed her internship and post-doctoral fellowship in an Adolescent Psychiatric Hospital, where she learned Acceptance and Commitment Therapy. She had the privilege of learning from various experts in ACT, including Steve Hayes and Daniel Moran. She discovered the importance of research in developing effective interventions and completed a research fellowship in Primary Care within the Department of Family and Community Medicine at the Medical College of Wisconsin. Her research focused on trauma prevalence and the relationship to chronic health conditions. She has served as PI for several grant funded projects through Advancing Healthier Wisconsin, including developing trauma-informed training for healthcare providers to improve patient care and foster resiliency among patients and providers and working with community organizations to create mental health didactics for their community members. As part of the project to train other healthcare providers, she had to understand the perspectives of patients and providers, utilizing qualitative methodology. This required having a realistic plan and being able to work collaboratively with other healthcare professionals. She realized that education is key and provides an opportunity to learn from and with other healthcare professionals, leading to integrating ACT and teaching.



Course Description

Acceptance and Commitment Therapy is a process-based therapy that focuses on increasing psychological flexibility. We will take a deep dive into the various processes, identify how to start to address each of the processes, and provide different activities and metaphors, highlighting each of the processes, that can be used with patients. We will explore how ACT can be used with different populations (adults and children), as well as, various mental health diagnoses (anxiety, depression, trauma, etc.). The session will be experiential.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Describe the foundational underpinnings of Acceptance and Commitment Therapy and the empirical evidence supporting the use of ACT
- Apply different skills that align with various points on the hexaflex
- Apply different ACT techniques with various populations and diagnoses
- Discuss different barriers in utilizing ACT with patients and how to overcome the barriers

Session 6: Moving to ACTion: Understanding the Processes of Acceptance and Commitment Therapy

July 23 – 24, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Thursday

- Overview of ACT
- Deep dive (explanation and activities) of Values
- Committed action
- Contact with the present moment
- Application to different populations and different diagnoses

Friday

- Review of day 1 processes
- Deep dive (explanation and activities) of Self as context
- Defusion
- Acceptance
- Application to different populations and different diagnoses

Session 7: Promoting Tolerance of Uncertainty and Ambiguity via Behavioral Improvisation

July 27 – 31, 2026 9:00 am – 12:15 pm

(5 Days Monday – Friday)

Frederick J. Heide, PhD, is Professor Emeritus at the California School of Professional Psychology at Alliant International University in the San Francisco Bay Area. There he was a member of the core faculty for 37 years and won both the Master Teacher and Teacher of the Year Awards. He earned his doctorate in clinical psychology from The Pennsylvania State University in 1981 and has co-presented with Lee Becker at DCSI for 27 continuous seasons. He received the Outstanding Research Contribution Award from the Association for Advancement of Behavior Therapy (AABT) for his oft-cited work on relaxation-induced anxiety and has published in the *Journal of Consulting and Clinical Psychology*, *Psychophysiology*, *Mindfulness*, *Journal of Psychotherapy Integration*, *Behavior Research and Therapy*, *Psychology of Aesthetics, Creativity and the Arts*, and elsewhere. He also served as associate editor of the APA journal *PsycCRITIQUES*. Dr. Heide co-founded and has performed for five decades with Northern Sky Theater, which has received the Wisconsin Governor's Award for Arts, Culture and Heritage. Dr. Heide has co-authored two dozen shows including *Belgians in Heaven*, *Hell's Belgians*, and *Packer Fans from Outer Space* (with Lee Becker and James Kaplan) and the deer-hunting musical *Guys & Does* (with Lee Becker and Paul Libman). He has also recorded four albums (including 2026's *Birthplace of the Thunder* with his band *Zen of Thieves*) and published a book of 55 original songs (2022's *Tangled in Wonder*). Dr. Heide studied improvisation with The Second City's founding director Paul Sills and created several shows with him, including *Moon of the Long Nights* and *Ya Ya You Betcha*. In 2023 he received the Winifred Boynton Creative Spirit Award for his significant and enduring contributions to Door County.

Lee Becker began improvising over 35 years ago with ComedySportz while attending UW Madison. He helped found ComedySportz NYC, and worked with the group in Milwaukee, performing and running workshops in all three locations. He is a core member of Northern Sky Theater where he is a performer, musician, and playwright. Lee was a founding member of Door Shakespeare in Door County, WI, and has also performed and written for First Stage Children's Theater in Milwaukee. Along with Doc Heide, he has been a workshop facilitator for DCSI for over 20 years, providing trainings using role play and Spolin theater games. He has done similar work as a guest teacher at Alliant University's CA School of Professional Psychology.

Course Description

The abilities to tolerate uncertainty and ambiguity are of obvious benefit in medical and psychiatric practice. Both have been linked to lessened work-related stress in medical students and doctors. Although related, tolerance of uncertainty and tolerance of ambiguity are separable constructs. Tolerance of uncertainty has typically been defined as the capacity to be comfortable with lack of information about the future, whereas tolerance of ambiguity refers to the capacity to be comfortable with insufficient information in the present. A substantial body of literature links tolerance of uncertainty to lower worry, burnout, generalized anxiety, depression, and other mental health issues; a smaller body of literature links tolerance of ambiguity to psychological well-being. Importantly, tolerance of both uncertainty and ambiguity can be increased via psychological practices. Because it inherently involves exposure to uncertainty and ambiguity, behavioral improvisation seems well-suited to promoting both forms of tolerance.



Session 7: Promoting Tolerance of Uncertainty and Ambiguity via Behavioral Improvisation

July 27 – 31, 2026 9:00 am – 12:15 pm

(5 Days Monday – Friday)

The leaders of this largely experiential workshop will invite participants to explore a series of simple improvisational exercises as a means of gently augmenting these tolerances. They will draw on their close collaboration with Paul Sills, founding director of Chicago's Second City, who used similar exercises to train renowned actors such as Alan Arkin and Alan Alda. After an overview of current research and theory on tolerance of uncertainty and ambiguity, the bulk of the week will be devoted to engaging in and discussing a series of simple and enjoyable improv exercises in a safe, highly supportive atmosphere. **No previous experience with improvisation is required!**

Learning Objectives

Participants who engage in this education intervention will be able to:

- Distinguish between intolerance for uncertainty (IU) and intolerance for ambiguity (IA)
- Identify the importance of IU and IA in relation to anxiety disorders, depression, eating disorders, and other mental health concerns
- Explain how IU and IA are relevant to psychotherapy and how both can be addressed therapeutically
- Demonstrate greater tolerance of uncertainty and ambiguity in a behavioral setting

Monday

- What are intolerance of uncertainty (IU) and intolerance of ambiguity (IA)?
- Definitions, similarities and differences
- Philosophical issues
- Assessment of IU and IA
- IU as a transdiagnostic factor in mental disorder
- Review of literature linking IU to anxiety disorders, depression, eating disorders, obsessive-compulsive disorder, long-term physical health conditions, etc.
- Review of evidence linking IU and IA to stress in medical settings
- Tolerance of ambiguity as a cross-modal strength in psychotherapy
- Methods to increase tolerance of uncertainty
- Basic principles of behavioral improvisation
- Warm-up exercises

Tuesday

- Behavioral improvisation Skills 1

Wednesday

- Behavioral improvisation Skills 2

Thursday

- Behavioral improvisation Skills 3

Friday

- Summary and conclusions
- Wrap-up exercises

Session 8: Integrating Psychological Perspectives in Pain Management for Psychologists and Healthcare Providers Working with Pain

July 27 – 28, 2026 8:35 am – 12:35 pm

(2 Days Monday – Tuesday)

Rebecca Anderson, PhD, is a retired Professor in the Department of Anesthesiology and former Director of Integrated Mental Health in the Pain Management Center at the Medical College of Wisconsin (MCW). She is the author of more than 70 peer-reviewed publications, six book chapters, and two books, and has conducted extensive research in pain management. Dr. Anderson served as Secretary of the Wisconsin Examining Board and has long been recognized for her leadership in interdisciplinary care. Clinically, she was a core member of a comprehensive pain management program, where she integrated cognitive-behavioral therapy, mindfulness-based approaches, biofeedback, imagery recordings, and digital health applications to support patient adjustment, functional improvement, and quality of life. She is the psychologist who established the Integrated Pain Management Program at MCW and has presented widely at local and national levels on topics related to pain medicine, behavioral health integration, and interdisciplinary care. Dr. Anderson has also developed and delivered numerous webinars focused on evidence-based psychological approaches to pain management.



Sarah Trost, PhD, is a clinical psychologist specializing in health psychology and the psychosocial treatment of chronic medical conditions. She earned her MA and PhD in Clinical Psychology from the University of Arizona, where her research focused on the relationship between couple-level variables and health outcomes. Dr. Trost completed her clinical internship with the University of Wisconsin–Madison Department of Psychiatry and her postdoctoral fellowship in clinical health psychology at the Medical College of Wisconsin. She has held concurrent faculty appointments within the Department of Transplant Surgery at MCW and at Cardinal Stritch University, where she taught clinical psychology courses for over a decade.

Since joining the Department of Anesthesiology and the Pain Management Program at MCW in 2016, Dr. Trost has worked extensively with individuals experiencing chronic pain. Her clinical expertise includes cognitive-behavioral therapy, motivational interviewing, solution-focused therapy, systemic couples therapy, and pain reprocessing therapy. Her work emphasizes practical, evidence-based psychosocial interventions within interdisciplinary pain care settings.

Course Description

This educational program provides an integrated overview of psychological, behavioral, and medical considerations in the treatment of individuals with chronic pain. Designed for psychologists and healthcare providers, the course examines evidence-based psychological interventions, common pain conditions, medical treatments, and the importance of interdisciplinary collaboration. Participants will explore assessment strategies, cognitive-behavioral and related therapeutic approaches, comorbid mental health conditions, and ethical considerations, including issues related to opioid prescribing. Instruction includes didactic presentation, case examples, and experiential learning designed to support direct translation into clinical practice.

Session 8: Integrating Psychological Perspectives in Pain Management for Psychologists and Healthcare Providers Working with Pain

July 27 – 28, 2026 8:35 am – 12:35 pm

(2 Days Monday – Tuesday)

Learning Objectives

Participants who engage in this education intervention will be able to:

- Apply evidence-based psychological strategies to the treatment of patients with acute and chronic pain conditions
- Identify common pain syndromes, including associated medical treatments, medications, and procedures
- Differentiate cognitive-behavioral and related psychological interventions used in pain management
- Analyze commonly used assessment tools in multidisciplinary pain settings
- Recognize the impact of comorbid mental health conditions on pain presentation and treatment outcomes
- Describe ethical and professional considerations, including interdisciplinary collaboration and opioid-related challenges

Monday

- Foundations of Psychological Pain Management
- Introduction and course overview
- Biopsychosocial models of pain
- Overview of pain conditions and behavioral approaches
- Cognitive-behavioral therapy (CBT) for chronic pain
- Comprehensive assessment of the pain patient
- Pain and comorbid mental health conditions
- Case examples and experiential learning

Tuesday

- Integration, Ethics, and Applied Practice
- The multidisciplinary approach to pain management
- Medical treatments: medications and procedures
- The opioid crisis: patient, prescriber, and mental health perspectives
- Technology, ethics, and emerging issues in pain care
- Case integration, skill application, and clinical discussion

Session 9: Practical Psychodynamics and the Art of Pharmacotherapy: Integrating Meaning and Medication to Address Pharmacologic Treatment-Resistance

July 27 – 28, 2026 8:35 am – 12:35 pm

(2 Days Monday – Tuesday)

David Mintz, MD, is a graduate of the University of Miami School of Medicine and the Cambridge Hospital/Austen Riggs Center Combined Residency Program. He completed a Fellowship in Psychodynamic Psychotherapy at the Austen Riggs Center, where he remained on staff as Treatment Team Leader, Director of Psychiatric Education and Associate Director of Training in the Fellowship in Psychotherapy and Adult Psychoanalysis. At the Austen Riggs Center, Dr. Mintz's clinical work focuses on complex, co-morbid, and "treatment-resistant" patients. To optimally engage such patients, Dr. Mintz and colleagues have developed a patient-centered, psychodynamically informed approach to leveraging the pharmacotherapeutic alliance and addressing psychological resistances to the healthy use of treatment. His book *Psychodynamic Psychopharmacology: Caring for the Treatment-Resistant Patient*, and over a dozen other papers, explores these principles.



Course Description

Psychological and interpersonal factors play a significant role in how medications do, or do not, work. Expectations of care, the meanings of health and illness, defensive uses of diagnoses, medications, and the sick role all influence the likelihood of medications helping or causing harm, and shape behaviors like adherence to treatment. This workshop will focus first on the science of the art of pharmacotherapy, exploring what the evidence base says about the relationship between meaning and medication response. We will then focus on common psychodynamics driving pharmacologic treatment-resistance. With a foundation in the evidence base and basic dynamics of treatment-resistance, we will explore techniques in pharmacotherapy for assessing these dynamics, fostering the pharmacotherapeutic alliance to improve outcomes, and addressing problematic dynamics in the context of ordinary pharmacotherapy.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Identify aspects of the evidence base demonstrating the effect of meaning and interpersonal factors on medication outcomes
- Recognize and formulate common psychodynamics interfering with optimal pharmacotherapy outcomes
- Develop a patient-centered alliance that supports the patient's ability to make healthy use of medications
- Utilize psychodynamically-informed interventions to address dynamics driving treatment-resistance

Monday

- Limitations of a narrowly biomedical approach
- Evidence base connecting meaning and interpersonal factors with pharmacotherapy outcomes
- Common psychodynamics undermining the healthy use of pharmacotherapy

Tuesday

- Integrative models of pharmacotherapy
- Forging an effective pharmacotherapeutic alliance
- Addressing psychological and interpersonal drivers of treatment-resistance

Session 10: A Primer in Women's Mental Health

July 30 – 31, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Christina Wichman, DO, is a Professor of Psychiatry and Obstetrics and Gynecology at the Medical College of Wisconsin. She completed residency in Adult Psychiatry and fellowship in Consultation-Liaison Psychiatry at Mayo Clinic. Clinically, she created and directs a co-located perinatal psychiatric service and is the Co-Director of Women's Mental Health at the MCW. She is the Medical Director of The Periscope Project, a provider to perinatal psychiatrist teleconsultation service. Dr. Wichman has published and lectured extensively regionally and nationally.



Course Description

The field of women's mental health has been ever-expanding in recent years. Extensive research has been conducted on the impact of psychiatric disorders in the perinatal period and their impact on fetus, neonate and child, as well as the parent. Expanding research has been completed in the areas of psychopharmacology in pregnancy and lactation. Unfortunately, while psychiatric disorders are the most common complication of the perinatal period, most providers, including mental health providers, do not feel comfortable with management. Premenstrual dysphoric disorder has been well-delineated, but under-diagnosed and treated. There is even less data surrounding the impact of perimenopause on psychiatric symptoms, and scarce literature on managing these conditions. These symposia will provide an overview of the assessment and pharmacologic management of common, as well as more complex psychiatric disorders as it relates to the female reproductive cycle, pregnancy and lactation. Case-based discussion will be interwoven throughout the symposia.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Balance the risks of untreated psychiatric disorders, including substance use disorders, in the perinatal period versus the risks of psychiatric medications (antidepressant, anxiolytic, mood stabilizer, and stimulant exposure) in utero and during lactation
- Delineate treatment options for perinatal opioid use disorder
- Differentiate between premenstrual dysphoric disorder and "normal" emotional changes related to the menstrual cycle
- Identify the impact of perimenopause on psychiatric symptoms and psychiatric disorders

Thursday

- Review untreated psychiatric disorders in pregnancy.
- Review of validated screening tools for depression, anxiety and substance use disorders in the perinatal period.
- Differentiation between baby blues, perinatal depression and postpartum depression and postpartum psychosis.
- Review of mood stabilizers, atypical antipsychotics, antidepressants, anxiolytic & hypnotic use in pregnancy & lactation.
- Introduction of zuranolone as treatment options for postpartum depression.

Friday

- Discuss unique aspects of treatment of opioid use disorder in women, including in the perinatal period.
- Discuss mental health concerns commonly experienced during the perimenopausal period.
- Identify appropriate treatment options for mental health symptoms and disorders during the perimenopausal period.
- Define premenstrual dysphoric disorder (PMDD) and identify treatments to aid with management of PMDD.

Session 11: Combining Pharmacotherapy & Psychotherapy

July 30 – 31, 2026 8:35 am – 12:35 pm
(2 Days Thursday – Friday)

David Mintz, MD, is a graduate of the University of Miami School of Medicine and the Cambridge Hospital/Austen Riggs Center Combined Residency Program. He completed a Fellowship in Psychodynamic Psychotherapy at the Austen Riggs Center, where he remained on staff as Director of Psychiatric Education and Associate Director of Training in the Fellowship in Psychotherapy and Adult Psychoanalysis. His clinical work focuses on complex, co-morbid, and treatment-resistant patients. To engage such patients, Dr. Mintz and colleagues have developed a patient-centered, psychodynamically informed approach to leveraging the pharmacotherapeutic alliance and addressing psychological resistances to the healthy use of treatment. His book *Psychodynamic Psychopharmacology: Caring for the Treatment-Resistant Patient*, and over a dozen other papers, explore these principles. He is a recent past leader of the Psychotherapy Caucus of the American Psychiatric Association and Psychotherapy Section Editor of *Psychiatric News*.



Course Description

Many patients suffer from conditions that are not adequately treated with medications or psychotherapy alone. The combination of pharmacotherapy and psychotherapy is one potentially potent strategy for maximizing outcomes for patients. In this course, we will consider implications of the standard of care for the mental health clinician in the trenches, including recommendations from treatment guidelines and evidence in support of concurrent or combined treatment. At a practical level, we will consider strategies for combining treatments, examining strengths and potential problems of different strategies in both split and combined treatments. For psychiatrists and other psychiatric prescribers integrating supportive, cognitive-behavioral, and psychodynamic therapy into 30-minute medication-focused appointments, we will consider how the added complexity of combining treatments translates into increased RVUs, and will explore effective documentation strategies. Clinically, we will examine ways that a psychotherapeutic focus on the patients' relationship to pharmacotherapy can be crucial for those patients with complex relationships with medications, with caregiving, or with health itself. We will elucidate techniques for exploring defensive uses of medicalization, object relations regarding medication, and transference aspects of pharmacotherapy. Lastly, we will consider pitfalls in the combination of psychotherapy and pharmacotherapy.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Describe implications of the evidence base and of treatment guidelines for combined or concurrent treatment
- Describe benefits and risks of different strategies for combining pharmacotherapy and psychotherapy
- Explore, psychotherapeutically, the meanings of medication to enhance integration and synergy between the 2 modalities
- Address potential antagonisms between pharmacotherapy and psychotherapy

Thursday

- Combining Pharmacotherapy & Psychotherapy: Strategies and Evidence

Friday

- Combining Pharmacotherapy & Psychotherapy: Technique and Documentation

Session 12: Engaging with Beauty as a Pathway to Resilience Through the Mindful Viewing of Films

August 3 – 7, 2026 9:00 am – 12:15 pm

(5 Days Monday – Friday)

Francis G. Lu, MD, is the Luke & Grace Kim Professor in Cultural Psychiatry, Emeritus, at the University of California, Davis. As a Distinguished Life Fellow of the American Psychiatric Association (APA), Dr. Lu has contributed to the areas of cultural psychiatry including the interface with religion and spirituality, psychiatric education, diversity and inclusion, mental health equity, and psychiatry and film. In 2008, the Association for Academic Psychiatry awarded him its Lifetime Achievement Award. The APA awarded him Special Presidential Commendations in both 2002 and 2016 for his contributions to cultural psychiatry, and in 2020, the APA Distinguished Service Award. In 2020, the Society for the Study of Psychiatry and Culture awarded him its Lifetime Achievement Award. In 2021, the American College of Psychiatrists awarded him its Distinguished Service Award. He leads annual film seminars at Esalen Institute, Big Sur, CA, since 1987, and Door County Summer Institute since 2014.



Course Description

Through mindful viewing of five memorable feature films, participants will open their hearts to engage with cinematic beauty as a pathway to resilience. Recent studies from neuroaesthetics have shown that experiencing beauty can activate the brain's emotional processing centers, which are critical for resilience, and the field of positive psychology has identified "Appreciation of Beauty and Excellence" as a correlated with life satisfaction. This seminar will offer a self-enhancing contemplative experience by presenting seminal films directed by Jean Renoir, Satyajit Ray, Sydney Pollack, and Martin Scorsese among others in which characters experience beauty as a way to resilient wellbeing. By mindfully viewing these films, seminar participants themselves will engage with beauty in this way. This workshop employs mindful film viewing, contemplative reflection, and group interaction focused on the participant's unique experience of carefully curated films. The viewing experience will be supported by 4K Blu-ray video projection on a large screen and surround sound of six loudspeakers. Films take on an exquisite cumulative power when shown at the DCSI in a group setting that is truly remarkable and unforgettable.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Describe how engaging with beauty can be a pathway to resilience
- Discuss how film characters experience beauty as a way to resilient well-being so as to identify these strengths in themselves and in their patients
- Utilize techniques of viewing of films from a mindfulness perspective in which inspiring characters experience beauty as a means to resilient well-being for the purpose of renewing these qualities in their lives
- Explain to patients how to view films from a mindfulness perspective in which inspiring characters experience beauty as a means to resilient well-being for the purpose of renewing these qualities in patients' lives

Session 12: Engaging with Beauty as a Pathway to Resilience Through the Mindful Viewing of Films

August 3 – 7, 2026 9:00 am – 12:15 pm

(5 Days Monday – Friday)

Monday

- "Renoir" (2012, Gilles Bourdos)
- Clips from films about Pierre-Auguste Renoir

Tuesday

- "The River" (1951, Jean Renoir)

Wednesday

- "Pather Panchali" (1955, Satyajit Ray)
- 8pm **optional on-CME session:** "Lawrence of Arabia" (1962, David Lean), part 1

Thursday

- "Out of Africa" (1985, Sydney Pollock). **Session ends at 1pm**
- 8pm **optional on-CME session:** "Lawrence of Arabia" (1962, David Lean), part 2

Friday

- "Kundun" (1997, Martin Scorsese)

Special Evening Session 13: Encountering the Beauty of Being in Tao Through the Mindful Viewing of Films

August 3 – 4, 2026 6:30 pm – 10:35 pm

(2 Days Monday – Tuesday)

Francis G. Lu, MD, is the Luke & Grace Kim Professor in Cultural Psychiatry, Emeritus, at the University of California, Davis. As a Distinguished Life Fellow of the American Psychiatric Association (APA), Dr. Lu has contributed to the areas of cultural psychiatry including the interface with religion and spirituality, psychiatric education, diversity and inclusion, mental health equity, and psychiatry and film. In 2008, the Association for Academic Psychiatry awarded him its Lifetime Achievement Award. The APA awarded him Special Presidential Commendations in both 2002 and 2016 for his contributions to cultural psychiatry, and in 2020, the APA Distinguished Service Award. In 2020, the Society for the Study of Psychiatry and Culture awarded him its Lifetime Achievement Award. In 2021, the American College of Psychiatrists awarded him its Distinguished Service Award. He leads annual film seminars at Esalen Institute, Big Sur, CA, since 1987, and DCSI since 2014.



Course Description

Through mindful viewing of three feature films, today's vehicles of myth and meaning, participants will open their hearts to encountering the beauty of being in Tao. The word *Tao* points toward a natural harmony that can be attained within everyday existence that is accompanied by a sense of the meaning of life itself as a source of resilience. This seminar will offer a self-enhancing mindfulness experience by presenting films by Wim Wenders, Yasujiro Ozu, and Akira Kurosawa in which characters experience the beauty of being in Tao. The films are being shown for the purpose of inspiring similar discoveries in the lives of the workshop participants and in their patients. This workshop employs mindful film viewing, contemplative reflection, and group interaction focused on the participant's unique experience of carefully curated films. The viewing experience will be supported by 4K Blu-ray video projection on a large screen and surround sound of six loudspeakers. Films take on an exquisite cumulative power when shown in a group setting that is truly remarkable.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Describe how the beauty of Tao can be a pathway to resilience
- Discuss how film characters experience the beauty of being in Tao as a way to resilient well-being so as to identify these strengths in themselves and in their patients
- Utilize techniques of viewing of films from a mindfulness perspective in which inspiring characters experience the beauty of being in Tao as a means to resilient well-being for the purpose of renewing these qualities in their lives
- Explain to patients how to view films from a mindfulness perspective in which inspiring characters experience the beauty of being in Tao as a means to resilient well-being for the purpose of renewing these qualities in patients' lives

Monday

- Perfect Days (2023, Wim Wenders)
- Tokyo Story (1953, Yasujiro Ozu), part 1

Tuesday

- Tokyo Story (1953, Yasujiro Ozu), part 2
- Ikiru (1952, Akira Kurosawa)

Session 14: Practical Neuropsychiatry for Clinicians: Prefrontal Function and Traumatic Brain Injury

August 3 – 4, 2026 8:30 am – 12:35 pm

(2 Days Monday – Tuesday)

Sheldon Benjamin, MD, is Professor of Psychiatry and Neurology at the University of Massachusetts T H Chan School of Medicine (UMass Chan), where he has served as Director of Neuropsychiatry since 1986. He served as Interim Chair of Psychiatry from 2017-2020, Director of the UMass Chan Neuropsychiatry Fellowship since 1989, founding director of the Combined Neurology/Psychiatry Residency Program from 1997-2020, and co-director of the UMass Chan Fellowship in Adult Neurodevelopmental Disabilities. He had the pleasure of serving as Visiting Professor in Neuropsychiatry at Kings College Institute of Psychiatry, Psychology, and Neuroscience in 2023. A graduate of the University of Cincinnati College of Medicine, he completed psychiatry residency training at Tufts New England Medical Center, neurology residency training at Tufts and Boston University, and a fellowship in Behavioral Neurology at the Boston University/Boston Veterans Administration Hospital.



Dr. Benjamin is currently one of the Psychiatry Directors of the American Board of Psychiatry and Neurology, a member of the Psychiatry Review Committee of the Accreditation Council on Graduate Medical Education (ACGME), secretary of the International Neuropsychiatric Association, and the international member of the Board of Directors for the Association of Social Pioneers, operators of the SARAH network of rehabilitation hospitals in Brazil. He has served as President of the American Association of Directors of Psychiatry Residency Training (AADPRT) and President of the American Neuropsychiatric Association (ANPA). He is a Distinguished Life Fellow of the APA, a Fellow of the American Academy of Neurology (AAN) and a Fellow of the American Neuropsychiatric Association. He is co-author of *The Brain Card*[®], a guide to comprehensive bedside neuropsychiatric examination; the *ACGME-ABPN Psychiatry Milestones*; the *APA Practice Guideline for the Treatment of Schizophrenia*; the *APA Practice Guideline for the Treatment of Borderline Personality Disorder*; and co-editor of the new textbook from APA Publishing, *Psychiatric Neurology: A Clinical Approach*.

Course Description

Neuropsychiatry is a field of study encompassing the psychiatric and clinical neurosciences relevant to the evaluation of brain-behavior relationships. This week we are going to keep it practical and clinically-oriented, focusing on how to evaluate people with traumatic brain injury, frontal/executive dysfunction, dementia, and autoimmune encephalitis. Along the way we will describe various historically famous neuropsychiatric disorders. I hope you will feel free to ask questions, bring forward case material from your practice, try out new cognitive assessment techniques and immerse yourself for 2 to 4 days in the exciting world of neuropsychiatry.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Demonstrate ability to diagnose the major frontal behavioral syndromes
- Define executive function and its importance in rehabilitation
- Use a pathophysiologic approach to predict behavioral sequelae of traumatic brain injury
- Utilize practical "bedside" neuropsychiatric assessment techniques to assess frontal and executive function

Session 14: Practical Neuropsychiatry for Clinicians: Prefrontal Function and Traumatic Brain Injury

August 3 – 4, 2026 8:30 am – 12:35 pm

(2 Days Monday – Tuesday)

Monday

- The Frontal Lobes: A User's Guide
- Why Mental Health Professionals Should Care About Executive Function
- Frontal syndromes and executive function made clear and understandable, with focus on the importance of executive function to psychosocial rehabilitation
- Bedside neuropsychiatric assessment techniques
- Case discussion

Tuesday

- Traumatic Brain Injury
- Neuropsychiatric Sequelae of Traumatic Brain Injury
- Predicting behavior from TBI pathophysiology, Prefrontal Syndromes, Clinical approach to brain injured patients
- Growing up Without Frontal Lobes: The Story of JP
 - This is the first case of neonatal brain injury with lifelong follow-up

Session 15: Assessment & Treatment of Patients with Severe Personality Disorders: An Integrative, Clinically Grounded Approach

August 3 – 4, 2026 8:35 am – 12:35 pm

(2 Days Monday – Tuesday)

Robert E. Feinstein, MD, is a Professor of Clinical Psychiatry at Donald and Barbara Zucker Hofstra/Northwell School of Medicine in Long Island, New York where he teaches and supervises. He graduated from New York University Medical School and completed his psychiatric residency at Albert Einstein College of Medicine. For the last four years, he has been Chief Medical Officer and Director Education at Televero Health. He is a nationally and regionally recognized psychotherapist, psychoanalyst, and psychiatry educator with more than forty years of experience in designing psychotherapy curricula, teaching, supervising and mentoring residents and other mental health disciplines. He has special expertise in treating complex personality disorders and supervising clinicians in evidence-informed psychotherapy. He is a University of Colorado Denver President's Teacher's Scholar. Four-time Teichner Scholar of The American Academy of Psychoanalysis and Dynamic Psychiatry. In 2023 he received the Association of Academic Psychiatry Educator Award for his work on the Apprenticeship Model of Psychotherapy Training and Supervision. He has over 100 peer reviewed publications on supervision, psychotherapy, personality disorders, psychiatric education, integrated mental health care, suicide and violence prevention, and wellness. Dr. Feinstein recently edited *Primer on Personality Disorders* published by Oxford University Press in January of 2022.



Course Description

This intensive two-day program provides mental health professionals with a practical, evidence-informed framework for assessing and treating patients with severe personality disorders. The course integrates strategies, tactics, and interventions drawn from six empirically supported psychotherapies: Transference-Focused Psychotherapy (TFP), Mentalization-Based Treatment (MBT), Dialectical Behavior Therapy (DBT), Cognitive Therapy, Schema Therapy, and Good Psychiatric Management (GPM). The program is grounded in an eclectic, primarily psychodynamic approach, emphasizing real-world clinical decision-making, treatment framing, and management of complex presentations and psychotherapeutic treatments.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Integrate assessment and treatment strategies from six empirically supported psychotherapies to formulate and manage care for patients with severe personality disorders
- Identify and evaluate levels of personality organization, mental functioning, and defensive patterns to support accurate diagnosis, risk assessment, and treatment planning
- Apply structured treatment-frame, crisis-management, psychotherapeutic strategies tactics, and interventions when treating patients with borderline and narcissistic personality disorders
- Identify and discuss cases and receive supervision and group discussion about treatment strategies

Session 15: Assessment & Treatment of Patients with Severe Personality Disorders: An Integrative, Clinically Grounded Approach

August 3 – 4, 2026 8:35 am – 12:35 pm

(2 Days Monday – Tuesday)

Monday

- Diagnosis and clinical management of personality disorders (with film-based illustrations)
- Establishing and maintaining the treatment frame
- Managing emergencies and high-risk situations
- Conducting effective psychotherapy sessions
- Live supervision: participant case presentations
- Levels of personality organization and assessment of mental functioning and defenses

Tuesday

- The “Big Six” treatments for personality disorders: core principles, commonalities, and key differences
- Assessment and treatment of Borderline Personality Disorder
- Live supervision: participant case presentations
- Assessment and treatment of Borderline and Narcissistic Personality Disorders

Session 16: Practical Neuropsychiatry for Clinicians: The Neuropsychiatry of Memory, Molecular Mimicry and Memorable Maladies

August 6 – 7, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Sheldon Benjamin, MD, is Professor of Psychiatry and Neurology at the University of Massachusetts T H Chan School of Medicine (UMass Chan), where he has served as Director of Neuropsychiatry since 1986. He served as Interim Chair of Psychiatry from 2017-2020, Director of the UMass Chan Neuropsychiatry Fellowship since 1989, founding director of the Combined Neurology/Psychiatry Residency Program from 1997-2020, and co-director of the UMass Chan Fellowship in Adult Neurodevelopmental Disabilities. He had the pleasure of serving as Visiting Professor in Neuropsychiatry at Kings College Institute of Psychiatry, Psychology, and Neuroscience in 2023. A graduate of the University of Cincinnati College of Medicine, he completed psychiatry residency training at Tufts New England Medical Center, neurology residency training at Tufts and Boston University, and a fellowship in Behavioral Neurology at the Boston University/Boston Veterans Administration Hospital.



Dr. Benjamin is currently one of the Psychiatry Directors of the American Board of Psychiatry and Neurology, a member of the Psychiatry Review Committee of the Accreditation Council on Graduate Medical Education (ACGME), secretary of the International Neuropsychiatric Association, and the international member of the Board of Directors for the Association of Social Pioneers, operators of the SARAH network of rehabilitation hospitals in Brazil. He has served as President of the American Association of Directors of Psychiatry Residency Training (AADPRT) and President of the American Neuropsychiatric Association (ANPA). He is a Distinguished Life Fellow of the APA, a Fellow of the American Academy of Neurology (AAN) and a Fellow of the American Neuropsychiatric Association. He is co-author of *The Brain Card*[®], a guide to comprehensive bedside neuropsychiatric examination; the *ACGME-ABPN Psychiatry Milestones*; the *APA Practice Guideline for the Treatment of Schizophrenia*; the *APA Practice Guideline for the Treatment of Borderline Personality Disorder*; and co-editor of the new textbook from APA Publishing, *Psychiatric Neurology: A Clinical Approach*.

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Neuropsychiatry is a field of study encompassing the psychiatric and clinical neurosciences relevant to the evaluation of brain-behavior relationships. This week we are going to keep it practical and clinically-oriented, focusing on how to evaluate people with traumatic brain injury, frontal/executive dysfunction, dementia, and autoimmune encephalitis. Along the way we will describe various historically famous neuropsychiatric disorders. I hope you will feel free to ask questions, bring forward case material from your practice, try out new cognitive assessment techniques and immerse yourself for 2 to 4 days in the exciting world of neuropsychiatry.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Explain the proposed mechanism of memory and be able to diagnose common dementias
- Identify several amnesias & hypermnesias
- Describe autoimmunity and molecular mimicry as possible causes of psychiatric syndromes, using autoimmune limbic encephalitis as a model
- List modern lessons of at least 2 of 6 classic neuropsychiatric case descriptions

Session 16: Practical Neuropsychiatry for Clinicians: The Neuropsychiatry of Memory, Molecular Mimicry and Memorable Maladies

August 6 – 7, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Thursday

- Memory and Its Disorders
- Forgetting to Remember, Remembering to Forget: A Neuropsychiatrist Thinks About Memory
- A Practitioners Guide to Common Dementias
- Diagnosis and management of dementias
 - With emphasis on those that often present to mental health professionals

Friday

- Molecular Mimicry and Memorable Maladies
- Molecular Mimicry in Psychiatry
- Neuropsychiatric lessons of the great encephalitis lethargica epidemic, Autoimmune Limbic Encephalitis and the future of neuropsychiatry
- The 6 Neuropsychiatric Cases that All Clinicians Should Know
 - Phineas Gage (frontal dysfunction)
 - Victor LeBorgne (expressive aphasia)
 - Auguste Deter (Alzheimer's disease)
 - Solomon Shereshevsky (hypermnnesia)
 - Jimmy Pickrell (neonatal brain injury)
 - Henry Molaison (anterograde amnesia)

Session 17: Managing Pharmacodynamic Drug Interactions for Improved Psychiatric Outcomes

August 6 – 7, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Paul Zarkowski, MD, is a Senior Psychiatric Supervisor at Sound Behavioral Health in Seattle and serves as Clinical Associate Professor in the Department of Psychiatry and Behavioral Sciences at the University of Washington. There Dr Zarkowski sees patients in the Psychiatric Emergency Service at Harborview Medical Center and lectures on mood and anxiety disorders as well as the evaluation of geriatric patients.

He has published journal articles and book chapters on improving suicide assessment, addressing the clinical needs of special populations, and using EEG in psychiatric applications. Ongoing research interests include strategies for improving psychiatric medication regimens for optimum outcomes.



Course Description

Multiple studies have shown the increasing prevalence of polypharmacy, particularly in the prescription of psychiatric medications. As medication regimens get longer, the potential for drug drug interactions increases dramatically. Although there is abundant evidence on pharmacokinetic interactions, e.g. CYP P450, and pharmacodynamic interactions that are dangerous, e.g. prolongation of QTc, there is far less evidence to guide clinicians on functional pharmacodynamic interactions that may limit efficacy. Each of the pharmacodynamic interactions in this presentation will meet one of three basic criteria:

1. Antagonism at the primary receptor of mechanism of action.
2. Medications that do not share a primary receptor of medication of action, but have opposing clinical indication and side effect profile.
3. Medications with unrelated indication, side effect profile and primary receptor of mechanism of action, but with clinical studies confirming the presence of an efficacy limiting interaction in humans, rats, or mice.

Although combinations of medications are increasing in clinical practice there are relatively few clinical studies to support their use. Due to the lack of studies as an evidence basis, prescribing software often does not alert clinicians to the presence of an efficacy limiting pharmacodynamic interaction. A working understanding of practical psychopharmacology is necessary to anticipate efficacy limiting interactions in both the medications we prescribe, but also prescribed by other medical specialists for our patients.

Learning Objectives

Participants who engage in this education intervention will be able to:

- List common efficacy limiting interactions for each major neurotransmitter in psychiatric practice
- List the medications primary care doctors and other specialists may be prescribing for your patients that will limit efficacy
- Distinguish between adjunctive medication to address side effects and efficacy limiting interactions
- Identify treatment alternatives that avoid efficacy limiting interactions

Session 17: Managing Pharmacodynamic Drug Interactions for Improved Psychiatric Outcomes

August 6 – 7, 2026 8:30 am – 12:35 pm

(2 Days Thursday – Friday)

Thursday

- Brief Review of Pharmacological Interactions
- Interactions involving Dopamine: Stimulants and D2 Blockers
- Interactions involving Epinephrine I: Atomoxetine and Beta Blockers
- Epinephrine II: SNRIs and Alpha I Blockers
- Epinephrine III: Mirtazapine and Alpha II Agonists
- Interactions involving Amphetamine and Benzodiazepines

Friday

- Interactions involving Serotonin I: Clozapine and SSRIs
- Serotonin II: SSRIs and Serotonin Antagonists
- Serotonin III: Hallucinogens and Serotonin Antagonists
- Interactions involving Acetylcholine: Donepezil and Anticholinergic Medication
- Interactions only Evident In Vivo I: Opioid Blockers and Tricyclic Antidepressants
- Interactions only Evident in Vivo II: Opioid Blockers and Ketamine

Lodging

Lodging in July and August is in great demand; you must make reservations early. A block of suites has been set aside at the Landmark Resort. **These suites will be held until June 5th, 2026, or until filled.**

From its site on the bluff, the Landmark offers outstanding views of the waters of Green Bay with 294 units comprised of 1, 2, and 3-bedroom suites. Facilities include the Carrington Pub and Grill, 1 indoor and 3 outdoor pools, 2 tennis courts, whirlpools, steam rooms, and a fitness center and game room. The Landmark Resort is Door County's largest and best full-service facility.

The Landmark Resort
4929 Landmark Drive
Egg Harbor, Wisconsin 54209
Reservations: (800) 273-7877
<http://www.thelandmarkresort.com>

To book through our discounted group rate, please call the Landmark reservation line at (800) 273-7877 and state that you are attending the Door County Summer Institute. No group code is required.

Group rates cannot be booked online.



Photo taken by the Landmark Resort

Psychology CE Credit Statement



The Medical College of Wisconsin is approved by the American Psychological Association to sponsor continuing education for psychologists. The Medical College of Wisconsin maintains responsibility for this program and its content.

This activity contains content or processes that may be potentially stressful.

Learning Objectives

Participants who engage in this education intervention will be able to:

- Identify current evidence-based practice guidelines for topic areas presented
- Articulate their responses to humanities-based stimuli such as films and improvisation exercises
- Analyze psychodynamic and cognitive issues that surround and influence psychopharmacologic and somatic treatments

Disclosure

Consistent with ACCME policy, faculty for all MCW continuing education programs must disclose all relevant financial relationships with commercial organizations. MCW has a mechanism in place to identify and resolve conflicts in advance of the DCSI.

ACCME Accreditation Statement

The Medical College of Wisconsin is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Designation of Credit Statement

The Medical College of Wisconsin designates each five-day session of this live activity for a maximum of 15 *AMA PRA Category 1 Credits*[™] and each two-day session for a maximum of 8 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Hours of Participation for Allied Health Professionals

The Medical College of Wisconsin designates each week-long session of this live activity for up to 15 hours of participation for continuing education for allied health professionals and each two-day session for a maximum of 8 hours of participation for continuing education for allied health professionals.

Tuition and Refunds

Tuition for 5-day sessions (3 hrs/day) is \$785. Tuition for 2-day sessions (4 hrs/day) is \$455. Graduate and medical students and resident physicians will have a discounted rate, so please contact Caimen at summerinstitute@mcw.edu to inquire about this discount.

To receive a refund, the request must be made at least 15 days before the requested session begins and a \$50 cancellation fee will be deducted from the refund amount. If the refund request is received less than 15 days before the session begins, the full registration fee will be forfeited.

Early Bird! Tuition for 5-day sessions will be reduced to \$735 and \$430 for 2-day sessions, if received by June 1, 2026.

Registration Fees

5-Day Sessions:

Before June 1, 2026	After June 1, 2026
\$735	\$785

2-Day Sessions:

Before June 1, 2026	After June 1, 2026
\$430	\$455

How to Register

Please note that MCW accepts payment by Visa, MasterCard, and Discover. If you do not already have an EthosCE account, select Create Account in the upper right-hand corner and enter all the required information. You will need to access this account again to complete a course evaluation and print your CE certificate, so please make a note of your username and password. You can access our registration page by going to: ocpe.mcw.edu/2026DCSI

*****The deadline for claiming credit is November 30, 2026, after which you will not be able to obtain your credits*****

Register and Pay for a Session

Log in to your newly created or existing Ethos account, then select:

1. Specialties > Psychiatry & Behavioral Health > The 39th Door County Summer Institute
2. Go to the Register tab on the session(s) you selected from previous page
3. Click Checkout to pay or Continue Shopping to add another session

[**Register Here**](#)

Carlyle Chan, MD
DCSI Director & Founder



Caimen Masterson, MBA
DCSI Coordinator



Questions? Contact Us



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www.mcw.edu/dcsi



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THE 39TH

DOOR COUNTY SUMMER INSTITUTE

JULY 20 - AUGUST 7, 2026 | EGG HARBOR, WI