OKLAHOMA PSYCHIATRIC PHYSICIANS ASSOCIATION

Oklahoma Psychiatry

A district branch of the American Psychiatric Association — *October, November, December 2025*

Inside this issue:

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OCCAP and OPPA receive second ACCAP grant

For the second time, the ***Oklahoma Council of Child and Adolescent Psychiatry (OCCAP)*** in collaboration with the ***Oklahoma Psychiatric Physicians Association (OPPA)*** has received an **Assembly Advocacy and Collaboration Grant** awarded by the ***American Council of Child and Adolescent Psychiatry (AACAP).***

This $2,500 grant project involves the production and dissemination of a video product that focuses on the importance and positive impact of gun safety practices. The video, currently titled *"Gun Safety Education for Clinicians, Patients and Families"* will include segments with clinicians, gun safety experts/police officers, and family members impacted by youth gun violence. Also include will be discussion on the legislative actions taken by other states. The combination of these participants will result in a video that provides guidance on safety measures, on clinical perspective and family impact as well as potential legislative measures.

The reason to promote gun safety is clear. It is all too often that we hear of gun violence involving youth as victims and perpetrators. Mass shootings receive the most press attention with recent incidents where youths have taken the lives of other youths. Beyond these horrific events, gun violence impacts youth every day.

In Oklahoma, there has been a 27% increase in the overall gun death rate from 2014 to 2023. In 2023, the state had the 5th highest gun suicide rate in the U.S. And in 2023, three in every five suicides in Oklahoma were committed using a firearm. In 2019, 35 children and teens committed suicide by firearm, and among Oklahoma youth ages 10-24, the suicide rate increased 41% since 2006, compared to a 33% increase nationally, with much of that increase among young women.

Domestic violence homicides in Oklahoma are rising. In 2023, there were 122 domestic violence homicide victims, the highest number since reporting began in 2002. Firearms play an outsized role. In 2022, 61% of domestic violence homicides were committed with a gun. Even if youth are not the victims of domestic violence, the consequences are devastating.

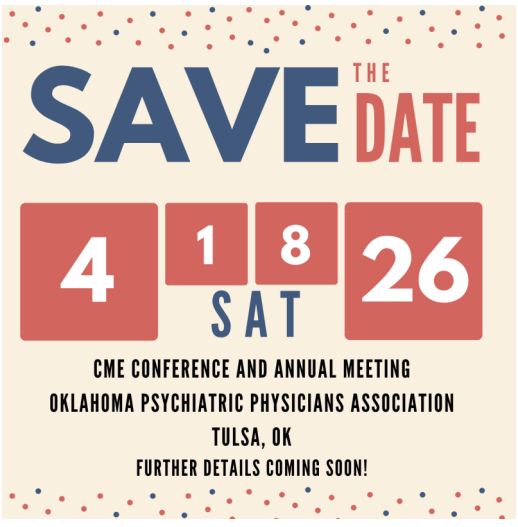
This project will focus on increase awareness and knowledge of the critical need for gun safety for clinicians, patients, families and legislators. If a clinician, for example, has an at-risk patient, the clinician would have access to information on gun safety practices that could be provided to the patient/family. We expect educators to use our video to educate youth on gun safety importance. Legislation is another key area, especially in Oklahoma where we have no child-access-prevention (CAP) law. A Rand study showed that states with such a law had lower rates of firearm death. We expect to present our video to state legislators in order to increase awareness of the issue.

Other collaborating partners include the International Society of Reproductive Psychiatry, Healthy Minds Policy Initiative, Comanche Nation Tribal Members, and the Central Oklahoma Psychiatric Society.

The timeline for the 2026 project include January-April developing project materials, developing distribution and legislative plan, and recruiting talent and processing facilities and equipment. May-June will focus on developing and reviewing the video followed by production, promotion and distribution. Please contact the OPPA if you are interested in helping with this grant project.

This is the second video which has been funded by an AACAP grant. The first was in 2024 which awarded funds to produce the ***"Let's Talk About Marijuana"*** video project. This video is available **FREE** for anyone to use as an educational tool.

Click HERE. ***to watch the marijuana video*** or you may use the ***QR Code*** found on Page 6.❖



The final nail in Griffin Hospital's Norman coffin

Andy Rieger

***Andy Rieger*, Retired Norman Transcript editor.**

His grandfather, Dr. Joseph A. Rieger, was a staff psychiatrist at Griffin Hospital in the hospital's early days.

His grandfather's family lived in a home on State Drive.

Andy's mother, Marilyn Rieger, was a dietitian at the hospital for many years.

By Andy Rieger

The state mental health department's purchase of the former Hillcrest Hospital in south Oklahoma City this month may be the final nail on the Griffin Hospital's Norman coffin. The purchase and planned $60 million renovation is far less than the $250 million originally requested to build a hospital near the OSU-OKC campus.

Meanwhile the City of Norman has announced plans to purchase land for a permanent homeless shelter on state land south of the former hospital. Carving up of the Griffin land seemed inevitable even though some of us held out hope the state would reconsider its decision to abandon Norman.

Can you imagine what such a remodeling budget would have done for the neglected Griffin buildings.

The line has always been the buildings on the Norman Griffin campus are in such poor shape that they aren't worth saving. If that's the case, many of the structures on the OU campus would have been abandoned years ago. The state has habitually neglected maintenance on the buildings.

Imagine what Evans Hall or the Field House on the OU campus would look like if the university didn't plan for the upkeep. Look at the beautiful remodels of Jacobsen Hall and Holmberg Hall.

The hospital's chapel, once a beautiful interfaith meeting place, has water damage throughout. Like prisons, mental health has a limited constituency. There are advocates for sure but the announcement to build a new mental hospital doesn't generate the enthusiasm like a basketball arena or football stadium.

Norman has a long tradition of caring for the mentally ill. It actually started more than 130 years ago when 53 Oklahomans boarded a train in Jacksonville, Ill. They were bound for the prairie town of Norman, and the newly opened private sanitarium that would care for them. That was the beginning of what is now known as Griffin Memorial Hospital, on the city's near east side.

Prior to 1895, Oklahoma Territory contracted out its mental patients to the state of Illinois. However, when the failed High Gate Academy buildings on the east end of Norman's Main Street became available an opportunity arose. Some Oklahoma doctors formed the Oklahoma Sanitarium Co. and contracted with the territorial legislature to care for the patients closer to their families The sanitarium later became a state institution, Central State Hospital. The name was later changed to honor Dr. David Griffin, an early-day hospital psychiatrist and administrator.

Inscribed on the hospital's Main Street front gate was "Norman Institute for Violently Mentally Insane." Legend has it that Griffin, a psychiatrist from North Carolina, personally chiseled the word "Insane" off the sign in an early attempt to reduce the stigma of mental illness.

Thousands of patients have received care at the hospital which, at one time, employed hundreds of Oklahomans. It was a gated city within our city. The hospital had a dairy, cattle operation, gardens, laundries, an ice and power plant and recreational areas for patients. Most patients had jobs within the institution. Doctors and administrators lived on the grounds with their families.

A portion of the costs of the new OKC Donahue hospital will come from the recent sale of the Norman property, including Griffin Park, to the City of Norman and, potentially, private developers. There's no doubt the state needs better facilities to treat one of our most vulnerable populations. Too bad the caring community of Norman won't be part of that future solution.

Editor's Note: *Reprinted with permission from Andy Rieger, The Norman Transcript, Sunday, November 30, 2025, Page A4.*

Pictured below is the original Oklahoma Sanitarium Company building circa 1900. ❖

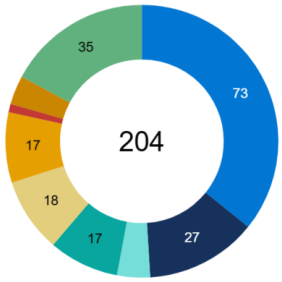
Membership Update | January-December 2025

Welcome New Members!

Barham, Caroline MD (RFM)
Boyer, Emily MD (GM)
Enoh, Jim DO (RFM)
George, Elizabeth DO (GM)
Hill, Kyle MD (RFM)
Iftikhar, Zain MD (RFM)
Kulbe, Jacqueline MD (RFM)
Louderback, Sara DO (RFM)
Miller, Genevieve MD (GM)
(Transfer from Ohio)
Mueller, Heath MD (GM)
Naberhaus, Bryce DO (RFM)
Nagumalli, Sridevi MD (GM)
Perry, Brett MD (RFM)
Sadiq, Afia MD (GM)
Sanchez, Servando MD (RFM)
Shafaque, Kosan MD (RFM)
Soderling, Remington DO (RFM)
Thakur, Priya DO (RFM)
Webb, Jordan DO (RFM)
Woody, Kalee DO (RFM)
(Transfer from Missouri)
York, Lauren DO (RFM)

Welcome Back! Reinstatements

Al Botros, Adonis MD (GM)
Betsch, Brandon MD (RFM)
Dunlap, Michael DO (GM)
Graham, Caroline DO (RFM)
Henneberry, James MD (GM)
Hicks, Chandler DO (RFM)
Igo, Nikki DO (RFM)
Kurkjian, Natalie MD (GM)
Medlin, Mark MD (GM)
Morris, Anthony MD (GM)
Olcott, Missy DO (RFM)
Reichenberger, Baili DO (GM)
Sanders, Jeffrey MD (GM)
Waller, Andrew MD (GM)
Yadack, Audra MD (GM)
Zafar, Rehan MD (RFM)



Goodbye & Good Luck! Transfers Out

Chakraburtty, Amal MD (GM)
(Transfer to Florida)
Deval, Nikita DO (RFM)
(Transfer to New York)
Kowalski, Peter MD (GM)
(Transfer to Arizona)
Lemens, Tara MD (GM)
(Transfer to Texas)
Sanchez, Servando MD (RFM)
(Transfer to Texas)

Current Membership

73 General Members
27 Fellows
8 Distinguished Fellows
35 Resident Fellows
18 Distinguished Life Fellows
17 Life Fellows
17 Life Members
9 Inactive Members/Fellows

TOTAL 204

Expired Memberships April 1, 2025

Fellow and Life Members

Deshpande, Swapna MD
Owen, Jeffry DO
Rahhal, John MD
Speer, Joe MD

General Members

Bingman, Jana MD
Bruns, Cynthia DO
Carr, Branden DO
Hall, Heather MD
Harvey, John MD
Khalsa, Sahib MD
Liew, Andrew MD
Lukac, Marina DO
Patel, Nilam MD
Whinnery, Chance MD
Yost, Stefan MD
Youman, Kari MD

Resident Fellows

Beck, Samantha MD
Clay, Cree MD
Garber, Jay MD
Gutierrez, Jana MD
Nguyen, Sarah DO
Odom, Erik DO
Rahimi, Meherzad MD
Rouyanian, Armeen DO

Congratulations | New Fellows and Distinguished Fellows

The ***American Psychiatric Association*** announced the new **Fellows** and **Distinguished Fellows** for 2026. ***Fellowship*** status is an honor that reflects your dedication to the work of the APA and the OPPA and signifies your allegiance to the psychiatric profession. ***Distinguished Fellowship*** is awarded to outstanding psychiatrists who have made significant contributions to the psychiatric profession in at least five of the following areas: administration, teaching, scientific and scholarly publications, volunteering in mental health and medical activities of social significance, community involvement, as well as for clinical excellence. The convocation will be held at the upcoming spring APA annual meeting and scientific conference.

Oklahoma 2026 Distinguished Fellows

Jason Beaman, DO, MPH, MS
Sara Coffey, DO
Ondria Gleason, MD
Lauren Schwartz, MD

Oklahoma 2026 Fellows

Jennifer Morris, MD
Ayesha Sattar, MD
Anton Surja, MD
Aaron Tabor, MD
Satwant Tandon, MD
Audra Yadack, MD

Editor's Note: Watch for spotlights on each new Fellow and Distinguished Fellow coming in your next issue of Oklahoma Psychiatry. ❖

PsychEdge: A new 2026 Member Benefit designed for you!

Building on the creative and dedicated work by six ***American Psychiatric Association District Branches***, a new year-long APA member benefit virtual education series **PsychEdge** will premier January 13, 2026 at 7:00 pm (Central Time) with the first webinar titled, ***"Contract Negotiations: Getting the Edge"*** with **Amal Elmogahzy**, Physician Recruitment Expert, presenting. She will share her insider strategies to help you evaluate and negotiate contracts confidently, ensuring you make informed career decisions across practice settings. ***Registration is required.***

In 2024, working together, the *Oklahoma Psychiatric Physicians Association, Colorado Psychiatric Society, New York County Psychiatric Society, Psychiatric Medical Association of New Mexico, Northern California Psychiatric Society and the Minnesota Psychiatric Society* created and hosted a four-part *Early Career Psychiatric Series* which premiered in January 2024 as a FREE APA member benefit educational opportunity. Winning the APA Assembly District Branch Best Practice Award in 2025 for the *Early Career Psychiatric Series*, the APA Assembly Awards Committee noted they were particularly impressed by the collaborative efforts of the six district branches.

PsychEdge, knowledge that moves you forward, continues to be a collaborative effort between six district branches however the Florida Psychiatric Society has replaced the Minnesota Psychiatric Society as a program sponsor. The PsychEdge virtual education series will be held on the second Tuesday of every month. It is **FREE to all APA members**. CME will be offered for six of the 12 monthly events in 2026.

Other **PsychEdge** programs currently scheduled include:

February 10 – ***AI in Forensic Psychiatry***

March 10 – ***Metabolic Psychiatry: Nutritional Supplements for Brain Energy***

April 14 – ***Addiction Psychiatry***

If you are not a member of the APA/Oklahoma Psychiatric Physicians Association, you are welcome to register and attend however the cost will be **$30 per program**.

To register for the upcoming January 13th virtual program, please click **HERE**. Please note you will be directed to a registration link from the ***New York County Psychiatric Society*** who is maintaining the registration roster.

For additional information or to use the **QR code to register**, please see the **PsychEdge** flyer on **Page 5.** ❖

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PsychEdge

Knowledge That Moves You Forward

VIRTUAL EDUCATION SERIES | SECOND TUESDAY EACH MONTH | FREE FOR APA MEMBERS

FEATURED UPCOMING WEBINAR

Next Session - January 13, 2026
at 8pm ET

Contract Negotiations: Getting the Edge

with Amal Elmogahzy
Physician Recruitment Expert

Join us for the first session in the PsycheEdge 2026 webinar series!

Amal will share her insider strategies to help you evaluate and negotiate contracts confidently, ensuring you make informed career decisions across practice settings.

REGISTER

FREE FOR ALL APA MEMBERS
$30 FOR NON-MEMBERS

https://bit.ly/PsychEdge2026

Coming Soon on PsychEdge

February 10, 2026
AI in Forensic Psychiatry

March 10, 2026
Metabolic Psychiatry: Nutritional Supplements for Brain Energy

April 14, 2026
Addiction Psychiatry

...and more sessions through 2026 including topics on Advocacy, DEIA, and Private Practice!

CME will be offered for 6 of the 12 events in 2026.

ABOUT PsychEdge

PsychEdge is an award-winning, collaborative virtual education series created by APA District Branches to bring psychiatrists timely, practical insights that enhance their practice and professional growth.

Colorado Psychiatric Society
Psychiatric Medical Association of New Mexico
NYCPS New York County Psychiatric Society
Oklahoma Psychiatric Physicians Association
NCPS Northern California Psychiatric Society
Florida Psychiatric Society

Editorial

Primum tibi ne noceas – First, do no harm to yourself

Harold Ginzburg, MD
Editor
Oklahoma Psychiatry

As I sit at my computer, after the more traditional New Year, I again review the ***"2025 Holiday Resilience Guide,"*** written by the Employee Assistance Program of the United States government, sent to me curtesy of the United States Coast Guard. I did not serve with the US Coast Guard, and why they communicate with me is a strange story for another day.

In any case, they acknowledge what almost all clinical psychiatrists are aware of, ***"The holiday season can bring challenges and stresses for various reasons."*** For those on active duty, in the military, there is the balancing of operational commitments, protecting national interests, and navigating family obligations. The Coast Guard is an armed military service whose mission is to protect our water borders. Psychiatrists are armed with knowledge, wit, and compassion to protect the public from itself. The other branches of the military and law enforcement protect the Coast Guard at sea. Psychiatrists have the protection of their family, colleagues and, on occasion, their own common sense. It is often easier to be protected from an armed adversary than from our own sense of professional invincibility. We take risks we should not be taking, and the longer we do so, the more 'at risk' we become.

The **WHO/ICD-11** *[in this country we still are using ICD-10]* classifies *'burnout'* as an occupational phenomenon rather than a medical disorder. Burnout results from chronic workplace stress that has not and is not being properly managed, and includes **(a)** energy depletion, **(b)** increased mental distance from one's job or rising cynicism and **(c)** reduced professional efficacy.

Maslach, a social psychologist, whose research focus has been on occupational burnout, has a three-dimensional model of burnout: emotional exhaustion, depersonalization and reduced personal accomplishment.

"Maslach, a social psychologist, whose research focus has been on occupational burnout, has a three-dimensional model of burnout: motional exhaustion, depersonalization and reduced personal accomplishment."

The symptoms are:

(a) **emotional** – feelings of exhaustion, detachment and cynicism,

(b) **cognitive** – diminished sense of accomplishment and inefficiency and

(c) **physical** – fatigue, headaches, and gastrointestinal issues or, in general, somatization issues.

The key risk factors include:

(a) prolonged high stress levels,

(b) conflicts between personal values, family values and job demands, the latter often self-imposed,

(c) lack of autonomy, support and alignment with one's goals; one cannot provide any significant psychotherapy during a 15- or 20-minute *'med check,'* and

(d) excessive workload and insufficient breaks or rest periods.

The potential impacts of burnout include the physical symptoms noted above, mental health changes including increased anxiety, depression, and change in sleep pattern, and behavioral changes of increased irritability, detachment and substance misuse.

The system stressors are known to all practitioners and can only be partially controlled by clinicians, and they include high caseloads, administrative burdens, the emotional toll of patient care and system inefficiencies. So, be kind to yourselves, your families and your patients, and take care of yourselves by recognizing that the system has functioned without you and, in the future, shall function without you. Time with friends and family, time away from patients and health care systems, time doing what is ***'fun,'*** always contributes to one being a happier and more productive person and a clinician. ❖

Let's Talk About Marijuana
WATCH VIDEO
OKLAHOMA PSYCHIATRIC PHYSICIANS ASSOCIATION
WWW.OKLAPSYCHIATRY.ORG

COPS presents programs on aggression behavior and violence risk assessments

On November 14th, the quarterly meeting of the **Central Oklahoma Psychiatric Society** (COPS), the Oklahoma City chapter of the *Oklahoma Psychiatric Physicians Association*, was held via Zoom. The OU College of Medicine designated this live activity for a maximum of *2.00 hours of AMA PRA Category 1 Credit™*.

The OU College of Medicine designated this live activity for a maximum of *2.00 hours of AMA PRA Category 1 Credit™*.

Shahnaz Kasmani, MD

Presenting ***"Treatment of Aggressive Behavior in Children and Adolescents"*** was presented by **Shahnaz Kasmani, MD**.

Dr. Kasmani graduated medical school at Liaquat Medical College in Pakistan followed by residency in adult psychiatry at Philadelphia's Einstein Medical Center before moving to Tulsa to finish a Fellowship in Child and Adolescent Psychiatry at the University of Oklahoma. Dr. Kasmani is currently employed in the Child and Adolescent Psychiatry program at OU Tulsa as a clinical assistant professor. Her clinical practice focuses on children's behavioral issues, such as irritability and aggression, as well as mood disorders and neurodevelopmental disorders.

During her presentation, Dr. Kasmani discussed managing the most prevalent forms of aggression in children, particularly those with neuropsychiatric developmental disorders, such as mood swings, irritability, hyperactivity, and anger, remains challenging.

There are no specific guidelines for pharmaceutical intervention in this condition. Two second-generation antipsychotics, aripiprazole and risperidone, have FDA approval for treating aggression and irritability in children and adolescents. These drugs are currently the main ones used to treat aggression, but these drugs also carry significant potential side effects, including "metabolic disorder, movement disorder (Extrapyramidal symptoms-EPS), hormonal imbalance such as hyperprolactinemia," to name a few.

Two important drugs that stand out as safe and efficient glutamatergic system stabilizers are amantadine and its counterpart memantine. Amantadine's antagonistic effects on the N-methyl-D-aspartate (NMDA) receptor are the cause of the decrease in aggression. It reduces the harmful effects of the glutamatergic neurotransmitter system, which are important in many mental illnesses. The use of amantadine to treat aggressive behavior in patients with autism spectrum disorders, traumatic brain injuries and developmental disabilities is becoming increasingly supported by research.

The second presentation, ***"Violence Risk Assessment for General Mental Health Clinicians"*** was by **Britta Ostermeyer, MD.**

Britta Ostermeyer, MD

Dr. Ostermeyer is the Paul and Ruth Jonas Chair in Mental Health and Professor and Chairman of the Department of Psychiatry and Behavioral Sciences, College of Medicine, at the University of Oklahoma in Oklahoma City. She is also the Chief of Psychiatry for OU Health.

Dr. Ostermeyer has a long-standing interest in administrative and forensic psychiatry and has published over 230 scholarly writings. She also received a number of awards, including the Rappaport Fellowship in 2002 and the 2024 Red Apple Award by the American Academy of Psychiatry and the Law, the 2007 Gold Award for Service Achievement and the 2019 George Tarjan Award from the American Psychiatric Association, the 2009 Excellence in Community Service Award from the Texas Hospital Association for integrated mental health services, and the 2019 Gordon Deckert Award for Sustained Excellence in Teaching in the Department of Psychiatry and Behavioral Sciences at OU.

She is a Distinguished Fellow of the American Psychiatric Association and presently serves as Treasurer, American Academy of Psychiatry and the Law and is a Board Member of the Forensic Section of the World Psychiatric Association.

In her presentation, Dr. Ostermeyer discussed the relationship between violence and mental illness. She also identified violence risk factors and explained how to conduct clinical risk assessments.

The next meeting of the **Central Oklahoma Psychiatric Society** will be another **FREE ZOOM** webinar held in either February or March.

If you **do not receive notices** for the COPS quarterly programs and wish to be placed on the email list, please send your name and preferred email address to:

centralokpsych@gmail.com.

Those who live outside of the Oklahoma City metro area are welcome to attend any or all of the COPS CME programs whether in-person or via webinar. ❖

Highlights from the approved minutes of the July 26, 2025 Executive Council meeting held via Zoom Conference.

Treasurer's Report – Dr. Reynolds reported member dues are currently 60% of the budget and expenses are at 55% of budget. If 2025 end-of-year finances allows, some of the funds transferred from the money market last year which were needed to meet expenses in 2024 will be reimbursed.

CME Program – The CME program revenue and expenses were reviewed. Many of the expenses were covered through donations including *Integrity Behavioral Health*, the *Donahue-Shadid Psychiatric Alumni Association* and the *OU Foundation*. The number of exhibits also increased over last year. Also, thanks to everyone for donating items for the silent auction and a *"thank you"* to all who purchased items. The silent action's proceeds this year were $2,610. Dr. Tucker also thanked staff for bringing in ***Dr. Marketa Wills***, new APA CEO, for the CME conference.

Old Business:

2025-2026 OPPA Officers and Councilors – At the April meeting, the Councilor-at-large vacancy was approved by appointment of ***Dr. Audra Yadack*** and the Veterans Affairs Committee chair was accepted by ***Dr. Sarah Anwar***.

Poster Contest Results – Judges Drs. Rachel Dalthorp, Jed Perdue and Audra Yadack were impressed with the creativity of the presenters and the support from the various institutions getting their students and residents to submit a poster. They were impressed with the level of participation. Dr. Perdue thought it helped the exhibitors with the increased student and resident traffic. The exhibitors love to connect early.

New Business:

APA Federal Advocacy Conference – Dr. Dalthorp announced the APA conference is set for October 6-7 in Washington, DC. The OPPA needs to identify a member who is willing to attend the conference and report back. The APA pays for the travel and hotel and the OPPA pays the registration fee. ***Drs. Melanie Barrett and Audra Yadack*** are interested. Dr. Boyer said the meeting is intense and visiting with senators and representatives can be hard especially with sensitive political issues.

Staff Salary Reallocation of COPS Funds – Dr. Dalthrop reported she and Dr. Jed Perdue had discussed reallocating the funds received from COPS for staff support into salary for the two staff members. Dr. Tucker moved the money paid to OPPA for staff time be allocated to Mrs. Mixon and Mrs. Cotter for salary. Dr. Cowperthwaite second. Dr. Ostermeyer suggested in Oklahoma City there are other medical enterprises who might be willing to sponsor a dinner once a year for the COPS CME program. This way the dinners would be at no cost for attendees. Dr. Tucker discussed using Mercy for the CME.

Committee Reports:

Continuing Education Committee – Dr. Dalthorp discussed topic suggestions for the 2026 CME Conference including mimicking the APA program which was ***Lifestyle Medicine or a Lifespan approach, adolescent and child, reproductive psychiatry into geropsychiatry***. Dr. Ginzburg added that you may want to have both, lifestyle and lifespan asking each speaker to include lifestyle and alternative approaches in their lifespan presentation.

Legislative Affairs – Dr. Boyer noted this year we stopped psychology scope expansion and pharmacy. Prescriptive authority was granted to advance practice nurses. The physician assistants also gained prescriptive authority, neither can prescribe Schedule II. Need to support the OSMA as they provide lobbyists to us at no charge. We need OPPA members (psychiatrists) to join and volunteer with OSMA. Some hospitals will help cover the cost of membership as it is tax deductible. There is a discount for early career physicians. Dr. Reynolds suggested Medicine Day is an easy way to begin. OPPA should send out the reminders for Medicine Day that may be helpful for those working with residents and medical students. Wes Glinsmann is the Executive Director of the OSMA. Dr. Cowperthwaite volunteered to be the OSMA medical student and resident liaison contact for the OU programs.

Child Psychiatry Committee – Dr. Cowperthwaite reported the ***Oklahoma Council of Child and Adolescent Psychiatry*** in cooperation with the OPPA will be applying for another ***AACAP Collaborative and Advocacy Grant***. This grant will be for the production of a second video regarding gun safety including locking and securing guns, as guns are the means of more homicides and suicides killing more children than anything else.

Membership Committee – Currently OPPA has 192 members. Need to address the expired members and inquire why they did not renew their membership. Some members who have reinstated noted they are looking for social opportunities like the event held recently at Drs. Ginzburg and Boyers home. Dr. Lastrapes is also interested in OPPA hosting an early career psychiatry event, but it might be good to combine the events.

Resident Training Programs:

OU-Tulsa – OU Tulsa began the first class which increased to six residents per year. ***Dr. Brittany Taylor***, was selected for the APA SAMHSA minority resident fellowship program to address mental health disparities.

COPS/TPA Chapters – Dr. Tucker reported the next COPS meeting will be September 18th and is an in-person dinner. Dr. Lastrapes is the new COPS president. TPA is looking for new officer volunteers in order to reorganize and host future meetings in the Tulsa area.

Meeting adjourned. ❖

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Editor

Renée Mixon
Christine Cotter
Co-Executive Directors

Oklahoma Psychiatry is a publication of the Oklahoma Psychiatric Physicians Association. OPPA, a district branch of the American Psychiatric Association, is a medical specialty society specializing in the diagnosis and treatment of mental and emotional illnesses and substance abuse disorders.

The OPPA is dedicated to meeting the professional needs of its members and promoting quality treatment and prevention of mental illness and substance use disorders. In performing these functions, members of the OPPA are mindful of the unique history and cultural diversity of Oklahoma, and the influence of social determinants on health and outcomes.

We inspire to model and support:

- Sensitivity and compassion for patients and their families
- Advocacy for mental health access and equity
- Promotion of diversity and inclusion
- Advancement and representation of the profession of psychiatry
- Lifelong professional learning, and
- The highest standards of professional conduct.

December 31, 2025

Dear OPPA Colleagues,

*I'm writing to ask for your support of the **Oklahoma Psychiatric Physicians Association** and the work we do on behalf of psychiatrists and our patients across the state.*

As you know, OPPA serves as Oklahoma's district branch of the APA, advocating for our profession, supporting education and collaboration, and providing a unified psychiatric voice at the state level.

Like many professional organizations, we rely on member engagement and financial support to continue operating effectively. Membership dues alone do not fully cover the costs of our core activities, including administrative operations, programming, advocacy efforts, and communication with members. Donations—at any level—help ensure that OPPA can remain active, responsive, and sustainable.

If you are able, we would be deeply grateful for a contribution to OPPA. Your support directly enables us to continue advancing psychiatric care in Oklahoma and supporting our professional community.

*As a reminder, the OPPA is a non-profit membership organization qualifying under **501(C)6 of the Internal Revenue Code** making your donation **tax deductible**.*

Thank you for your time, your commitment to psychiatry, and your ongoing engagement with OPPA. Please don't hesitate to reach out with questions or ideas about how we can continue to strengthen our organization together.

Rachel Dalthorp, MD

President, OPPA

Note: You may pay by check or click this Zeffy link to pay online via our Zeffy account. Checks should be made payable to the OPPA and mailed to PO Box 1328, Norman, OK 73070-1328. ❖