

Date: 4/11/05

Curriculum Vitae

Name: David J. Mullen, MD

Professional Address:

Children's Psychiatric Hospital and UNM Department of Psychiatry
1001 Yale Blvd. NE
Albuquerque, NM 87131

Home Address:

1909 Avenida Alturas NE
Albuquerque, NM 87110

Licensure:

New Mexico Board of Medical Examiners 90-260
Expires June, 2006

Certifications:

American Board of Psychiatry and Neurology
Diplomate in General Psychiatry April, 1993

American Board of Psychiatry and Neurology
Diplomate in Child and Adolescent Psychiatry April, 1994

Educational History:

The University of New Mexico School of Medicine Department of Psychiatry, Division of Child and Adolescent Psychiatry. Fellowship in Child and Adolescent Psychiatry July 1990 -- July 1992

The University of New Mexico School of Medicine Psychiatric Residency Training Program Albuquerque, New Mexico 1987 –1990

The University of Oklahoma College of Medicine-- Oklahoma City, Oklahoma Doctor of Medicine June, 1987

The University of Oklahoma, Norman campus –Norman, Oklahoma Bachelor of Science in Psychology May, 1983

Employment History :

Associate Professor of Psychiatry, University of New Mexico, July 1994 – present

Private practice of Adult and Child and Adolescent Psychiatry, The Family Institute. Albuquerque, NM July 1992—June 1994

Professional Honors:

Robert Kellner Teaching Award, Department of Psychiatry, June 2004

Harrington Award, Department of Psychiatry June, 2000 shared with Dana Allen, MD

Robert Kellner Teaching Award, Department of Psychiatry June, 2000

Fellows Teaching Award, Division of Child and Adolescent Psychiatry June, 2000

Fellows Teaching Award, Division of Child and Adolescent Psychiatry June, 1999

Fellows Teaching Award, Division of Child and Adolescent Psychiatry June, 1998

Faculty Excellence in Teaching Award Residency/Fellowship University of New Mexico School of Medicine October, 1998

Fellows Teaching Award, Division of Child and Adolescent Psychiatry, 1996

Memberships:

American Academy of Child and Adolescent Psychiatry 1991-present

New Mexico Council of Child and Adolescent Psychiatry 1992--present

American Psychiatric Association 1987--present

Psychiatric Medical Association of New Mexico 1987--present

Human Behavior and Evolution Society 1998--1999

Invited Lectures:

Managing Child Behavioral Health Problems: Practical Solutions for the Busy Primary Care Provider: Managing Psychiatric Emergencies in Children and Adolescents: Panel Discussion. September 18, 2004

Grand Rounds University of New Mexico Dept. of Psychiatry: The Evolutionary Psychology of Gender Differences. February 2004

Lorman Education Services: Diagnosing Oppositional Defiant Disorder and Conduct Disorder. November 2003

Annual Meeting of the American Psychiatric Association: CME Course: Back to the Future, the Evolutionary Framework for Psychiatry: To Cheat or Not to Cheat, That is the Question: Natural Selection, Games Theory, and Anti-social Behavior, May 2003

Psychological Trauma Across the Lifespan, UNM HSC Department of Behavioral Health Education: Conduct Disorders and Trauma: A Complex Relationship: November 2003

In-service for Albuquerque Public Schools, school-based mental health clinicians: Conduct Disorder, Phenomenology, Etiology and Treatment, January, 29th 2002

Annual Meeting of the American Psychiatric Association: CME Course: Back to the Future, the Evolutionary Framework for Psychiatry: To Cheat or Not to Cheat, That is the Question: Natural Selection, Games Theory, and Anti-social Behavior, May 2002

Transitions 2001: The Transition of Children with Special Healthcare Needs into the Adult Health System: A Focus on Mental Healthcare Needs and Access to Quality Services: Mental Healthcare in New Mexico, August 17, 2001

Albuquerque Public Schools, Special Education Programs: Update in Pediatric Psychopharmacology, May, 2001

New Mexico Psychoanalytic Society and Psychiatric Medical Association of New Mexico: Evolution and Human Behavior, April 2000

Grand Rounds University of New Mexico: Conduct Disorder: An Evolutionary Psychiatric Perspective, September 1999

National Association for the Mentally Ill 17th Annual Convention–Psychiatric Comorbidity in Adjudicated Youth, July 1997

National Association of Social Workers Annual Convention: The Diagnosis of Disruptive Behavior Disorders February, 1997

University of New Mexico Mental Health Center's Violence in the 90's Seminar: Violence and the Child and Violence in the Schools November 1995

University of New Mexico Department of Psychiatry, Division of Child and Adolescent Psychiatry DSM-IV Update Seminar: Disruptive Behavior Disorders

Community Service:

Member Citizen's Advisory Board for the Bernalillo County Juvenile Detention Center
1996—present

Member Advisory Board for All Faith's Receiving Home Treatment Foster Care Program
1998—present

Member at Risk Behaviors Subcommittee, Families in Need of Services Task Force New
Mexico Council on Crime and Delinquency September—October 1999

Member Division of Child and Adolescent Psychiatry Panel on Violence and
Delinquency presenting information to Congresswoman Heather Wilson, September
1999

Member of panel presentation on mental health services to residents of the Bernalillo
County Juvenile Detention Center on local government television, Albuquerque, NM
August 1999

My predominant teaching interests are in the training of resident physicians in both general as well as child and adolescent psychiatry. I feel that this phase in the education of the physician is vital for the establishment of three major characteristics of an effective physician: 1) a sound professional knowledge and skill base, 2) a well integrated professional identity, and 3) a sense of personal responsibility for the provision of quality patient care. The transition from medical student to physician is at once both a challenging and often harrowing experience for many residents and, if it proceeds poorly, can result in a cynical and embittered practitioner. I feel that optimal guidance of the neophyte physician through this process of change requires careful attention to both the cognitive as well as the emotional/subjective aspects of training.

My clinical interests are primarily in the treatment of complex child and adolescent conduct disorder patients. These young persons are commonly perceived simply as being “bad” children and consequently are at risk of becoming “throw away” youth. Of course these children often do not simply stay “thrown away” but rather come back to haunt society in the form of violent criminal behavior perpetrated while yet juveniles or through the adoption of anti-social lifestyles as adults. Rather than the common societal response of attempting ostracize them, I feel that we should strive to understand the many contributing factors that result in a youngster’s serious anti-social behavior and take appropriate steps to ameliorate the behavior patterns once established or to prevent them from becoming so established in children who are identified as at risk. As an academic child and adolescent psychiatrist, I believe that I have a responsibility to the community as an advocate for the emotional well being of children. This advocacy may be accomplished both through the education of both colleagues and the public regarding the needs of children generally and at risk young people in particular as well as through the process of direct patient care.

My academic and research interests are in the areas of adolescent psychiatry, especially the disruptive behavior disorders; clinical consultations in forensic settings, and the neuropsychiatry and psychopharmacology of aggression. As noted above, the advocacy of children in need of care can be addressed by the physician through the avenues of education and direct patient care. Competent education and care provision both depend of course on an adequate understanding of the relevant issues and such understanding requires an adequate research program. I therefore primarily interested in both empirical and theoretical contributions to the literature on the etiology and treatment of aggressive and anti-social behaviors. I am particularly interested in the neurobiological and psychological factors.

Finally, I am also interested in the potential applications of evolutionary biology to clinical and theoretical psychiatry. It is my sense that psychiatry has been limited by the lack of any over-arching theoretical perspective that relates richly described psychological phenomena to the underlying biology of the organism in any consistently meaningful way. The newly expanding efforts to relate the implications of evolutionary biology to behavior may allow the adoption of a more “functionalist perspective” to

behavior that has been lacking, i.e. an understanding of the “purpose” of human psychological and behavioral characteristics.

Scholarly Achievements:

Scholarly articles in refereed journals:

1. **Mullen, D:** “Psychopharmacologic Strategies in the Treatment of Conduct Disorders in Youth” Essential Psychopharmacology, Vol. 2 Num. 4 1998 Hatherleigh Press. Pages 321-337

Review articles and articles appearing in refereed edited volumes:

1. Hendren RL; **Mullen, D** Conduct and Oppositional Defiant Disorders. In “Textbook of Child and Adolescent Psychiatry, 3rd Ed. Dulcan, Mina ed. Washington, DC APPI, 2004

2. **Mullen, D;** Hendren, RL: Disruptive Behavior Disorders for “Textbook of Adolescent Psychiatry” Arnold 2003

3. Hendren RL; **Mullen, D:** Conduct Disorder in Childhood. In “Textbook of Child and Adolescent Psychiatry”, 2nd Ed., Wiener, J. M. ed. Washington, DC APPI, 1996

4. **Mullen, D** and Hendren, RL: The Suicidal Child or Adolescent in “Child and Adolescent Psychiatry for the Clinician”, Dean Parmalee, MD ed. Mosby, 1996

5. **Mullen, D:** “Clinical Handbook of Child Abuse and Neglect” By J. Veltkamp, MSW and T. Mille, PHD for The Journal of the American Academy of Child and Adolescent Psychiatry, February, 1996 (book review)

6. **Mullen, D;** Hendren, RL: "Child and Adolescent Psychiatry: A Comprehensive Textbook", Melvin Lewis, Ed. for The Journal of the American Academy of Child and Adolescent Psychiatry May, 1992 (book review)

Works in Progress: Articles appearing in edited volumes:

1. Risk Taking and Dangerous Behavior in Children and Adolescents in “Child and Adolescent Psychiatry” Access Series. Sandra Sexson, MD ed. Publication pending

2. Conduct and Oppositional Defiant Disorders in “Essentials of Child and Adolescent Psychiatry. Mina Dulcan, MD ed.

1. “Conduct Disorder: A Perspective from Evolutionary Psychiatry”

Teaching/ Education:

Undergraduate medical students:

Lecturer in Neuroscience Bloc for medical students Spring 2002

Tutor in Neuroscience Bloc for medical students Spring, 1996

Examiner for clinical interview portion of Student Progress Assessment, Spring 1999

Preceptor in Phase 3 elective rotation in inpatient adolescent psychiatry. This rotation involves significant direct care of severely disturbed multi-problem adolescents and their families.

Perspectives in Medicine Facilitator, Fall 1996—present

Resident and Fellow teaching and mentoring.

Coordinator of Clinical Forensic Rotation for child and adolescent psychiatry residents, Spring, 1995 – present. This role involves the direct clinical supervision of both child and adolescent as well as general psychiatry residents.

Seminar leader for Developmental Psychiatry Seminar for PGY-2, 3 ,and 4 residents in general psychiatry, 1995 – present This seminar covers both descriptive as well as theoretical models of psychological development with implications for clinical practice.

Co-coordinator neuropsychiatry seminar for child and adolescent psychiatry residents 1997—present. This seminar covers specific issues related to the structure and functions of the central nervous system especially as it relates to the etiology and treatment of psychopathological phenomena.

Coordinator of the forensic subsection of child and adolescent psychiatry consultation seminar 1996—present. This subsection addresses a spectrum of legal issues as they relate to both the regulation of psychiatric practice as well as the various roles of child psychiatrists within the legal system.

Co-sponsor with Cynthia King, MD for child and adolescent psychiatry resident film discussion group 1995—present This extra-curricular activity involves the critical analysis of cinematic works from a developmental psychiatric perspective

Executive Medical Director, UNM Children's Psychiatric Center. October, 2000—present. This position involves the oversight of all clinical programs at the hospital as well as the supervision and evaluation of both physician and non-medical clinical personnel.

Attending physician Children's Psychiatric Center adolescent inpatient unit. At least one child and adolescent psychiatry resident is being directly supervised at any time. January 2003-present (see description below)

Attending physician Children's Psychiatric Center: Access Medical Director. This position provides clinical oversight of the Division of Child and Adolescent Psychiatry's centralized intake service. Supervision of both resident physician and non-medical clinical personnel is involved. September 2002—present.

Attending physician Children's Psychiatric Center Manzano Residential Treatment Unit

Attending physician Children's Psychiatric Hospital Chimayo school age unit October 1, 2001 – present. This unit provides acute psychiatric services to latency age and early adolescent children ages 10-14.

Attending physician Children's Psychiatric Hospital adolescent inpatient unit. At least one child and adolescent psychiatry resident is being directly supervised at any time. July 1994—July, 2001. This rotation represents a core required clinical experience for the child and adolescent psychiatry resident in our division. The resident is expected to develop clinical competence in the assessment and treatment of severely impaired adolescent inpatients.

Attending physician with James J. Jenson, MD in a UNM Mental Health Center Programs for Children and Adolescents Psychopharmacology Clinic: 1997—2000. Typically, approximately eight residents are directly supervised in this clinic. This outpatient experience is central to the development of outpatient psychopharmacology skills.

Mentor for individual child psychiatry residents: Typically mentor one resident per year.

Individual psychotherapy supervision for general and child and adolescent psychiatry residents: 1994—present. Typically between one and three residents are being supervised

during any time. I tend supervise residents in insight oriented psychodynamic therapy but do encourage to use of more directive cognitive-behavioral interventions where appropriate.

Mock Oral Examiner for child and adolescent psychiatry residents 1994—present. Our Division regularly examines our residents in an oral board exam format to help prepare them for successful completion of this requirement for board certification.

Service:

Present patient care activities:

Psychiatric Consultant to Bernalillo County Juvenile Detention Center: 1992—present
This activity involves direct patient care of youth experiencing crises, direct supervision of both general and child psychiatry residents, and education of detention center social work, nursing, line, and administrative staff. Approximately 10-15 patients are seen weekly. I also provide 24-hour telephone coverage to the center.

Attending Physician UNM Children’s Psychiatric Hospital adolescent inpatient unit: January, 2003—present. This unit is an eight bed acute psychiatric unit caring for patients age 13—17.

Practicing individual psychotherapy and psychopharmacology through University Physician’s Associates: 1994—present. I maintain a small number of individual psychotherapy and medication management patients (approximately 5 patients at present).

Past patient care activities:

Attending Physician UNM Mental Health Center Programs for Children and Adolescents: 1997—October, 2000. This role involves two urgent new psychopharmacology evaluations weekly as well as attending on a busy resident psychopharmacology clinic during one afternoon a week.

Attending Physician UNM Children’s Psychiatric Hospital adolescent inpatient unit: July, 1994—July, 2001 This unit is an eight bed acute psychiatric unit caring for patients age 13—17. In 2000, approximately 140 patients were admitted to the unit.

Attending Physician at the Sequoyah Adolescent Treatment Center: 1996—1997. I provided attending psychiatrist service through a UNM contract to one nine bed unit of this facility which provides service to children with severe psychiatric conditions associated with violent behavior.

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UNM HSC administrative duties:

Executive Medical Director, Children's Psychiatric Hospital: Oct. 2000—present. My role here is in the provision of structure, direction, and quality assurance to the clinical programs of Children's Psychiatric Hospital including acute, residential, partial hospital, and ACCESS (urgent and emergent evaluation) services.

Director of Inpatient Adolescent Psychiatry UNM Department of Psychiatry: 1996—October, 2000 This position entails responsibility for the ongoing clinical structure of inpatient adolescent services.

Deputy Medical Director UNM Children's Psychiatric Hospital: 1996—2000 My role here is primarily supportive to the role of the Medical Director of CPH including providing regular coverage of Medical Director responsibilities in the Director's absence. In addition, I have served as attending physician to Access, the intake service for the Division of Child and Adolescent Psychiatry.

Psychiatry Department and Child and Adolescent Psychiatry Division Committees:

Division of Child and Adolescent Psychiatry Child Psychiatry Training Committee 1994—present This committee is composed of the Division's physician staff and discusses training issues affecting the child psychiatry residents. The committee meets monthly.

Department of Psychiatry Research Committee: 1997—2000 This committee focuses on ongoing research projects and research proposals within the department. Regular meetings are held each month and members examine and evaluate research proposals both within and outside meeting times.

Department of psychiatry residency training committee: 1997—2000 The psychiatry department residency training committee discusses ongoing issues involving the training of psychiatric residents including clinical, didactic experiences as well as disciplinary/retention and recruitment issues.

Leadership Committee Children's Psychiatric Hospital: September 1999—present This committee is relatively new beginning this year and has been discussing the numerous changes affecting the provision of services at the CPH brought about by changes in the overall health care system and how to optimally respond such that high quality care may continue to be provided.

State and local committees:

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Member Advisory Board for All Faith's Treatment Foster Care Agency 1998—present

This committee meets quarterly to discuss issues of relevance to the provision of quality treatment foster care services through this well established local non-profit agency.

Member Citizen's Advisory Board for the Bernalillo County Juvenile Detention Center 1996—present This committee meets monthly as a citizen's oversight function for the detention center.

State of New Mexico Team Member for the State/University Collaboration Project National Workshop: Juvenile Justice and Mental Health: Solutions Through Collaborations April 22 and 23, 1999. I was invited to attend this meeting as a representative from academic psychiatry to discuss collaborative action planning for facilitating the mental health treatment of juveniles involved in or at risk of involvement in the juvenile justice system.