



International
OCD
Foundation

OCD and Related Disorders Clinic Profile

Rogers Memorial Hospital—Brown Deer

Medical Director: Roger Luhn, MD
Director of Operations: James Welsh
Clinical Services Manager: Andrea Carroll
Contact: Janet Gatlin
Phone: 414-865-2500
Email: jgatlin@rogershospital.org
Website: rogersbh.org

4555 West Schroeder Drive
Brown Deer, WI 53223

Treatment Providers:

Roger Luhn, MD
David Jacobi, PhD
Jon (Chun) Lee, PA-C, MPAS

Payment Options:

Private Insurance
Self-pay
Medicaid

Populations Served:

Adolescents
Children

Treatment Strategies Offered:

Cognitive Behavioral Therapy (CBT)
Exposure and Response Prevention (ERP)
ACT
Family Therapy
Group Therapy
Habit Reversal
Prescribe Medication
Skills Training

Areas of Specialty in OC-spectrum:

OCD
Perfectionism
PANDAS/PANS
Body Dysmorphic Disorder (BDD)
Hoarding Disorder

Scrupulosity
Skin Picking (Excoriation Disorder)
Tics/Tourettes
Trichotillomania (Hair Pulling Disorder)
Violent/Sexual Obsessions
Treatment of Co-Occurring disorders

Summary of our Services:

Rogers Memorial Hospital–Brown Deer, located in a quiet suburb of Milwaukee, serves as a perfect setting to focus on treatment. The Brown Deer Outpatient Center offers an intensive outpatient program (IOP) and partial hospitalization program (PHP) for children and adolescents with OCD, OC-spectrum, and related anxiety disorders. The intensive outpatient programs provide treatment three hours per day, four days per week. The partial hospitalization programs provide treatment 5.5 hours per day, five days per week.

Our OCD treatment approach is based on cognitive-behavioral therapy (CBT) with an emphasis on exposure and response prevention (ERP). This intensive treatment plan combines medication management and evidence-based therapies in order to help patients significantly reduce their OCD symptoms to a manageable level. Rogers' extensive history and experience treating OCD and related disorders has allowed countless individuals and their families to place their trust in our programs. Supported by the Rogers treatment experience, people coping with mental health concerns from coast to coast and internationally have created a life worth living.

Treatment Planning Process:

Upon contacting the admissions office, all patients receive a free screening assessment that is reviewed by medical staff to determine the correct level of programming to match the patient's needs. Once enrolled, a patient and a psychiatrist will complete a thorough, in-depth psychiatric assessment. Before programming begins, the patient and his or her behavioral specialist will develop a detailed individual exposure hierarchy specific to their needs. A patient will work to achieve as many challenges in their hierarchy as possible, with a goal of completing a predetermined percentage of the hierarchy system.

Core Treatment Components:

Rogers uses intensive evidence-based treatment for all therapy programs. Our treatment approach is based on cognitive behavioral therapy with an emphasis on exposure and response prevention. All treatment includes individual and group therapy, as well as family education, medication management and community outings to ease a patient's transition back into the community.

Parents, Family Members, Friends, Teachers, etc. Involvement:

Since OCD is a disorder that greatly affects the functioning of the whole family, the family needs to play an active and vital role in the treatment process at Rogers. The treatment team works with a patient and his or her family to foster insight and develop effective coping strategies to use once the patient returns to his or her usual daily environment. Any necessary family education is completed within program hours and may include other community

members, such as teachers, so long as the patient consents. Rogers' treatment programs help individuals work through real-world challenges that they face in the community, such as struggles in school or family relationships.

Treatment of Co-Morbid Disorders:

The intensive outpatient program (IOP) and partial hospitalization program (PHP) for children and adolescents treats OCD, OC-spectrum disorders and anxiety disorders. Rogers has the ability to successfully treat co-occurring conditions, such as major depressive disorder (MDD), eating disorders, and other OC-spectrum or anxiety disorders. If a patient does have a co-occurring condition, they are assessed to determine the level of their disorder and are then treated with an individualized therapy plan. Treating patients dually for their disorders improves the likelihood that their symptoms will be decreased to a manageable level.

Individual Therapy:

Each person has an individualized treatment plan which includes regular meetings with social workers, psychiatrists, behavioral specialists, and experiential therapists, depending on the patient's level of care.

Length of Stay:

Length of stay is dependent on an individual's level of need and the program they are in. On average, a patient's length of stay in the partial hospitalization and intensive outpatient programs is about five to seven weeks.

“Census” (i.e., the maximum number of clients seen at any given time):

Partial Hospitalization: 8 children/adolescents

Intensive Outpatient: 8 children/adolescents