

**STATE OF ALASKA FASD DIAGNOSTIC TEAMS  
STATUS OF TEAMS AS OF 9/08**

Anchorage

Coordinator, Heather Russell (team psychologist)  
HRussell@southcentralfoundation.com

1. Age Range Accepted: 4-18
2. Native only? Yes
3. Referral sources: Physicians/Psychiatrists
4. Need confirmed documentation of ETOH exposure? Yes
5. Team composition: Physician, psychologist, speech therapist, physical therapist, parent advocate
6. Service area: Southcentral Alaska
7. Average wait-time to get in: One month
8. Average turn-around time (referral to diagnosis): Varies. ~ 2 months.
9. Prioritization for scheduling: in order of referral
10. Payment sources accepted: Medicaid, HIS

Kenai Peninsula

Coordinator, Vickie Tinker  
vtinker@fcsonline.org

1. Age Range Accepted: all
2. Native only? No.
3. Referral sources: Open
4. Need confirmed documentation of ETOH exposure? Suspected exposure.
5. Team composition: Physician, Neuropsychologist, Speech, OT, Coordinator, Parent Navigator
6. Service area: Kenai Peninsula – will take referrals state-wide
7. Average wait-time to get in: 2-4 weeks
8. Average turn-around time (referral to diagnosis): Two months
9. Prioritization for scheduling: In order of referral. Also triaged by level of need.
10. Payment sources accepted: Medicaid. Some private insurance. Occasional no-pay.

### Juneau

Ric Iannolino, Coordinator  
[riannolino@ccthita.org](mailto:riannolino@ccthita.org)

1. Age Range Accepted: 2 and above.
2. Native only? No.
3. Referral sources: Anyone who has legal custody may refer.
4. Need confirmed documentation of ETOH exposure? Yes.
5. Team composition:
  - 2 Pediatricians, 1 Psychiatrist, 1 Neurologist
  - 2 Psychologists (one currently taking the FAS DPN On-line Course)
  - 3 Three Speech and Language Pathologists
  - 1 Physical Therapist
  - 2 Parent Navigators
  - 1 Coordinator
6. Service area: Southeast Alaska
7. Average wait-time to get in: 3-6 months
8. Average turn-around time (referral to diagnosis): Diagnosis received day of clinic. Written report within two weeks.
9. Prioritization for scheduling: Age 2-6 highest priority; 8-17 next priority; 18 and above will be seen when there are no children ready to be seen.
10. Payment sources accepted: Medicaid, Insurance, no-pay.

### Mat-Su

Teresa Sprague, Coordinator  
[tsprague@mssca.org](mailto:tsprague@mssca.org)

1. Age Range Accepted: 4-18
2. Native only? No.
3. Referral sources: open
4. Need confirmed documentation of ETOH exposure? Yes.
5. Team composition: Nurse Practitioner, Social Worker, Special Ed Specialist, Early Intervention, Speech, Psych, Parent Navigators, Coordinator
6. Service area: Mat-Sue, will take referrals from other areas
7. Average wait-time to get in: 30 days
8. Average turn-around time (referral to diagnosis): 30 days
9. Prioritization for scheduling: Valley kids first
10. Payment sources accepted: Clinic does not take payment.

Fairbanks

Shireen Dietrick, Coordinator  
faces@acca-ilp.org

1. Age Range Accepted: up to 14<sup>th</sup> birthday.
2. Native only? No.
3. Referral sources: Open.
4. Need confirmed documentation of ETOH exposure? Yes.
5. Team composition:
  - Two pediatricians
  - Two SLP
  - Three OT
  - Two psychologists
  - Four parent navigators
  - Team coordinator
6. Service area: North Star Borough; statewide
7. Average wait-time to get in: No wait time once paperwork is in.
8. Average turn-around time (referral to diagnosis): six weeks to nine months
9. Prioritization for scheduling: North Star Borough
10. Payment sources accepted: Medicaid.

Upper Tanana

Pam Gingue, Coordinator  
pgingue@tok.agsd.schoolaccess.net

1. Age Range Accepted: all
2. Native only? No
3. Referral sources: open
4. Need confirmed documentation of ETOH exposure? Suspected exposure
5. Team composition: Physician, psychologist, coordinator, parent advocate, speech pathologist
6. Service area: Mostly local school district, but will take referrals from elsewhere
7. Average wait-time to get in: Wait-time depends on itinerant providers.
8. Average turn-around time (referral to diagnosis): 3 to 6 months
9. Prioritization for scheduling: Have not had to prioritize
10. Payment sources accepted: Diagnostic team is volunteer.

Bethel

Shane Welch, Coordinator

[Shane\\_Welch@ykhc.org](mailto:Shane_Welch@ykhc.org)

1. Range of ages you accept into the clinic 05-17
2. Native only? No.
3. What referral sources will you accept? open
4. Do you need confirmed/documented history of ETOH exposure? no
5. What is your team's current composition?  
No trained medical person, 4 slated for training. OT, 2 psychologists, 2 parent navigators
6. What is your service area? YK Delta or residents of YK facilities
7. What is the average wait-time to get into clinic? 2-3 months
8. What is the average turn-around time for completed diagnosis? 3-8 months
9. How do you prioritize/triage your referrals? Reviewed with diagnostic team monthly
10. What kinds of payment will you accept? Will you see clients who do not have the ability to pay No charge to families at this time

Sitka

Marilyn Lande, Coordinator

[maril@searhc.org](mailto:maril@searhc.org)

1. Age Range Accepted: two years and up
2. Native only? no
3. Referral sources: teachers, doctors, care providers, parents
4. Need confirmed documentation of ETOH exposure? No
5. Team composition: Psychiatrist, psychologist, occupational therapist, SLP, parent navigator, coordinator.
6. Service area: Southeast Alaska.
7. Average wait-time to get in: 3 to 4 months
8. Average turn-around time (referral to diagnosis): Three weeks
9. Prioritization for scheduling: Native; needs of care
10. Payment sources accepted: Medicaid, private insurance

Kodiak

Nancy Wells, Coordinator  
Nancy.Wells@kanaweb.org

1. Age Range Accepted: all
2. Native only? Yes
3. Referral sources: any – but must have signed release
4. Need confirmed documentation of ETOH exposure? Yes, but may be anecdotal
5. Team composition: Physician Assistant, school psychologist, physical therapist, parent navigator, coordinator
6. Service area: Kodiak Island Borough
7. Average wait-time to get in: indefinite – not active at this point
8. Average turn-around time (referral to diagnosis): In the past, 4-6 months
9. Prioritization for scheduling: severity of problems; cooperation of family
10. Payment sources accepted: IHS funded.

Alaska Psychiatric Institute

Leonard Grijalva, Coordinator  
[leonard.grijalva@alaska.gov](mailto:leonard.grijalva@alaska.gov)

1. Age Range accepted: 13-17
2. Native only? No.
3. Referral Sources: Referrals selected from hospitalized patients only.
4. Need confirmed documentation of ETOH exposure? Not mandatory but preferable.
5. Team Composition: Psychiatrist, Psychological Associate, LCSW, R.N., (OT/RT as available).
6. Service Area: Referral population is statewide and must be admitted to API consistent with AS 47.30.
7. Average wait-time: There is no waitlist although current formal evaluation capacity is one per month.
8. Average turn-around time: Depending on psychiatric stability and record search, diagnostic workup is approximately two weeks.
9. Prioritization for scheduling: FASD diagnostic evaluation priority considerations include at least two weeks hospitalization, importance in clarifying the overall diagnosis, increase of services if positive findings, ability to meaningfully participate in the evaluation and age (higher priority to lower age).
10. Payment sources accepted: We do not charge for the FASD evaluation. Ability to pay is not considered for admission to the facility.

Note: For more detailed contact information on each team, refer to the State of Alaska Office of FAS Website, under “Diagnostic Team Network” <http://www.hss.state.ak.us/fas/>