



# Traumatic Brain Injury Center of Excellence Podcast Transcript

EPISODE DETAILS		
<b>PODCAST:</b>	Picking Your Brain	<b>Subject:</b> REC training and being TBI Ready
<b>FEATURES:</b>	<b>Host:</b> Kate Perelman	<b>Interviews:</b> Dr. Emma Gregory, Dr. Mark Ettenhofer, Casey Becker, Chris Lewandowski, Kristen Benson, and Heather Kopf
<b>TITLE</b>	Being TBI Ready	<b>Run Time:</b> 10:47

**Kate:** Every March, the Department of Defense, or DOD, participates in Brain Injury Awareness Month in order to increase awareness of traumatic brain injury, or TBI, and the DOD's efforts to improve its ability to identify, care for, and treat this invisible injury.

This Brain Injury Awareness Month, the Traumatic Brain Injury Center of Excellence (TBICoE) encourages medical providers and others in the military community to 'Be TBI Ready.'

This year's theme highlights the importance of being up-to-date with TBICoE's latest research, educational training, and clinical resources to assess and treat service members and veterans who have sustained a TBI.

TBICoE's dissemination specialist, Heather Kopf, who helped plan this year's theme, explains more.

**Heather:** To us, being TBI ready means understanding and knowing how to find all of the most current TBI information relevant to patient care. So, for example, reaching out to one of our regional education coordinators, or RECs, to get training on our Progressive Return to Activity clinical tool is being TBI ready. Knowing all of the signs and symptoms of a concussion and the educational resources available to patients is being TBI ready, and utilizing the most up-to-date TBICoE clinical recommendations in your medical practice is being TBI ready. So ultimately, being TBI ready means doing your part to ensure that we have a medically ready force and a ready medical force.

**Kate:** Primary care providers who are TBI ready play an essential role in the recovery of patients with a concussion, especially if they are properly trained in current research-supported approaches to treatment.

According to a recent article from TBICoE, there is evidence suggesting that targeted training in concussion management best practices can result in higher patient recovery rates.

Dr. Mark Ettenhofer, senior research neuropsychologist at TBICoE, co-authored this article, which evaluated concussion management practices and the effectiveness of provider training on our Progressive Return to Activity clinical recommendation.

**Dr. Ettenhofer:** The PRA study was really designed to get a better sense for what kind of care our service members were receiving after concussion and the degree to which they were following Progressive Return to Activity guidelines in the clinics, and to get a sense from what the providers were doing, what the patients were doing, and to also directly evaluate how, if we train providers on those guidelines, how that can help service members recover better and faster.

**Kate:** Co-authoring this article was Dr. Emma Gregory, TBICoE's Research Branch chief.

**Dr. Gregory:** Bottom line, one of the biggest take homes in this study is the importance of education, both educating the provider so they understand what this Progressive Return to Activity looks like,



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but also, the patients receiving that education from providers. So, in that way, this kind of study is exactly what TBICoE really strives to do. This really highlights what that cycle looks like in terms of creating research findings, incorporating that into clinical care and education, and then using that to generate more questions.

**Kate:** Training is essential to TBICoE's mission to promote state-of-the-science TBI care from point-of-injury to the return to duty. This mission depends on regional education coordinators, or RECs, to educate healthcare providers, service members, veterans, and their families and caregivers on awareness, prevention, treatment, and other TBI-related management issues. RECs, and the training they do, are also a critical part of the DOD's TBI awareness effort. Here's REC Casey Becker during a training session to medical providers on concussion identification.

**Casey Becker:** Good afternoon. My name is Casey Becker and I'm the regional education coordinator in Europe for the Defense Health Agency's Traumatic Brain Injury Center of Excellence...The earlier we can identify a concussion, the sooner we can treat our patient and get them on their path to recovery and return to duty as safely and quickly as possible. That's why I appreciate the opportunity to be here today to provide you with this training.

**Kate:** Like Casey in Landstuhl, Germany, 16 RECs around the country and overseas offer training to medical providers so that they're aware of and understand TBICoE clinical tools like the PRA, Military Acute Concussion Evaluation 2, or MACE 2, and others.

Chris Lewandowski, an REC at Fort Carson, Colorado, often talks to groups of deploying service members about TBI and the DOD's policies for the management of mild TBI, or concussion, in a deployed setting.

**Chris Lewandowski:** Those policies have a couple of protocols in them that revolve around what the DOD calls potentially concussive events...There are four of them, but we really only focus on three, being within 50 meters of a blast indoors or outdoors, being involved in a vehicle explosion, collision, or rollover, or receiving a direct blow to the head that knocks you unconscious or alters your consciousness for any period of time.

**Kate:** I wanted to get a better understanding of an REC's role, so I decided to talk to Kristen Benson. Kristen's region covers Northern Virginia, Washington, D.C., and parts of Ohio and Pennsylvania.

**Kristen Benson:** So the primary role of the REC is to provide training to military and civilian health care providers in assessing and treating service members subsequent to concussive events. I kind of cover the basics of TBI prevention, assessments, recognition. And I try to kind of show them what that whole process actually looks like, and how they can recognize someone who might have incurred a TBI in that acute phase, but also what that might look like, on the back end.

TBI is not going to be the first thing that someone thinks about, and a lot of the manifestations that can come from TBI later can often look a lot like behavior, conduct issues.

So, when I'm working with the support staff, two of the things that I focus on primarily is what does TBI look like in the acute phase, what is a TBI? How do we define it? And then I also try to give them a really, really firm grasp on what the symptoms of TBI look like, how do they intersect with things like PTSD? And then, I try to make it really, really clear. Also, how we differentiate those.

**Kate:** I remember reading that you were a social worker prior to coming to TBICoE. Can you talk a little bit about how you got into this line of work?



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**Kristen:** Yes. So I chose to specialize in military and veteran behavioral health. Because, when I was a Navy corpsman, I was committed to the well-being of my fellow service members. That was kind of at the height of the OEF/OIF campaigns and now today, I just think that that means taking care of them here at home. So that's my way of continuing to fulfill that commitment.

**Kate:** I'm really interested in how RECs conduct their trainings. How do you tailor your approach to different populations?

**Kristen:** So I try to take stock of literally everyone that's in the room and try to consider from their individual perspective, what does this training mean? And how is it meaningful to me?

Being a social worker means that we're really adept at understanding and motivating people, and often anticipating these underlying needs. So, we're considering so many different elements, right? We're looking at the environmental, we're looking at interpersonal factors, policy barriers, and for those that are clinically trained, a lot of times we're also looking at workflow. So in that way, I feel I'm able to consider the ways in which these trainings can be applied to the individual needs of the clinic, and also foster a feeling of meaningful partnerships.

And then, for people who might be in more administrative roles, like clinic managers, they want to know, what's the workflow look like? What does this mean for my clinic? What does this look like, you know, on the everyday, so as long as I can really address those needs, I get their buy-in, and I want them to trust me. I want them to know that they're in good hands with me, and I have their best interest at heart and that I'm here to listen to them. I'm not here to feed them a bunch of slides. I'm here to give them applicable usable information, so that we can all achieve a common goal.

**Kate:** What would you say motivates you as an REC?

**Kristen:** Oh, patient outcomes --100 percent of the way--because, you know, in my capacity as a corpsman, my formal training as a social worker, and in my role as an REC, it's always the patient. It's always the patient outcomes is what inspires me the most. I would say probably one of the things that inspires me the very most about TBICoE is 100 percent the people who are executing the mission, and it's a network of professionals who are committed to rehabilitating service members, it's a group of people who have purpose. They believe in what they're doing. And they work tirelessly, often in spite of some pretty serious challenges, as we've seen in the past year. And I'm so honored to be a part of that.

**Kate:** How have you adjusted to doing a majority of your trainings virtually this year?

**Kristen:** I can say that I believe really strongly in the accessibility of information and eliminating as many barriers as possible. I honestly think that having those virtual trainings is actually increasing the accessibility of the information because we're able to get lots of people on these training platforms. We're able to get them trained. We're able to, you know, just email out all this information. There's not as much time spent on travel. I would say probably the keys to virtual training is absolutely a lot of flexibility. So we're all in it together.

**Kate:** Kristen is right: We are all in this together. Through the hard work of TBICoE researchers and educators, medical providers are able to treat service members and veterans with state-of-the-science tools and clinical recommendations. Providers, in turn, can help their patients understand the signs and symptoms of TBI with our fact sheets and educational materials. Ultimately, being TBI ready takes teamwork, and we at TBICoE are proud to be part of your team.



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You can find TBICoE clinical recommendations, like the PRA and MACE2 and other TBI resources, at [Health.mil/TBIProviders](https://www.health.mil/TBIProviders) or by clicking the link in the Episode Notes. *You can also access educational materials for your patients and their families at [www.Health.mil/TBIFactSheets](https://www.health.mil/TBIFactSheets).*

Picking Your Brain is a podcast series from the Traumatic Brain Injury Center of Excellence that focuses on the care and recovery of service members and veterans who have sustained a TBI. It's produced and edited by Vinnie White and hosted by me, Kate Perelman.