

# Fall 2004 TBI Educational Video Series on Sale!!!

We currently have all 6 Fall 2004 TBI Videoconference Sessions on DVD and VHS tapes for sale.

The cost of the DVD series is \$9.00 (including tax and shipping & handling).

The cost of the VHS series is \$16.75 (including tax and shipping & handling).

If you would like a copy, please send a check to:

Aaron Scrol

TBI Education Series Tapes

Harborview Medical Center

325 9th Ave

Box 359740

Seattle, WA 98104

\*Please allow 1-2 weeks for delivery

## UW TBIMS to Co-Sponsor 2nd TBI Videoconference Education Series

During the month of April, the UW TBI Model System will be cosponsoring the second video conference TBI Education series that will be presenting nationally recognized speakers covering topics on traumatic brain injury research, education and prevention. The events are open to anyone with an interest in the treatment and care of TBI survivors, and will include a question and answer session following the presentation. Community-based providers, state agency personnel, family members, and the general public who work with or have an interest in traumatic brain injuries are encouraged to attend. The sessions are free, and will be held at the Research and Training Center at Harborview Medical Center as well as many sites around the state. For a complete list of participating cities and site, or for more

information on times and locations, please visit the UW TBI Model System: <http://depts.washington.edu/rehab/tbi/> or email [uwtbi@u.washington.edu](mailto:uwtbi@u.washington.edu)

The UW TBIMS (Funded by NIDRR, DoE, grant #H133A020508) is co-sponsoring this series in cooperation with the Department of Social Health Services, Aging & Disabilities Service Administration, Lead Agency-Washington State Traumatic Brain Injury Grant. (HRSA Grant # H21-MC000620200).

**April 11th, 2005**

**“How to Cope with the Financial Aftermath of TBI”**

**April 18th, 2005**

**“Persisting Post-Concussion Syndrome”**

**April 25th, 2005**

**“Community Resources for Persons with TBI: The Present and the Possible”**

If you would like to receive this newsletter by email contact us at:

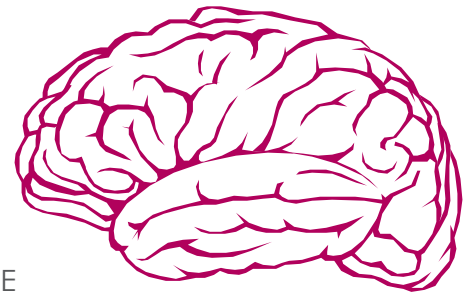
[uwtbi@u.washington.edu](mailto:uwtbi@u.washington.edu)

Or visit our website at:

[www.depts.washington.edu/rehab/tbi/](http://www.depts.washington.edu/rehab/tbi/)

# TBI Updates

TRAUMATIC BRAIN INJURY MODEL SYSTEM  
UNIVERSITY OF WASHINGTON  
DEPARTMENT OF REHABILITATION MEDICINE



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Number 1

## Life Care Planning

By Robert Fraser

The development of a life care plan is a comprehensive tool for analyzing the needs and costs of the effects of a serious or catastrophic injury. The plan is a definitive guide to the care and services the injured person will need and it is also a basis for quantifying the extent of economic damages and often for purposes of litigation. A life care plan must be able to define what an individual will need on an “annual” or “occasion” based frequency applying same to other allied health care professionals or a court. The ultimate emphasis of the plan is to capture, organize, and synthesize data that supports the value of claimed economic losses.

Professionals who perform life care planning can be rehabilitation nurses, rehabilitation counselors, case managers, rehabilitation neuropsychologists, or medical physicians such as physiatrists. In any case, the life care planning professional needs to be familiar with the types of rehabilitation programs and therapeutic services that will be needed and possess in-knowledge of the current rehabilitation literature. In order to support the underpinnings for the needs and costs involved in a specific case, the life care planner must turn to the most relevant professional, e.g., if the life care

planner is a rehabilitation psychologist and needs to establish the medical need underpinnings, physiatrists, neurologists, or other medical professional will need to provide the medical prognosis and service needs data. There is a national training program developed by the University of Florida-Intelicus program. Following this training (other new training options are being introduced at this time) an individual must take the certified life care planning test and have credentials reviewed through the Commission on Disability Examiner certification. Although a relatively new process, certification represents achievement of at least minimal competencies in life care planning.

In terms of actual activity, a life care planner reviews medical and all other file information, has clinical interviews with the individual, family members, (continued on next page)

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# Who's Who



## **Sureyya Dikmen**

Dr. Dikmen is a co-PI for the UW TBIMS, as well as a Professor in the Dept. of Rehab Medicine, and an Adjunct Professor in the Departments of Neurological Surgery and Psychiatry and Behavioral Sciences. Dr. Dikmen is one of the founding members of the UW TBIMS and is very active on the Research and Data Collection teams of TBIMS. Her research interests include, the natural history of neuropsychological and psychosocial outcome and the recovery and prediction of the functions after TBI, Methylphenidate (Ritalin) for working memory in TBI, executive Function and TBI, post-traumatic seizures in TBI, Magnesium Sulfate as a neuroprotectant, Sertraline for treatment of depression in TBI.

## **Life Care Planning continued**

significant others, etc. consults with medical and other experts, and begins the research itemization and cost process in relation to the individual's lifelong needs. Care costs include medical care services (e.g., diagnostic tests), services of all medical professionals, the cost of medical commodities such as prescription drugs, the cost of non medical commodities such as adaptive aids, non medical services to include wheelchair maintenance, special communications systems, etc., and any costs associated with inpatient care. The plan will specify each item or need, the frequency of the need or service (annual or occasion-based) the initial year for beginning calculations and the annual provider and cost or cost range. This document, in addition to assisting in any litigation settlement, is a template from which the family or case manager can work toward providing optimal service needs over the injured individual's lifespan. It is important to note that those lawyers new to catastrophic injury or relatively inexperienced in representing the injured person, will focus on vocational loss or pain and suffering and not really understand the life care plan concept and the need for a professional expert needed to develop the plan, etc. It is important to note that the injured individual's case does not have to be catastrophic in order to have a life care plan developed. A modified plan, not necessarily covering all standard life care plan categories, can also be helpful in relation to many injuries.

## Resources for Free and Discount Medications

### Patient Assistance Programs

There is help available for many people who can't afford their medicines. These programs, frequently called patient assistance programs (PAPs), are designed to help those in need obtain their medicines at no cost or very low cost.

### The Basics of the Programs

All PAPs are designed to help those in need obtain their medicines. Since each pharmaceutical company establishes its own rules and guidelines, all are different. All have income guidelines - but they vary considerably. Each company selects which drugs are available on their programs and how long a person can receive assistance.

### How PAPs Work

Although no two programs are exactly the same, most require that the applicant complete an application form. The amount of

information required varies. Some programs require detailed medical and financial information, others very little. All require a doctor's signature. Certain programs require the doctor complete a portion of the form while others only need a signed prescription. Most send the medicines to the doctor's office for distribution to patients, while others send the medicine to a pharmacy. A few send a certificate the patient gives to the pharmacist. Some patients need drugs for a long time. Most programs that cover medicines used to treat chronic diseases offer refills, but not all programs.

### PAP Web Resources

You can visit the following websites for more information on PAPs.

[www.rxassist.org](http://www.rxassist.org)

[www.needymeds.com](http://www.needymeds.com)

[www.helpingpatients.com](http://www.helpingpatients.com)

## Subjects Needed For Brain Injury Studies at UW!!!

### The Effect of Community-Based Exercise on Symptoms of Depression in Persons with TBI

study is examining the effects of aerobic exercise on depression and anxiety in persons who have had a mild to moderate TBI in the previous 6 months - 5 years. The study offers a supervised 10-week exercise program to participants along with education and motivational components. If you are interested in participating in the study, or for more information, contact Aaron at 206-731-5196.

**TBI and Depression Study:** Researchers in the Department of Rehabilitation Medicine at HMC are seeking people with TBI to participate in a federally funded research study about depression. Major depression may occur more frequently in people with TBI because the finjury changes the delicate balance of chemicals in the brain. We hope that early identification and treatment of depression after TBI might improve recovery from and adaptation to this type of injury. If you are interested in this study, please call 206 341-4730 or 1 800 407-8124.