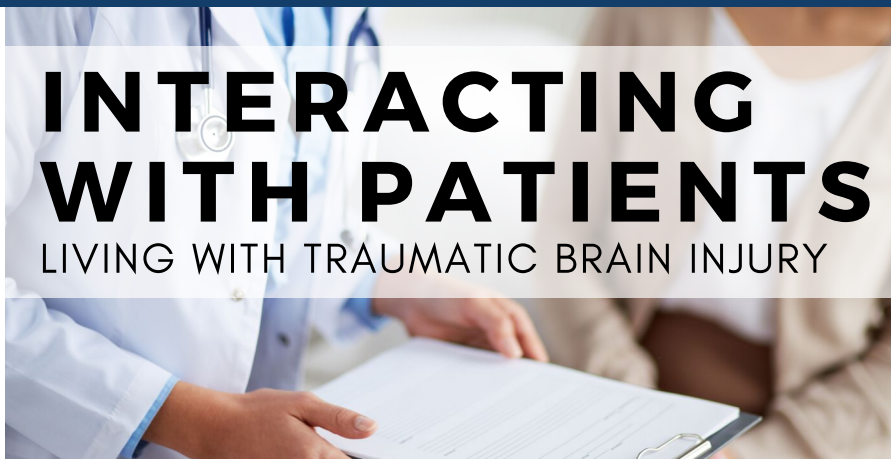
created 9/2019

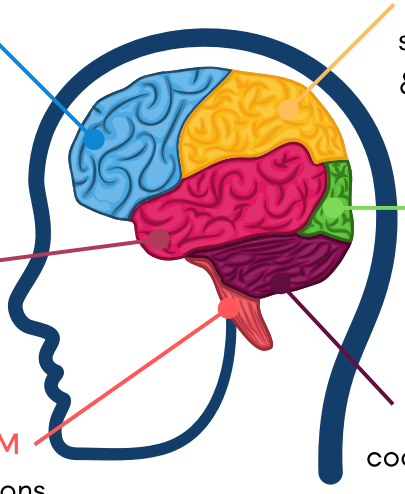
A Traumatic Brain Injury, or TBI, is an Acquired Brain Injury (ABI) that occurs as a result of forces outside the body such as falls, motor vehicle or pedestrian incidents, blasts, and violence/ assaults. TBI affects millions of Americans every year, often leading to long-term disability due to functional and physical changes in the brain. Oftentimes there is a need for costly, long-term, specialized supports for rehabilitation in health, jobs, relationships, and daily life activity.



INTERACTING WITH PATIENTS

LIVING WITH TRAUMATIC BRAIN INJURY

PARTS OF THE BRAIN



FRONTAL LOBE
planning, initiation, impulsivity, consequences

PARIETAL LOBE
sensory integrations & spatial orientation

OCCIPITAL LOBE
visual processing

TEMPORAL LOBE
memory, hearing, language

CEREBELLUM
coordination, voluntary movements, & balance

BRAIN STEM
involuntary functions (breathing, heart rate, etc.)

Due to responsibility of certain parts of the brain for different functions, where an injury occurs can give impressions on changes that can occur. The brain is divided into two hemispheres, a right and left. Each hemisphere is divided into four lobes. Important functions of these areas are interrupted with injury but due to neuroplasticity, the brain can actually adapt with repetition and experience.

COMMON CHANGES

PHYSICAL & SENSORY
how your muscles or bodily health is affected

- Seizures
- Fatigue
- Headaches & pain
- Sleep disruption
- Weakness or paralysis
- Movement & coordination
- Change in sexual functioning
- Balance & dizziness
- Sensory changes or overstimulation

THINKING & PROCESSING
how you process and engage with your environment

- Memory or recall
- Mental flexibility
- Attention, concentration, & learning
- Planning & organization
- Initiation & motivation
- Task-switching & sequencing
- Mental fatigue
- Safety awareness & impulsivity
- Problem-solving & decision-making
- Social skills, communication, & speech

EMOTIONS & BEHAVIOR
how you feel & act that may be different

- Difficulty with regulation (emotions or actions)
- Self-awareness
- Irritability
- Unrelated laughter or crying
- Personality changes
- Lethargy or slowness
- Restlessness
- Psychological conditions (depression, anxiety, etc.)

LITTLE TIME, BIG IMPACT:
tools for medical professionals & staff

With the limited time available for medical visits, it is important for every interaction to be positive. If an individual brings another person with them, avoid ignoring the patient even if they have difficulty with speech, behavior, or memory. Though how they process information may be different, a patient with a brain injury is a person first. Just like anyone else, have an open conversation with patience, flexibility, kindness, and respect.

MEMORY

- Put all important information, changes, and instructions given in an accessible, written format.
- Encourage recording or writing down information in planner or on piece of paper.
- Repeat and summarize information before moving to the next topic and ending the appointment.
- Consult with family/caregivers, if necessary, for purposes of memory but ask the individual first.
- Provide reminder calls or emails.

ATTENTION & PROCESSING

- Ensure a quiet environment with minimal distractions (i.e. lights, sounds, foot traffic).
- Have one person talk at a time, keeping eye contact, and saying the patient's name often.
- Write down the main points of conversation to refer back to or help redirect if getting off topic.
- Avoid providing multiple directions or information at once - break into smaller components and ensure understanding before moving on.

SPEECH & COMMUNICATION

- Avoid assumptions - speech may be slurred and movement may appear as if intoxicated.
- Allow extra time for processing & response. Encourage asking others to slow down or repeat as needed. When presenting information, do so at a slower rate but at an appropriate age level.
- Make use of paper or whiteboards to write or draw ideas if clarity or word-finding is difficult.
- Rephrase and describe if repetition is not working.
- Ask questions with choices if open-ended answers are overwhelming.

EMOTION & BEHAVIOR

- Ask questions & make note of known triggers (i.e. standing behind them, sounds/lights), behaviors, and specific accommodations that are helpful.
- Use techniques of active listening, paraphrasing, and reflection (use phrases like, "it sounds like..." rather than "I understand").
- Be mindful of personal space and the environment to prevent sensory overload.
- Make any actions known before completing them (i.e. movement, tests, etc.).
- Avoid overreacting to socially unusual behavior.

RESOURCES & REFERENCES

- Brainline: www.brainline.org
- TBI Model Systems: www.msktc.org/tbi/model-system-centers
- American Heart Association: www.heart.org
- Centers for Disease Control: www.cdc.gov/TraumaticBrainInjury
- Brain Injury Association of America: www.biausa.org
- Online Training: www.biancteach.net
- Neuro Institute: www.neurorestorative.com/knowledge-center
- Defense and Veterans Brain Injury Center: dvbic.dcoe.mil

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