6th ANNUAL NMCSD

TRAUMATIC BRAIN INJURY SYMPOSIUM

DATE & TIME:
Friday, March 29, 2019
0800-1540

LOCATION:
NMC San Diego
Building 5, Auditorium
34800 Bob Wilson Drive
San Diego, CA 92134

TABLE OF CONTENTS:
Welcome Letter 2
Purpose 3
Schedule at a Glance 4
Speaker Information 6
Resource Introduction 12
Continuing Education 18
Welcome to the 6th Annual Traumatic Brain Injury Symposium at Naval Medical Center San Diego. This year, we are featuring presentations on a wide range of state-of-the-science TBI research and clinical applications. You will have the opportunity to earn up to five continuing education credits as you learn about topics such as repetitive blast exposure, auricular acupuncture, TBI and substance abuse, and Chronic Traumatic Encephalopathy. We are also offering a brief on the MACE 2 and encourage you to attend our resource/poster fair.

The symposium is only one part of Brain Injury Awareness Month (BIAM) — a month-long opportunity to amplify our voices and promote TBI awareness and information. In addition, BIAM 2019 has special significance for the military community. On October 1, 2018, the Deputy Secretary of Defense released a memorandum outlining a new strategy and action plan to promote warfighter brain health. The memorandum states:

“Only by amplifying our communications about, and promoting awareness of warfighter brain health and surveillance initiatives, can the Department eliminate, once and for all, the stigma that remains attached to help-seeking behaviors. Educating our service members and families to recognize the signs and symptoms indicative of TBI and making it easy for families, loved ones, and friends to seek and receive the information and support they need to respond compassionately and constructively to a member who may have sustained a TBI, are essential first steps.”

This year’s Brain Injury Awareness Month theme — “TBI: Did you know?” — addresses the memorandum’s call to action by serving as a springboard for sharing TBI information, research, resources, and stories of real people who have either experienced a TBI or supported those who have.

While TBI is considered the signature injury of operations in Afghanistan and Iraq, we also must remember that over 80 percent of the nearly 400,000 TBIs that have occurred since 2001 have been diagnosed in the garrison setting. Increased awareness and preventative measures such as wearing a helmet while riding a bike will not eliminate all TBIs from sports, recreational activities, and military training. However, understanding the symptoms of TBI and knowing when to seek a health care provider are crucial first steps toward ensuring service members are ready to return to duty.

As medical providers, we help service members and their families through the recovery process. This is especially critical for our veterans and our reserve component who often feel isolated from the system. Educating health care providers about TBI is a key element of DVBC’s mission. This TBI symposium provides you with current knowledge and updated tools to most effectively provide the best care for our service members who have sustained a TBI and is in alignment with the Deputy Secretary of Defense’s memo promoting warfighter brain health. Thank you for taking the opportunity to participate.
March is Brain Injury Awareness Month (BIAM), a time to acknowledge and take action on the growing prevalence of traumatic brain injury affecting our military service members, veterans, and civilian community members.

The 6th Annual NMCSD Traumatic Brain Injury Symposium provides a unique learning opportunity for healthcare providers and other medical personnel involved in TBI patient care. The Defense and Veterans Brain Injury Center (DVBIC) and the TBI Clinic at NMCSD have gathered leading local TBI subject matter and resource experts to discuss innovative research and clinical best practices with an emphasis on cutting-edge diagnosis and treatment modalities.

We hope that you will share what you learn through these dynamic presentations and resource updates in the spirit of BIAM to help us promote brain injury awareness, improve care for those affected by TBI, and encourage your network to participate in the conversation.
## SCHEDULE

<table>
<thead>
<tr>
<th>TIME</th>
<th>TOPIC</th>
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</thead>
<tbody>
<tr>
<td>0730</td>
<td>Check-in/Registration</td>
</tr>
<tr>
<td>0800</td>
<td>Welcome and Opening Remarks</td>
</tr>
<tr>
<td>0830</td>
<td>Fast Track: An Overview of Streamlined Comprehensive Care for TBI Patients at NMCSD</td>
</tr>
<tr>
<td>0930</td>
<td>Next Generation Evaluation and Treatment of Traumatic Brain Injury</td>
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<tr>
<td>1010</td>
<td>Brief: TBI Mobile Applications</td>
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<tr>
<td>1020</td>
<td>Resource/Poster Fair</td>
</tr>
<tr>
<td>1045</td>
<td>Brief: Military Acute Concussion Evaluation, Version 2 (MACE 2)</td>
</tr>
<tr>
<td>1055</td>
<td>Repetitive Blast Exposure: Clinician’s Guide to Assessing Warfighters Lifetime Risk to Blast</td>
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<tr>
<td>1130</td>
<td>Lunch Break</td>
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<tr>
<td>1230</td>
<td>Brief: ECHO Traumatic Brain Injury Provider Training</td>
</tr>
<tr>
<td>1240</td>
<td>Auricular Acupuncture for Traumatic Brain Injury</td>
</tr>
<tr>
<td>1340</td>
<td>Traumatic Brain Injury and Substance Abuse</td>
</tr>
<tr>
<td>1415</td>
<td>Break</td>
</tr>
<tr>
<td>1430</td>
<td>Interface Astroglial Scarring and Chronic Traumatic Encephalopathy: An Overview and Discussion of Scientific Controversies</td>
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<td>1500</td>
<td>Headache in the TBI Patient</td>
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CDR Lynita Mullins, DO

CDR Mullins is an active duty Navy Physician who graduated from Nova Southeastern University College of Osteopathic Medicine. She completed her Transitional Internship at the National Naval Medical Center and her residency in Physical Medicine and Rehabilitation (PM&R) at the University of Alabama Birmingham. She is Board Certified in PM&R and is a certified Medical Acupuncturist with more than two years of training through the Harvard International Structural Acupuncture Course for Physicians. Currently, she is a Staff Physician at NMCSD, the Department Head for PM&R/Comprehensive Combat and Complex Casualty Care (C5), the C5 TBI Medical Director, NMCSD DVBIC Site Director, and serves as the Command Acupuncture Subject Matter Expert.

CDR S. Joshua Kenton, PsyD

CDR Kenton commissioned into the US Navy in 2001 after being selected for an internship in Clinical Psychology at Naval Medical Center San Diego (NMCSD). As an Active Duty Clinical Psychologist, he has completed multiple operational tours including a 2004 deployment to Fallujah, Iraq. In 2013, he completed a Duty Under Instruction (DUINS) Neuropsychology Fellowship at the University of California San Diego. After fellowship, he served as the Deputy Director at the Intrepid Spirit, Camp Pendleton until transitioning to NMCSD in November 2018. Currently, he is the Division Officer for the NMCSD TBI Program and Staff Neuropsychologist.
SPEAKERS & PRESENTATIONS

POLLED
Please help us collect outcome measures by participating in the polling exercises throughout the day. Please check the screen for details and a link to the polling website.

0800 - 0830

Opening Ceremony
Ezra J. Aune, MBA

Mr. Aune is a Navy veteran and is the Regional Program Manager for the western region of the Defense and Veterans Brain Injury Center with twelve years of prior experience in military substance abuse and two years working within Wounded, Ill & Injured (WII) programs and policy for BUMED. He has served as Regional Program Manager for five years with sites at Joint Base Elmendorf Richardson in Alaska, Joint Base Lewis-McChord in Washington, Palo Alto VA, Camp Pendleton, and NMCSD in California.

0830 - 0930

Fast Track: An Overview of Streamlined Comprehensive Care for TBI Patients at NMCSD
Lars Hungerford, PhD, ABPP-CN | Grant W Meisenholder, DPT | Carole R. Roth, PhD, CCC, BC-ANCDS | LT Timothy Ruff, MS, OTR/L

Fast Track is a comprehensive program for the evaluation and treatment of traumatic brain injury. It was initially developed in coordination with Naval Special Warfare in order to streamline the evaluation and treatment for service members with high operation tempos. Fast Track consists of an interdisciplinary team (e.g. PT/OT/SP/Neuro) that assesses the patient holistically. This presentation will provide an overview of the Fast Track program and include more detailed information on targeted evaluations conducted by the interdisciplinary team.

Dr. Lars Hungerford is the Senior Clinical Research Director for DVBIC at NMCSD. He supports clinical research, education and treatment of TBI. His research is focused on the cognitive and psychological consequences of TBI with specific focus on developing better tools for the evaluation and treatment of TBI. In addition, he serves as clinical neuropsychologist at the NMCSD TBI Program and provides educational outreach on traumatic brain injury to medical providers, active-duty service members, and caregivers of injured veterans. Continue to next page....
Grant Meisenholder, DPT joined the Naval Medical Center San Diego Vestibular Clinic in 2012 as a researcher focusing on haptic feedback as an adjunct to mTBI therapy and recently became Director of the Vestibular Assessment and Rehabilitation Clinic. A graduate of St. Augustine University for the Health Sciences in San Marcos, he continues to advance his training in assessing and treating vestibular and visual impairments relating to concussion and neurodegenerative disorders.

Carole Roth is Head of the Division of Speech Pathology at NMCSD, and Speech Pathology Consultant to the Department of the Navy. She has dedicated over 30 years to clinical practice, teaching, and research in the area of traumatic brain injury. She has written numerous articles and book chapters, and has been a primary investigator on grant-funded research studies exploring various questions related to rehabilitation of mTBI. Over the past ten years she has been fortunate to participate in DoD/VA work groups that wrote the Mild TBI Rehabilitation Toolkit, the Clinician’s Guide to Cognitive Rehabilitation in Mild TBI, the Speech-Language Pathology Clinical Management Guidance for Cognitive-Communication Rehabilitation, and the 2018 revision of the DoD clinical recommendations for cognitive rehabilitation for service members and Veterans. Dr. Roth has been a member of the C5 TBI program since its inception.

Lieutenant Timothy Ruff is the main Occupational Therapist for the Fast Track program at NMCSD and is currently integrating virtual reality into his cognitive rehabilitation plans for TBI patients. He graduated from University of North Carolina-Chapel Hill in 2008 with a Bachelor’s degree in Psychology and went on to complete a Masters in Occupational Therapy in 2012 at Lenoir-Rhyne University. He joined the Navy in 2016 as an MSC Officer with NMCSD being his first duty session.

Next-Generation Evaluation and Treatment of Traumatic Brain Injury

Mark L. Ettenhofer, PhD

Traumatic Brain Injury (TBI) has been called the signature injury of the wars in Iraq and Afghanistan. Since 2000, over 375,000 Service Members have sustained a traumatic brain injury—the majority of which are classified as mild. While most individuals will recover within 3 months, many patients continue to have symptoms even in the absence of significant neuroimaging (CT or MRI) or neuropsychological findings. Research conducted by DVBIC at Naval Medical Center San Diego is focused on addressing this gap. This presentation will provide a broad overview and update about the innovative work being conducted at DVBIC Naval Medical Center San Diego to improve assessment and rehabilitation for mild TBI, including development of advanced technologies such as eye tracking and virtual reality.

Dr. Mark Ettenhofer is a neuropsychologist and clinical scientist who supports research, education, and clinical activities for the Defense and Veterans Brain Injury Center (DVBIC) at Naval Medical Center San Diego (NMCSD). His research is focused on development and evaluation of novel methods for assessment and rehabilitation of TBI. Dr. Ettenhofer’s work has been published in leading journals in neuropsychology, psychiatry, and neurology. His ongoing research is supported by DVBIC and the Congressionally Directed Medical Research Program.
In recent years, there has been growing concern about the long-term effects repeated head injuries can have on the brain, impacting both cognitive and emotional health. In the athletics community, particularly boxing and professional football, it is recognized that many sub-concussive head injuries over many years can lead to chronic and disabling progressive neurological illness later in life. In the military, a potential source of repetitive sub-concussive head injury is blast exposure. Military service members are exposed to blast over pressure waves in combat and during routine training such as explosive breaching, heavy artillery, and use of shoulder mounted rocket launchers. Scientific efforts have been conducted to determine any negative effects these exposures may have on the long-term brain health of service members. This presentation will review the potential sources of blast exposure military service members may have during their career and provide tools to the clinician to help understand the relative severity of a specific service member’s exposure. Further, we will review the current state of the science in this area highlighting what we know about blast exposure and the brain as well as the direction we are taking that will provide more answers in the future.

Dr. Jason Bailie is a TBI expert with specific focus on the impact occupational blast exposure has on the brain. He has numerous scientific publications and is an international speaker on the topic. He is the Senior Clinical Research Director for the Defense and Veterans Brain Injury Center with the Intrepid Spirit Center at Marine Corps Base Camp Pendleton where he also serves as Clinical Neuropsychologist. TBI education and outreach is a priority for him, specifically with veteran caregiver, healthcare provider, and active-duty service member populations.
Brief: ECHO Traumatic Brain Injury Provider Training
Erick Castillo, MS, PM-LPC, SSGBC, Navy ECHO Project Manager
1240 - 1415

Auricular Acupuncture for Traumatic Brain Injury

CDR Vijay G. Hegde, MD

Dr. Hegde will present a broad overview of auricular acupuncture before pivoting towards its utility as an adjunctive treatment for mild traumatic brain injury. The talk will cover the history, neurophysiological theory, and practical usage of auricular acupuncture with our Marines, sailors, and soldiers as it pertains to treating mild traumatic brain injury, migraine, and tension type headache. We will review some of the common protocols for auricular acupuncture, and demonstrate on stage a typical treatment protocol for headaches (the auricular trauma protocol).

CDR Vijay G Hegde, MD is a board certified Neurologist at Naval Medical Center San Diego with nine years of experience as a general neurologist in the United States Navy. He is a prior graduate of the Neurology residency program at Walter Reed National Military Medical Center, having matriculated there from 2006 through 2009. He is also a graduate of the Helms Medical Institute (HMI) Medical Acupuncture training program for Physicians course in 2014. The HMI course is an intensive several week clinical endeavor for interested MDs, DOs and select midlevel providers. Over the past four years he has been using acupuncture with benefit in the treatment of mild traumatic brain injury induced chronic headache, chronic migraine, and chronic tension type headache.

1340 - 1415

Traumatic Brain Injury and Substance Abuse

CDR Chris A. Alfonzo, MD, DFAPA

There is a high comorbidity between TBI and substance abuse with each posing a significant risk factor for the other. Substance use following TBI has adverse consequences and interferes with healthy outcomes as co-occurring conditions may compromise screening assessments, overall treatment efficacy, and long-term recovery. Manifestations of TBI and substance use disorders strongly overlap and nuanced interventions are necessary to fully address the conditions. This presentation will provide an overview of the prevalence of substance use disorders in the military TBI population, the impact of substance use upon TBI recovery, the importance of early detection and intervention, available resources, and future directions in research for detection and treatment.

CDR Alfonzo is a staff psychiatrist and Department Head of the Substance Abuse Rehabilitation Program (SARP) and Overcoming Adversity & Stress Injury Support (OASIS) program at NMCSD. He is an active duty physician who graduated from the U.S. Naval Academy and completed medical training at the Uniformed Services University of the Health Sciences (USUHS). CDR Alfonzo is a Diplomate of the American Board of Psychiatry and Neurology, with board certification in the specialty of Psychiatry as well as the subspecialty of Brain Injury Medicine. He is the Chair of the NMCSD Substance Abuse Clinical Quality Team, a USUHS Assistant Professor, and a certified medical acupuncturist.
Interface Astroglial Scarring and Chronic Traumatic Encephalopathy: An Overview and Discussion of Scientific Controversies

Lars Hungerford, PhD, ABPP-CN

Chronic Traumatic Encephalopathy and Interface Astroglial Scarring are two distinct neuropathological findings alleged to be related to either repetitive subconcussive blows (CTE) or blast exposures (IAS). This presentation will provide an overview of these two neuropathological findings and the current scientific debate within the literature.

Headache in the TBI Patient

CDR Douglas Cragin, MD

Persistence of headache after TBI results in significant loss of productivity, decreased quality of life, and for active duty patients, may affect duty assignment and result in early retirement. Early treatment of headache and exacerbating factors is crucial to long-term headache relief. This presentation will review diagnosis of primary/secondary headache syndromes, abortive/preventative treatments, expectation management, and evaluation of exacerbating factors.

Dr. Cragin is a staff neurologist at NMCSD. He has clinical interest in headache and TBI. He served as a Flight Surgeon in Yuma, Arizona prior to residency. After residency, he was the sole Neurologist on mainland Japan for nearly four years before returning to become the Neurology Department Head at NMCSD. He enthusiastically supports NMCSD TBI Fast Track and its collegial, multi-disciplinary approach to care. He is certified in Brain Injury Medicine by the American Board of Psychiatry and Neurology.

Closing Remarks

Ezra J. Aune, MBA
ASPIRE Center at VA San Diego Healthcare System  
https://www.sandiego.va.gov/services/aspire_center.asp
The ASPIRE Center is a 40-bed residential treatment facility designed to promote recovery in Veterans, particularly those who returned from the wars in Iraq and Afghanistan. The Center provides a safe, comfortable living environment. Evidence-based, recovery-oriented treatment is provided to eligible male and female Veterans of all ages who desire to once again become fully independent and self-sufficient members of the community.

Brain Treatment Center  
https://www.braintreatmentcenter.com/
The mission of the Brain Treatment Center (BTC) Military Program is to provide a non-evasive, non-pharmaceutical and a safe therapeutic approach in order to facilitate reintegration of our military service members back into society. The BTC administers Magnetic e-Resonance Therapy (MeRT) to our nation’s Veterans and Active Duty service members that suffer from Post-Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), Military Sexual Trauma (MST) and Substance Abuse symptoms. Through benevolent organizations, the BTC is able to provide treatment at no cost to those who have made great sacrifices in serving our country. To date the BTC has treated approximately 650 service members with results ranging from corrected sleep cycle, reduction in PTSD and TBI symptoms, as well as reduction in depression and anxiety issues.

The BTC explores the concept that the brain can be treated by physical means that are not chemical. We believe that with the exploration of the relationship between cognition and neural activity, an innovative and informed approach to non-invasive neuromodulation is possible. Our dedicated team of neuroscientists and physicians believe in delivering individualized treatment in order to achieve a healthier life for people with various neurological issues. Our individualized protocols utilize brainwave analysis to assess how different areas of the brain are functioning and reveal areas that are not communicating the way they should. We then use this data to develop a personalized and targeted approach aimed at bringing about healthy brain communication.
Courage to Call
https://www.courage2call.org/
Courage to Call is a free, confidential, veteran-staffed 24/7 helpline dedicated to assisting active duty military personnel, veterans, reservists, guard members, and their families, regardless of discharge status. Courage to Call is committed to helping veterans and their loved ones get the services and assistance they need and deserve. Types of assistance may include counseling/mental health, food, housing, employment, transition, legal services, and VA benefits information. Call 877-698-7838 or dial 2-1-1.

The Defense and Veterans Brain Injury Center (DVBIC)
http://dvbic.dcoe.mil
DVBIC is a part of the U.S. Military Health System. Specifically, DVBIC is the traumatic brain injury (TBI) operational component of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE). Founded in 1992 by Congress, DVBIC’s responsibilities have grown as its network of care and treatment sites has grown.

DVBIC’s mission is to serve active duty military, their beneficiaries, and veterans with traumatic brain injuries through state-of-the-art clinical care, innovative clinical research initiatives and educational programs, and support force health protection services. DVBIC fulfills this mission through ongoing collaboration with the Department of Defense (DoD), military services, Department of Veterans Affairs (VA), civilian health partners, local communities, families and individuals with TBI.

At 22 sites supported by a headquarters based in the Washington, D.C. area, DVBIC treats, supports, trains, and monitors service members, veterans, family members, and providers who have been affected by traumatic brain injury.

DVBIC works at the macro-level, screening and briefing troops heading into theater, performing provider training pre-deployment and at military treatment facilities, gathering data mandated by Congress and DoD, and overseeing research programs. At the micro-level, DVBIC treats service members and veterans with mild, moderate, or severe TBI, and helps them from the moment of injury through their return to duty or reintegration into the community. DVBIC develops, provides, and distributes educational materials for military and civilian providers, families, service members, and veterans.

The DoD has further solidified DVBIC’s role by naming it the Office of Responsibility for these tasks:

- Creation and maintenance of a TBI surveillance database
- Service compliance for pre-deployment neurocognitive testing
- Creation and distribution of the Family Caregiver Curriculum
- Design and execution of a 15-year longitudinal study of the effects of TBI in Operations Iraqi and Enduring Freedom service members and their families
- Design and completion of an independent head to head study to evaluate the reliability and validity of computerized neurocognitive tests
**Families OverComing Under Stress (FOCUS)**

http://www.focusproject.org/

FOCUS, or Families OverComing Under Stress, is a resilience-building program of the Department of Defense. The FOCUS Program is designed for military families, couples, and children facing ongoing stress and change. FOCUS teaches practical skills to help families meet the challenges of military life, including how to communicate and solve problems effectively, and how to successfully set goals together.

Based on more than 20 years of research, FOCUS has been designed especially for military families. The program uses a series of unique tools to help all members of the family create a shared family story. Families who participate in the program experience a renewed sense of confidence by recognizing their family’s strengths and then building on them. In sum, FOCUS builds healthier, happier, and stronger families, one family at a time.

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**Mental Health Operational Outreach Division (MHOOD)**

https://nmcsd-as-spfe05/sites/dmh/aop/mhood/default.aspx

The mission of the Mental Health Operational Outreach Division (MHOOD) is to support operational readiness by providing same day access to quality mental health services to active duty service members. Licensed Independent Practitioners (LIPs) are available to evaluate and refer to appropriate resources. Providers utilize community partnerships and direct communication with fleet commands to provide optimal care coordination to active duty service members. This achieves the ultimate goal of maximizing operational readiness for the commands served by Naval Medical Center San Diego (NMCSD). The four pillars of the MHOOD mission are Rapid Triage, Operational Outreach, Central Referral, and Resiliency Skills Training.
Naval Medical Center San Diego, Health & Wellness Department
https://nmcsd-as-spfe05/sites/dph/hw/default.aspx

The Naval Medical Center San Diego Health and Wellness Department supports organizational and individual efforts that assist people in reaching their goal of optimal health.

Our mission: Advance Navy healthcare and maximize operational readiness by promoting lifestyle changes that continually improve and protect the physical, emotional, and spiritual health of all beneficiaries.

Our vision: A Healthy and Fit Force! Develop effective health promotion and risk reduction interventions through medical treatment, education, training, and research. Serve as a consultant and role model.

Naval Medical Center San Diego, Mind Body Medicine
https://nmcsd-as-spfe05/sites/dmh/mbm/default.aspx

Naval Medical Center San Diego Mind Body Medicine (MBM), in collaboration with the Benson Henry Institute for Mind Body Medicine at Massachusetts General Hospital, offers an evidenced-based seven-week educational curriculum for active duty, retirees, staff, and dependents to integrate self-care into the military healthcare delivery system and the operational forces. MBM classes teach scientifically validated skill-sets for healthy living that can be practiced anywhere for only minutes a day. Self-care is facilitated through the practice of the relaxation response and healthy lifestyle factors such as sleep hygiene, improving social relationships, and effective communication skills. MBM Seminar Teams for Neurology/TBI introduce meditation, mindfulness, yoga, and brief breath/body/imagery exercises to reduce stress and pain. We teach positive psychology, cognitive restructuring, and social skills to build resiliency and happiness.

We foster teamwork to provide safety and support for each individual to transform their relationship with their body’s pain, their heart’s distress, their mind’s thinking and their spirit’s connection to self, others, light, life, and love. Teams meet on Wednesdays from 1200-1400.
**Overcoming Adversity & Stress Injury Support (OASIS)**

The OASIS program is a residential treatment facility designed to help service men and women dealing with PTSD secondary to trauma incurred while in active duty status. Over eight years now, OASIS has successfully met its healthcare mission as the DoD’s sole intensive residential program for PTSD.

As a residential program, patients receive treatment in a protective environment that obviates any of the common distractions and stressors that jeopardize overall therapeutic benefits in other typical settings. OASIS is free for active duty service members; commands need only fund to-and-fro transportation. Length of treatment is eight weeks, but is also based upon service members’ needs, capabilities, and case-specific determinations by the OASIS treatment team.

At OASIS, multiple evidence-based group and individual therapy approaches are offered, including prolonged exposure (PE) therapy, cognitive processing therapy (CPT), eye movement desensitization and reprocessing (EMDR), dialectical behavioral therapy (DBT), seeking safety, and cognitive behavioral therapy for insomnia (CBT-I). The OASIS program’s treatment interventions, policies and practices are aligned to the recently updated VA/DoD clinical practice guidelines (version 3.0; published in 2017).

**Headstrong**
http://getheadstrong.org/

**Mission:** Provide cost-free, stigma-free & bureaucracy-free mental health care to post 9/11 combat veterans. **Vision:** Provide frictionless treatment for PTSD/trauma by not setting a minimum or maximum limit on therapy sessions. **Essence:** Positively impact dialogue around views of mental health while transforming PTSD/trauma treatment.

**Project C.A.R.E.**
https://www.med.navy.mil/sites/nmcsd/Pages/Services/Project-C-A-R-E.aspx

Project CARE helps our traumatically wounded service members recover, both physically and emotionally. Our mission is to provide emotional support along with surgical and non-surgical care in an effort to improve appearance and restore function. We believe that even the slightest improvement can dramatically increase self-esteem and quality of life.
Southern Caregiver Resource Center (SCRC)
https://caregivercenter.org/
Southern Caregiver Resource Center, established in 1987, is a nonprofit organization that provides free supportive services to anyone caring for an adult (over 18) with a cognitive impairment or an elderly and frail adult over 60.
When you contact Southern Caregiver Resource Center, you will be connected to a Family Consultant who will assess your individual needs and formulate an individualized caregiver plan. Depending on your caregiving situation, this plan might include resources for support groups, counseling, legal and financial consultation, education and training, and respite services.

The Department of Veterans Affairs Administration - Benefits
https://iris.custhelp.va.gov/
https://gibill.custhelp.com/app/ask/
All non-medical VA Benefits: Compensation, Pension, Education, Home Loan Guaranty, Vocational Rehabilitation and Employment, Life Insurance, etc.

Wounded Warrior Project
www.woundedwarriorproject.org
Our Mission: To honor and empower wounded warriors.
Our Vision: To foster the most successful, well-adjusted generation of wounded service members in our nation’s history.
CONTINUING EDUCATION

Five continuing education units are available for full attendance at today's symposium.

CME: NMCSD is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. NMCSD designates this live activity for a maximum of five AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

CNE: This course is approved by NMCSD, an approved provider of Continuing Nursing Education under the California Board of Registered Nursing Provider No. 916 for five contact hours.

CE: The Mental Health Service, NMCSD, is approved by the American Psychological Association to provide continuing education for psychologists. The Mental Health Service, NMCSD, maintains responsibility for the program. This event is approved for five psychology CE credits.

To obtain credit:
1. Please visit the registration desk to verify your contact information and sign-in
2. Submit your evaluation of today's presentations upon departure
3. Receive your CME, CNE or CE certificate

Only CME, CNE and CE credits will be awarded today.

For all other continuing education, please obtain a CME certificate at the end of the event and submit to your credentialing body.

NMCSD CME Committee Members have nothing to disclose.

On behalf of the NMCSD TBI Clinic, we thank you for your participation at the 6th Annual NMCSD TBI Symposium.