



the

# HEADLINER

Summer 2005  
Vol. VII Issue 3

The Newsletter of the Brain Injury Association of Oregon

## What's Inside?

## The 3rd Annual Pacific Northwest Brain Injury Conference 2005 *Living with Brain Injury: Creating a New Life*

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*“Living with Brain Injury: Creating a New Life”* is the theme for the 3<sup>rd</sup> Annual Pacific Northwest Brain Injury Conference. The conference will be held at the Holiday Inn Hotel Portland Airport (800-465-4989) Friday and Saturday, September 30 & October 1, 2005.

This multidisciplinary conference will address issues commonly faced by survivors of brain injury and their family members, along with established and emerging interventions and practices. Sessions will address advocacy, off-label medications-what's working, conventional and alternative medical treatments, rehabilitation, state and community resources, and communicating effectively after brain injury featuring speakers such as Dr. Nathan Zasler. This year will be the second annual sessions for indigenous peoples gatherings on brain injury featuring speakers such as the internationally respected specialist in brain injury care and rehabilitation Dr. Ron Savage, Pediatric Neuropsychologist, of the Mohawk tribe and Skyhawk, a Cherokee flute musician.

Presentations will highlight the latest research on assessing and treating or otherwise coping with conditions resulting from brain injuries, including physical, cognitive and psychosocial impacts, community rehab, survivor panels. Invited are a broad group of participants from the western states and British Columbia. Friday's program will be targeted to professionals, voc rehab, service providers, advocates and government agency case staff. Saturday's program will add a community track targeting survivors and family members, social workers, case managers and advocates.

### Two Day Indigenous Peoples Planning and Training Gathering

Alta Bruce, ND, and Marlene Davis, WA, will

conduct a two day session that will include discussion on how to identify and implement change in behaviors implementing changes. The 1st meeting of the National Indigenous People's Brain Injury Association Board including Dr. Ron Savage, from the Mohawk Tribe.

### Speakers Include:

Dr. Nathan Zasler, MD, is an internationally respected specialist in brain injury care and rehabilitation; medical director of the Concussion Care Centre of Virginia, Ltd. and is involved with several brain injury rehabilitation programs in the Richmond, Virginia area, including Tree of Life, LLC, a living assistance program for persons with ABI. PJ Long, author of *Gifts from the Broken Jar*, was a psychotherapist in private practice, an adjunct college professor, and a consultant, when she sustained a TBI from a horse. She holds dual masters degrees, one in interpersonal communication and a second in psychology.

Dr. Ron Savage, a national authority and published author with over 30 years experience working with children and youths with traumatic brain injuries and neurological disorders. He has directed inpatient rehabilitation programs, post acute services and special education programs.

Geoffrey M. Lauer, MS, National Director of Affiliate Relations, Brain Injury Association of America.

Senator Laurie Monnes Anderson, Oregon State Senator, District #25, Public Health Nurse and Manager.

Alta Bruce, Founder, Indigenous People's Brain Injury Association, IPBIA, Injury Prevention Specialist, Indian Health Service, ND  
McKay Moore Sohlberg, PhD, author of *Introduction to Cognitive Rehabilitation (1989)* and *Cognitive Rehabilitation: An Integrative Neuropsychological Approach (2001)*.

(Continued on page 3)

**Brain Injury Association  
of Oregon  
Board of Directors**

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**PRESIDENT'S  
CORNER**

**Wayne Eklund, RN CNLCP**



**SO WHAT'S NEW ...**

BIAOR is in the midst of a very busy building year providing programs and activities with our partners and support groups throughout the State of Oregon. I fear the list of events and achievements are more than the space I am allotted so lest I forget, let me first say that none of this would be possible without our hardworking and generous partners, our wonderful volunteer staff and BIAOR Director, Sherry Stock.

I invite everyone to visit BIAOR's new website. We have been receiving very positive feedback about the website from all over the country. I wish to extend a special thanks to brain injury survivor and our volunteer web designer/webmaster, Karen Cuno-Stoeffler. Those of you in the market for her professional web services can contact her by "googling" OREGONROSE ASSOCIATES.

BIAOR is aware of and alarmed at the number of service men and women returning from Afghanistan and Iraq who have sustained brain injury. We are beginning to seek funding to develop support groups for these veterans and their spouses and families. In order to provide the sorts of supports our mission calls for BIAOR must have paid memberships and donations. I ask that each member stay current with payment of their membership dues to increase and maintain our organizations strength.

Important upcoming events include the 21<sup>st</sup> annual BIAOR conference on brain injury in conjunction with the 3rd Annual Pacific Northwest Conference on Brain Injury, "Living with Brain Injury, Creating a New Life" September 30<sup>th</sup> and October 1<sup>st</sup>. (see brochure and registration for the conference on page 8.) We are honored that Oregon Governor Ted Kulongoski has chosen our conference as one of three that he will participate in this year. Oregon State Senator Laurie Monnes Anderson will also be a welcoming speaker.

The Pacific Northwest Conference on Brain Injury has become one of the most vibrant and varied conferences in the country. The conference is a BIAOR sponsored event all members have a right of which to be proud. This year's conference is a great opportunity for lay and professional persons to hear and meet internationally renowned experts on brain injury treatment, rehabilitation and life after brain injury. At this years conference BIAOR will also host the 1<sup>st</sup> national board meeting of National Indigenous Peoples Brain Injury Association (NIPBIA) meeting on Thursday September 29<sup>th</sup>, to include Alta Bruce (Turtle Mt. - Ojibwa) and Dr. Ronald Savage (Mohawk) as well as two ½ day NIPBIA workshops. Alta Bruce and Dr. Savage will be presenters September 30<sup>th</sup> and October 1<sup>st</sup>. Continuing education credits will be offered with this year's conference.

In addition to the rest of the exciting conference activities, election of new board members will occur at the annual membership meeting on the morning of October 1<sup>st</sup>. Jerianne Cohen of Creswell, Frank Bocci of Eugene. Rev. Jeanellen Herzegh of Portland, Dr. Thomas Boyd of Eugene are accepted by the board of directors to serve as new board members upon election by the membership. I encourage all interested members of BIAOR to participate in the election.

See you at the conference.

Wayne A. Eklund, RN

*Brain Injury Association of Oregon*  
 2145 NW Overton Street  
 Portland, Oregon 97210  
**Director: Sherry Stock**  
 503-413-7707 • Fax: 503-413-6849  
 Toll Free in Oregon 1-800-544-5243  
 Website: [www.biaoregon.org](http://www.biaoregon.org)  
 Email: [biaor@biaoregon.org](mailto:biaor@biaoregon.org)

**Headliner DEADLINES**

<u>Issue</u>	<u>Deadline</u>	<u>Publication</u>
Spring	April 15	May 1
Summer	July 15	August 1
Fall	October 15	November 1
Winter	January 15	February 1

Editor: Sherry Stock, 503-413-7707  
 Email: [biaor@biaoregon.org](mailto:biaor@biaoregon.org)

**Advertising in Headliner**

<b>Rate Schedule</b>	Issue	Annual/ 4 Issues
A: Business Card	\$ 75	\$ 225
B: ¼ Page	\$125	\$ 375
C: ½ Page	\$225	\$ 675
D: Full Page	\$400	\$1,200

**Policy**

The material in this newsletter is provided for education and information purposes only. The Brain Injury Association of Oregon does not support, endorse or recommend any method, treatment, facility, product or firm mentioned in this newsletter. Always seek medical, legal or other professional advice as appropriate.

We invite contributions and comments regarding brain injury matters and articles included in *The Headliner*.

**An ounce of patience is worth a pound of brains. Dutch**

(Continued from page 1)

Alan Weintraub, MD, Medical Director of the Brain Injury Treatment Team and Medical Director of the TBI Model Systems Grant Program, Craig Hospital, Denver.  
David Clemmons, PhD, UW - Return to Work - Job Issues and Latest techniques on job training  
Russ Spearman, Project Director, Idaho TBI Implementation Grant, Idaho State University, Institute of Rural Health- Tele-health Idaho/TBI Virtual Grand Rounds.

**Highlights:**

- Improving Traumatic Brain Injury Outcomes through Research and Development-Stem cell research
- Panel- Impact of the War in Iraq on the number of cases of Traumatic Brain Injury
- Return to Work - Job Issues and Latest techniques on job training; Maintaining Employment
- 3rd Annual National Indigenous Peoples Brain Injury Planning Gathering - Working Together
- Community Based Rehabilitation following Traumatic Brain Injury
- Life Care Planning for Neurological Injuries - How to help providers understand and think about the big picture
- National research on pediatric TBI and returning to school
- Best Clinical Practices in Rehab using email - *teach em*
- Tele-health Idaho /TBI Virtual Grand Rounds - including poster presentation
- Neuropsychiatry of Traumatic Brain Injury
- Panel: Male versus Female Relatives' Coping after Traumatic Brain Injury - is there a difference - Male vs Female - Observations from professionals - what works and what doesn't
- Dr. Nathan Zasler: Advances in Pharmacotherapy Treatment Strategies Following ABI
- Back to School and Beyond: Identification and Outcomes of Students with Traumatic Brain Injury in Public Schools

## 2005 BIAOR Calendar of Events

For updated information, please go to [www.biaoregon.org](http://www.biaoregon.org)  
Call the office with any questions or requests

September	BIAOR Annual Conference-
October	September 30-October—Portland
November	Annual Ornament Sales begin
December	Portland Annual Holiday party and Fundraiser 12/11 Statewide Support Group Holiday parties
January	Membership Annual Membership Drive
April	Academic Conference

- Concerns and Anticipated Challenges of Family Caregivers following BI
- Therapeutic Recreational Activities - Therapeutic Riding -- The Role of Art Therapy in Rehabilitation – Music and Brain Injury
- Family Care and Adjustment - Panel -The Experiences of Couples: Maybe Carol Snider Moderator
- Panel - Multiple Family Groups- Couples Where a Member Has a Brain Injury -Survivors and family members - married after BI - with couple who talked at PRA-4 couples-Male w/TBI, Female w/TBI, both w/TBI
- Interventions for Cognitive Impairment - Compensating for Impairments in Memory and Executive Functions: How Can We Maximize the Effectiveness of External Aids and Adaptive Devices?
- The Use of Complementary & Alternative Medicine in TBI
- Computerized Memory Rehabilitation Programs for Persons with Traumatic Brain Injury: Brain Train
- Management of Sexuality
- Memories Relived: Creating memory books-a family activity
- Meet Authors/Musicians —Conversations And Book/CD Signing

## NOTICE OF ANNUAL MEMBERSHIP MEETING

### Election of Directors Top Agenda

This is to notify members that the Brain Injury Association of Oregon's (BIAOR's) annual membership meeting is scheduled from 7:30 to 8:00 AM on October 1, 2005 as part of the Annual Conference (see additional information on pages 5 and 6). The agenda for the meeting is as follows: call to order & introductions; president's report; treasurer's report; election of board members; & other business.

Association business items requiring a membership vote are: election of. There are cur-

rently four (5) director vacancies and the Board of Directors is nominating the following individuals to fill the vacancies for a three year term beginning January 1, 2005:

Frank Bocci  
Dr. Tom Boyd  
Jeri Cohen  
Jeanellen Herzegh  
Michael Kesten

Additional names may be placed in nomination by a BIAOR member provided that:

1) the nominee is a BIAOR member; 2) the nominee is willing to serve as prescribed in BIAOR bylaws; and 3) the nominating information is received not later than 5 PM on September 23, 2005. For additional information, please contact Sherry Stock at [biaor@biaoregon.org](mailto:biaor@biaoregon.org) or by phone at (503) 413-7707.

For additional information on the annual meeting contact the BIAOR office or visit our web site at [www.biaor.org](http://www.biaor.org).

# The Lawyer's Desk: A Look at TBI Legal Representation

By David Kracke, Attorney at Law  
Nichols & Associates, Portland, Oregon

The purpose of this and following columns is to give the non-lawyer reader a glimpse inside the mind of a personal injury attorney. Evaluating, preparing and resolving a personal injury case where the client has suffered a traumatic brain injury is a complex process. Explaining it will take many more words than those allocated in this short column, but there are some key points that can be made to help the injured individual and their family members understand the relevant legal processes. If you have questions after reading this column, I would encourage you to contact me directly for additional information.

This issue's column will focus on the initial client-attorney meeting. To make it easier I will set out rules for the potential client, and his or her family members, to think about in preparation for the initial attorney meeting.

## Hiring a Lawyer:

Typically our representation begins with a phone call from the injured person or that person's representative. During the initial conversation I will try to ascertain the "who, what, where and why's" of the circumstances surrounding the potential claim. As a result, I hope that the person I am talking to has his or her thoughts organized, and is able to relate to me the essential facts of the situation. Obviously this can be difficult, if not impossible, for the victim of a TBI, and so the help of a trusted person to fulfill this role can be essential.

### **RULE 1:**

**Be prepared to discuss the facts of the case in detail.**

Whether you are the victim, or the victim's representative, be prepared to answer detailed questions about the circumstances leading to the TBI.

How did the injury occur? When did it occur? Was it a work accident, a motor vehicle collision, the result of a premises or product defect or was it the result of the

injured person's sole actions? I will need to know the facts in order to evaluate who the responsible parties are.

If the caller is organized and prepared to answer my questions I will be better able to make an accurate initial evaluation.

### **RULE 2:**

**Have your paperwork organized.**

After the initial phone contact I will typically set up a meeting with the injured individual, his or her family and/or trusted representatives. From the victim's standpoint I know that this initial meeting can be stressful. One of the best ways to reduce that stress for the victim and their representatives is to have all the paperwork relating to the injury in their possession with them during the initial meeting.

I don't expect them to have every bit of paperwork generated by every source, but I do hope they will bring with them everything they have. Typically this will include some of the following: accident reports (either DMV reports, work injury reports, property owner's reports and the like); photographs of the victim, and possibly of the scene of the injury depending on the cause of the injury; medical records of any kind (I don't expect them to have all the medical records, but typically they have some of them); witness information, if any; insurance information, if applicable; documents that identify the potentially responsible parties (if known); and anything else in that person's possession relating to the injury.

The purpose of this information is to confirm what I am being told in the initial meeting. Confirmation is a cornerstone of my representation. If I can prove a favorable fact through objective evidence, and if that fact is supported by testimony of the victim, witnesses, medical providers or other third parties it will only serve to strengthen the case.

### **RULE 3:**

**Tell the lawyer everything: The good, the bad and the ugly:**

What you tell a lawyer you tell in confidence. I explain to my clients that strict confidentiality applies to anything they tell me. I also tell them that I need to know the truth, the whole truth, and everything else they have to say. I operate on the theory that what I don't know can and will hurt the case. Lawyers can work with "bad" facts, and by "bad" facts I mean facts that may be unfavorable to the case. We do it everyday. What we have trouble with, though, are the unknown "bad" facts that hide like snakes in the grass. If I know about the "bad" facts I will be able to prepare for them. I work on the presumption that the defense will learn about the "bad" facts, no matter how obscure, and that the "bad" facts will come out. If a "bad" fact comes out at trial without my prior knowledge of it, it can be devastating to the case.

The bottom line: The lawyer is there to represent the injured individual. He or she is on your side, and as a result the lawyer needs to know everything you know about the case. What you tell the lawyer is strictly confidential, and you need to trust that confidentiality.

I hope to follow up this column with others that describe additional aspects of what to expect in a TBI case. It is a complex process, but with a lawyer experienced in handling TBI cases, and with a victim, and that victim's representatives ready to work with the lawyer, the process can lead to favorable results for the injured individual.

*David Kracke is an attorney with the law firm of Nichols and Associates in Portland. Nichols & Associates has been representing brain injured individuals for over twenty two years. Mr. Kracke is available for consultation at (503) 224-3018.*

# BRAIN INJURY ASSOCIATION OF OREGON 2005 HOLIDAY FUNDRAISER



Is your collection complete?  
2005 Portland Ornaments  
"Peacock Lane"

\$25 without CD \$35 with CD by Michael Allen Harrison  
\$225 Full Sets (excluding 1989 & 1990)

Those that drive between Stark and Belmont on Peacock Lane will see a typical Southeast Portland street eleven months out of the year. But for the holiday season, Peacock Lane shines as a beacon for all to share in the annual winter tradition. This limited edition, hand-numbered ornament by Betty Woods-Gimarelli is a perfect addition to any Christmas ensemble. Betty has been crafting these exquisite holiday ornaments since 1989, each depicting a special Portland location. Each ornament is tax deductible and will benefit individuals who have sustained a brain injury.

The Brain Injury Association of Oregon provides community outreach, medical/legal seminars for professionals who treat individuals who have sustained brain injuries, support groups for spouses, survivors, children, parents, and information and referral services.

You can purchase ornaments in the Community Health Information Center, Room NSC 300, of Legacy Good Samaritan Hospital, Legacy Emanuel and Legacy Good Samaritan Gift shops or at the Legacy Meridian Park Hospital Community Health Information Center. You can order by mail or phone by contacting the BIAOR office at 800.544.5243 or 503.413.7707. The sale of each ornament will benefit individuals who have sustained a brain injury and is tax deductible.

If you are interested in ornaments from other years call Margaret Horn at 503.341.7562.

Number of ornaments \_\_\_\_\_ X \$ 25.00 each = \$ \_\_\_\_\_ (\$ 7.00 tax deductible)  
 Number of ornaments with CD \_\_\_\_\_ X \$ 35.00 each = \$ \_\_\_\_\_ (\$12.00 tax deductible)  
 Full Set (in one box) \_\_\_\_\_ X \$225.00 each = \$ \_\_\_\_\_ (\$40.00 tax deductible)

Please make checks payable to BIAOR: Total Enclosed \$ \_\_\_\_\_  
 BIAOR Annual Holiday Fundraiser Tax ID# 93-0900797



I like nonsense, it wakes up the brain cells. Fantasy is a necessary ingredient in living, It's a way of looking at life through the wrong end of a telescope. Which is what I do, And that enables you to laugh at life's realities.

**Dr. Seuss (1904 - 1991)**

## **RALPH E. WISER III**

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# Survivor Corner

## REINVENTING YOURSELF -

### I have a different life now so NOW WHAT?

By Debbie Alexander

I. I need a job - I am 48 I have worked since I was 15 years old.

A. Finally when my hospital stays and physical therapy were completed. I then set up a gym in my garage to continue with my therapy at home (refer to The Headliner Winter 2005 page 11&14). At the time of my BI, I had owned and operated very successful Housekeeping/Domestic Service.

B. NOW WHAT? One day I am a very successful businesswoman in my community. Then "BOOM" life as I knew it was over. But wait....hey my only social life for over a year was going to various therapies for extensive injuries. I have way, way too much time on my hands to think I will not be beaten by my disabilities I will do some comprising. Yeah! That's the ticket I 'REINVENT" myself.

C. I have to do something I had worked like a dog to run a business that was very successful.. I decided I am worthy and I should be able to do something even though I had a TBI and a lot of physical disabilities. Okay Debbie think what can you do????

#### II. The second sub-topic

A. I decided that I would be able to sit and care for animals. I ran an advertisement in a newspaper , WILL HOUSE/PET SIT FOR YOU'RE IN YOUR HOME. The first day my ad came out my telephone

has not stopped ringing. I have jobs through October, my ad came out in June. I have a specialized service no one in my community offers the services that I can provide. I have received outstanding letters of commendation. Major glowing reports, I now feel needed, important, appreciated I have a good reason to feel like some normalcy came back into my life.

B. The moral of the story is that even after being in the hospital a couple months I was NEVER strong enough to push the nurse's button I had to will my elbow to move to the "touch pad" to call for help. I then went home to where I needed help for everything I did, plus trying to sleep in a halo for 16 weeks. Now I've reinvented all the voids and myself I felt about myself and my life since the accident. My life has changed as well as my outlook on life. When I thought that everything was taken away from me because of my injuries. Now I have a new life this is my second chance AND I plan on enjoying every moment.

C. I have so much to offer and I am so talented with the ability to reach out to people so, next issue of The Headliner will have a Dear Debbie Column. Send all correspondence to:  
Dear Debbie  
c/o PMB 8 11500 NE 76th St.  
SUITE #A-3  
Vancouver, WA 98662-3901

Writing in with questions issues or

concerns that you experience sue to whatever your disabilities are. I am starting a self-help column unfortunately not all letters will be addressed , those that art not responded to will be forwarded on to whatever Brain Injury Support Group that is in your area. I sincerely believe that this letters asking for advice then all correspondence will be discussed at support groups if now answered in my column. We will call this NETWORKING AT THE HIGHEST CAPACITY helping each other and working together as one.

#### Overcoming Obstacles and Achieving Your Goals:

I had a way of overcoming certain obstacles when I had returned home from the hospital. I felt so helpless, I hated asking for help for everything then BHAM it hits you - I AM GOING TO GET MYSELF UP AND OUT. I am going to make sure I get stronger and better with each day, to achieve that I had to set Goal's for myself . I felt that this method would work for me.

#### GOAL #1

To be able to unscrew the cap off the tube of toothpaste.

My therapist suggested that I get a pump tube so I could just push down. Well, my response was I would unscrew the cap like I always have. So I took the rubber lid opener from the kitchen, sat on the toilet lid, held the tube between my knees with both hands and all my strength on that rubber opener wrapped around the cap "WOW" that did the trick.

## In Memoriam

Michael William Olson

February 12, 1962 - June 19, 2005

Michael was attending Chico State University in California when, during his junior year in 1983, he suffered a traumatic brain injury in a skiing accident at Mammoth Mountain. The accident resulted in short-term memory deficit and epilepsy not fully controllable by medication. Despite the deficits resulting from his injury, Michael maintained a

cheerful and outgoing attitude and was sensitive to the feelings of others.

We give our deepest sympathy to his father, Bill Olson, past BIAOR president and Board member for the last six years, and to his entire family. We will remember and miss Michael's beaming smile.

## Annual Helmet Clinic

Wednesday  
November 16, 2:30-4:30 PM  
Wistar Morris Conference Room  
(Good Samaritan Hospital)  
1015 NW 22nd Ave.  
Portland, Oregon

- All sizes (toddler to large adult) and styles of brand new helmets will be available for only \$5 each. No limit!

For more information call  
Cari Bennett  
503-413-7296  
or  
Jill Foreman  
503-228-7651 X.1

- Experts will be on site to professionally fit your helmet for you.

## Imagine What Your Gift Can Do.

The most important achievements often start where they are least expected. That's why BIAOR is the perfect place to give. It allows your money to go where it's needed most, when it's needed most, for information about brain injury, resources and services, awareness and prevention education, advocacy, support groups, and conferences and meetings throughout the state for professionals, survivors and family members. Your gift makes a difference at BIAOR.

Please mail to:

**BIAOR**

**2145 NW Overton  
Portland, OR 97205**

503-413-7707

800-544-5243 Fax: 503-413-6849

Name \_\_\_\_\_

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### GOAL #2

To be able to attend to my own personal hygiene and in doing so be ALONE.

So I had a plumber hook up a hand held "very" powerful bathing device and I bought a wide handicap-bathing chair with handles on both sides. So even though I was in a sitting position I still pulled the shower curtain closed just to get some privacy for awhile. The power of the spray could be adjusted. You can tip your head backwards just a couple inches using the nozzle you are able to wash & rinse your hair, I had a lot of problems with getting my hands to work, getting a lather going was a big chore for me.

### GOAL #3

To be able to close my eyes without falling over so I would not injure myself further.

Let's see what is Debbie going to do to get over this bump. I had a little fold out stool I would sit on it I would be cupboard level, I wouldn't put my head down otherwise I would get way dizzy. I would hold onto my bathing chair handles I would hold one hand on a handle to steady myself and I would cleanse with the other. In doing so you are also exercising. A super tool to use on getting your balance back and overcoming some dizziness is walking out in the open no walls looking straight ahead and walk. You are concentrating

on walking straight without looking down there are no obstacles around to get in your way. It may sound silly but it works, if you start this type of exercise USE the buddy system so that if you run out of steam and are starting to feel uncomfortable you have plan "B" a buddy to walk with, a walker or cane for support or if you are braving it alone take your cell phone and walk in a familiar area - your neighborhood perhaps....

We would love to hear about your success's what having you overcome and how did you achieve it? Any Input, Feedback or issues you would like addressed please write. The larger the group the bigger the success..

# 3rd Annual Pacific Northwest Brain Injury Conference

The Brain Injury Association of Oregon (BIAOR) invites you to participate in the 3rd Annual Pacific Northwest Brain Injury Conference: "*Living with Brain Injury: Creating a New Life*". The two day conference will be held on Friday and Saturday, October 1st, 2005, at The Holiday Inn Airport Hotel, Portland, OR. 8439 NE Columbia Blvd. Portland, Oregon 97220 (800-465-4989)

## Preliminary Conference Program

Friday, September 30 (Professional Focus)	Saturday, October 1 (Professional & Consumer Focus)
7:00 a.m. - 7:45 a.m. Registration and Check-in - Continental Breakfast	7:00 a.m. - 7:45 a.m. Registration and Check-in - Continental Breakfast 7:30 a.m. - 8:00 a.m. Meeting of the Members
8:00 a.m. - 9:15 a.m. Welcome to BIA Conference 2005 Opening with Traditional Tribal Ceremony-Ramona Ahto, WA, Bell Ceremony, and Max Defender, OR, Pipe Ceremony Keynote Speaker - Who is the Brain Injury Association and why you should care. Geoffrey Lauer - BIAA	8:00 a.m. - 9:30 a.m. Welcome to BIA Conference 2004: Opening with Traditional Tribal Ceremony-Ramona Ahto, WA, and Max Defender, OR Oregon Governor Ted Kulongoski Senator Laurie Monnes Anderson Keynote Speaker: PJ Long, Seasons of Healing
9:30 a.m. - 10:30 a.m. Track 1: Nathan Zasler, MD - Current advances in assessment and management of low level neurological states Track 2: Impact of the War in Iraq on cases of TBI Track 3: David Clemmons, PhD, UW - Return to Work Track 4: 3rd Annual NWIPBI Planning Workshop - Working Together-Alta Bruce-ND, Marlene Davis-WA	9:40 a.m. - 10:00 a.m. Book Signing with PJ Long, author of Gifts from the Broken Jar
10:45 a.m. - 12:00 p.m. Track 1: Andy Ellis, PhD - Community-based Rehabilitation following Traumatic Brain Injury Track 2: Improving Traumatic Brain Injury Outcomes through Research and Development-Stem cell research - OHSU Track 3: Wayne Eklund, RN CNLCP - Janet Mott, PhD: Life Care Planning for Neurological Injuries Track 4: NWIPBI Planning Workshop -continued	10:00 a.m. - 11:00a.m. Track 1: Allan Weintraub, MD - Craig Hospital, CO - Issues of the aging of the brain following brain injury Track 2: Dave Clemmons, PhD - Maintaining Employment Track 3: Round table- Community-based Rehabilitation following TBI Track 4: 3rd Annual NWIPBI Workshop
<b>12 noon - 1:30 p.m. Lunch</b>	<b>12:30 noon - 2:00 p.m. Lunch</b>
1:30 p.m. - 2:30 p.m. Track 1: Ron Savage, PhD, Pediatric Neuropsychologist, NY - What does the future hold for the adolescent with brain injury in the school environment Track 2: Best Clinical Practices in Rehab - Laurie Erlhardt, PhD - email - teach em Track 3: Russ Spearman -Project Director, Idaho - Telehealth Idaho/TBI Virtual Grand Rounds	2:00 p.m. - 2:45 p.m. Track 1: Ron Savage, Pediatric Neuropsychologist, NY - What does the future hold for the adolescent with brain injury in the school environment Track 2: Family Care/Adjustment -The Experiences of Couples Track 3: Interventions for Cognitive Impairment - McKay Moore Sohlberg Track 4: Meet the Author and Musicians- Book Signing with PJ Long, author of Gifts from the Broken Jar, CD Signing
2:45 p.m. - 3:45 p.m. Track 1: Allan Weintraub, MD Rehab medicine and the aging individual with BI Track 2: Best Clinical Practices in Rehab Track 3: Mark Tilson, PhD-Behavioral Modifications in rehab	3:00 p.m. - 3:45 p.m. Track 1: Alternative/complementary health care treatments and practices and how they may help people with TBI. Panel Track 2: Round table- Community - Client Rehab - Nora Gibson, Northwest Elder Health, WA; Brad Loftis, OR Track 3: Interventions for Cognitive Impairment - Computerized Memory Rehabilitation Programs for Persons with Traumatic Brain Injury: - Brain Train
4:00 p.m. - 5:00 p.m. Track 1: Ann Glang, PhD - Back to School and Beyond: Identification and Outcomes of Students with Traumatic Brain Injury in Public Schools Track 2: Best Clinical Practices in Rehab - continued Track 3: Mark Tilson, PhD; Jane Starbird, PhD: Male versus Female -- Coping after Traumatic Brain Injury - Is there a difference?	4:00 p.m. - 5:00 p.m. Track 1: Alternative/complementary - continued Track 2: Elizabeth McNeff, PSU: Management of Sexuality Track 3: Abby Nartker-Creating memory books-scrapbooks - a family activity



# Registration Form

## 3rd Annual Pacific Northwest Conference on Brain Injury 2005

September 30, 2005 & October 1, 2005

**Please register not later than September 1, 2005 to receive discount, assure admittance and facilitate check-in.**

*(Note: A separate registration form is needed for each person attending.*

*Please make extra copies of the form as needed for other attendees.)*

First Name _____	Last Name _____
Badge Name _____	Affiliation/Company _____
Address _____	City _____ State _____ Zip _____
Phone _____	Fax _____ Email _____
Special Needs _____	

**Please check all that apply:**

- I am interested in volunteering at the conference. Please call me.
- I am requesting continuing education credits (CEU's and CME's) for the conference.
- I would like to make a donation to cover costs of survivors unable to pay (see below).
- Call me about sponsorship/exhibitor opportunities.

Conference Registration Fees: Registration fees include: continental breakfast and dinner on Friday; lunch on Friday and Saturday; all conference related materials; continuing medical/educational units; and access to all conference sessions, exhibits, posters and roundtables.

	<i>BIAOR Member <sup>1</sup></i>	<i>Non-Member</i>	<i>Accompanying Person <sup>2</sup></i>	<i>Amount</i>
<input type="checkbox"/> <u>2 Day 9/30-10/1</u> Conference Advance-	\$250	\$275	\$130	
<input type="checkbox"/> After September 1	\$275	\$300	\$155	\$
<input type="checkbox"/> <u>Friday Only 9/30</u> Advance-	\$175	\$200	\$80	
<input type="checkbox"/> After September 1	\$200	\$225	\$105	\$
<input type="checkbox"/> <u>Saturday Only 10/1</u> Courtesy <sup>3</sup> Advance	\$25	\$35		
<input type="checkbox"/> Courtesy <sup>3</sup> After September 1	\$25	\$35		\$
<input type="checkbox"/> <u>Saturday Only 10/1</u> Survivor/Family Advance-	\$50	\$75		
<input type="checkbox"/> Survivor/Family After September 1	\$75	\$95		\$
<input type="checkbox"/> <u>Saturday Only 10/1</u> Professional Advance-	\$125	\$150		
<input type="checkbox"/> Professional After September 1	\$150	\$175		\$

1) A limited number of conference scholarships are available to survivor members of BIAOR to cover the costs of conference registration. Transportation from Portland and Salem to and from the conference is also available to survivor members on a limited basis. For more information, contact the BIAOR office.

2) Accompanying Person: Registration fee includes continental breakfast, lunch and exhibition only. Fee does not include admission to conference sessions.

3) Courtesy rate is for brain injury survivors with limited means.

I want to become a BIAOR member NOW to receive the discounted registration fee:

- Basic-\$35    
 Family-up to 3 people-\$50    
 Survivor Courtesy<sup>3</sup>-donation    
 Professional-\$100    
 Sustaining-\$250  
 Corporation-\$300    
 Sponsorship Bronze-\$250    
 Sponsorship Silver-\$500    
 Sponsorship Gold-\$1000    
 Sponsorship Platinum-\$2000

Scholarship Contribution \_\_\_\_\_ (donation to assist in covering the cost of survivors with limited funds)

**Registration and Membership**

**Total \$** \_\_\_\_\_

(Please add totals from Registration Fee, Membership Fee and Scholarship Contribution for final total costs)

<p style="text-align: center;"><b>Online registration available at:</b>  <a href="http://www.biaoregon.org">www.biaoregon.org</a> — all major credit cards accepted</p>	<p>Please turn over Registration continued</p>	<p style="text-align: center;">Questions? — Please contact BIAOR  2145 NW Overton Street • Portland OR 97210  800-544-5243 • 503-413-7707 • Fax: 503-413-6849  biaor@biaoregon.org • www.biaoregon.org</p>
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## Conference 2005 Registration Continued

### Payment

Payment in full must accompany your registration. Payment may be made by check or money order, VISA, Discover, or MasterCard.

Enclosed please find my check/ money order payable to BIAOR in the amount of \$ \_\_\_\_\_.

Please charge to my credit card (\$35 minimum):

Visa     MasterCard     Discover     American Express    *Total Charged to Credit Card \$ \_\_\_\_\_*

Card Number: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Print name as it appears on card: \_\_\_\_\_ Signature of Cardholder: \_\_\_\_\_

Credit Card Payments may also be made online at  
[www.biaoregon.org/2005Conference.htm](http://www.biaoregon.org/2005Conference.htm)

### Confirmation and Cancellation Policies

Confirmation letters will be e-mailed within five business days of receipt of registration. If your confirmation is not received within 2 weeks, please contact us via e-mail at [biaor@biaoregon.org](mailto:biaor@biaoregon.org) or by telephone at +1-800-544-5243 or 503-413-7707, M-F, 9-5. Cancellations must be received in writing by September 21, 2005 to qualify for a refund. A \$25.00 administrative fee will be deducted. Substitutions are always welcomed and no-shows will be billed.

### Registration, Payment, and Refund Policy

Please submit payment with completed registration form.

Fees are payable by check, credit card, or state government purchase orders which obligate payment.

All payments must be received by September 1, 2005, to be eligible for discount.

All cancellations are subject to a \$25 processing fee.

No refunds will be issued for cancellations received after September 21; however, registrations are transferable.

Mail registration forms and payments to:  
2005 Conference

Brain Injury Association of Oregon  
2145 NW Overton • Portland OR 97210-2924  
Or Fax to: (503) 413-6849

### **Accommodation Information**

Please make reservations directly with The Holiday Inn Airport Hotel, 8439 NE Columbia Blvd. Portland, Oregon 97220

**Reservations: (503) 256-5000 or (800) Holiday (800-465-4989)**

**Reservation Deadline: September 15, 2005**

**A block of rooms has been reserved for the conference participants at a special rate of \$79 for both single's and double's. Reference the "Brain Injury Conference" for rooms. Rooms are limited, please make your reservations early.**

### NORTHWEST OCCUPATIONAL MEDICINE CENTER, LLP

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**Michael Leland, Psy.D., CRC**

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[mleland@nwomc.com](mailto:mleland@nwomc.com)

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fax (503) 624-0724



Oregon Advocacy Center is an independent non-profit organization which provides legal advocacy services for people with disabilities anywhere in Oregon.

**Working for the rights of individuals with disabilities**

Oregon Advocacy Center  
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220 S. ASH • P.O. BOX 1408  
SISTERS, OREGON 97759-1408  
(541) 549-1617

# Impact of brain injury on caregivers and family

## The diverse effects of a brain injury create multiple impacts on relationships and families

Caregivers often feel that their life that is their own, or as one caregiver states: 'not having a life'. Some feel that due to the demands of the caring role they have very little time alone to pursue their own interests and social life. Caregivers often have to do everything around the house. Prior to the injury they may have relied upon their loved one's support for everyday pressures such as housework and managing finances. Following the injury the workload increases while at the same time there is reduced support to help the caregiver cope.

Caregivers may have difficulties accessing therapy for intensive rehabilitation. Over time caregivers often become their own advocates and even act as case managers to ensure that their loved one receives the much needed care.

## PERSONALITY AND BEHAVIORAL CHANGES

Families may be confronted with childlike behavior, self-centeredness, tactlessness, reduced emotional sensitivity and lack of gratitude. The survivor may show marked changes in their social skills and self-care. Impaired control may be displayed in a number of ways including impulsivity, verbal and physical aggression, increased/decreased libido, financial irresponsibility, alcohol and drug abuse, poor frustration and stress tolerance, impatience, restlessness, and a lack of mental flexibility with the need for a highly structured and routine environment. Common emotional difficulties, such as depression and anxiety may lead to challenging behaviors such as withdrawal and avoidance. Increased dependency, which may be related to emotional problems, may also lead to increasing demands for attention from caregivers.

When self-awareness has been affected, this places further stress on family as the loved one may refuse to believe they are acting inappropriately and respond angrily to feedback.

## LACK OF UNDERSTANDING

People who are somewhat distanced from the person with the injury often have little understanding of what they are going through. The brain

injury survivor may be able to act 'normally' for short periods in front of visitors or publicly, so that many won't believe the difficult home situation as described by the family. Rather than offer support, friends or members of the extended family may make judgments about how a person cares for their relative.

## EMOTIONS

All caregivers respond to the demands of caring for their loved one in their own way. Feelings are always individual and everyone will react differently. Feelings act as signposts, showing when things are not going well and need attention. Some of the feelings that caregivers often say that they experience are feeling overwhelmed, confused and shocked by the diagnosis of brain injury, or realizing the changes that caring will bring into their lives.

Given the many ways a brain injury can impact on a family, it is not surprising that caregivers will encounter a wide range of emotions. There are no right or wrong feelings. These feelings are a natural and normal reaction to caring.

**Guilt** can be a common feeling. Caregivers may feel responsible for the brain injury occurring, not wanting to be a caregiver, losing their temper or being embarrassed by the person being cared for. Caregivers may particularly feel guilty about taking a break from caring or placing the person in residential care.

**Anger** can arise when someone is the sole caregiver or others in the family don't do their fair share. They may become frustrated with the person they are caring for if they regularly face challenging behaviors, angry outbursts, self-centeredness or many of the other issues that can arise after a brain injury.

**Resentment** can arise from lack of support when friends don't make contact anymore, support services don't provide enough help and the focus always is on the person with the brain injury.

Concerns about the future can result in **fear**, wondering how well the loved one will recover, what will happen if you don't cope or who will take up the caring role if you can no longer do so. There is frequently stress associated with the litigation process and the uncertain outcome in court.

Caring can mean being cut off from others and facing high **stress** over a very long period of time. Caregivers are very vulnerable to stress because of the demands of caring. Stress may bring physical symptoms such as headaches, or difficulty sleeping. Some people become very emotional or anxious. Others report feeling persistently tired and chronically unwell.

Sometimes being a caregiver can feel like an endless grind. Over time, you can stop feeling angry or sad about your situation and become **depressed**. Even happy times don't seem to lift you, and the simplest tasks seem to take too much energy. You may find you are sleeping too much, or waking early or during the night. You might feel worthless or agitated most of the time, and have difficulty making decisions.

Family members also experience **grief**, often feeling they have lost their loved one but being unable to say *Goodbye*. For some, the caring duties have overwhelmed their life to the point they feel they have also lost their former lifestyle, and now all they do revolves purely around the survivor.

## STRESS

Stress itself is not a negative phenomenon. In fact, we need some stress in our lives to feel motivated, a sense of achievement and stimulation. It is typically the day-to-day stresses which take a greater toll on a person's physical and mental health because people are less aware of the cumulative effects. When people experience a major life change, people are more likely to recognize the need for support and use various coping strategies.

Caregivers may initially seek support after the brain injury has occurred, but often they don't seek help years down the track as the day-to-day stress of caring gradually wears them down.

Physical signs of stress may include a lowered immune system, breathing difficulties, fatigue, sleep disturbance and muscular tension. Caregivers may also find themselves feeling out of touch reality, forgetful, not looking after themselves, crying easily and not eating properly.

Source: [www.biaq.com.au/facts.htm](http://www.biaq.com.au/facts.htm), reprinted with the permission of BIAQ.



## Regarding Henry

Starring: Harrison Ford, Annette Bening

This movie opens with attorney, Henry Turner, a cruel, greedy, self-absorbed workaholic, defending a case in the courtroom. In the case, he represents a doctor who is clearly liable for the death of a human being because of negligence. Henry is a defense attorney known for his ability to basically lie, cheat, and steal his way to victory. He wins the case with a “who cares about the right outcome” attitude.

After a celebratory dinner, Henry and his wife Sarah return home. Henry leaves shortly after arriving home to walk to the local convenience store to buy a pack of smokes. He interrupts a robbery at the store and is shot in the right frontal lobe, leaving him in a coma with severe brain damage. When he awakes from coma, Henry must start from the beginning. True to real life, he must learn how to talk, walk, and generally live his life again.

Henry's rehabilitation course includes a stay at a program that specializes in brain injury rehabilitation. While the movie progresses rather quickly, the series of events are as might be expected in a rehabilitation environment. However, some of the therapy scenes leave a lot to be desired. For example, there is a scene where the physical therapist (PT) cannot get Henry to speak (that's right, the PT, not the Speech Therapist). So he takes Henry down for breakfast and orders breakfast the way that he (PT) would order it—spices and all—not the way that Henry would order it. When he sets the plate of food in front of Henry he says, “When you start telling me what you want, you can order. Until then, I will do the talking

for you!” When Henry takes a bite of his eggs, he chokes due to the spiciness,

and then he speaks. I realize that the therapist got Henry to speak, but there are better ways to achieve the outcome. Where I work, you would be collecting your final paycheck if you treated a participant that way! Even after this, you find yourself loving the therapist. Indeed, the PT becomes a pillar of support for Henry.

As happens so often with a frontal lobe injury, Henry has significant personality changes. In this case he turns into a nice, thoughtful, caring, human being. However, he could just as easily, as one scene shows, strike out when confronted with a situation that he could not handle. The movie does a nice job of illustrating some of the personality changes associated with brain injury, as well as how an individual relearns information. In one scene, Henry wanders out of his home where his housekeeper is supervising him. Henry walks the streets and finds himself inside an X-rated movie. Henry is clearly shocked by what he sees on the screen and is sure that he has never participated in such an act. Further into the movie, he is reintroduced to the concept of “making love” where he makes reference to the movie and how he hopes he doesn't have to do what he saw in the film.

This movie shows the process of recovery after brain injury from beginning to end. It portrays the sequence from the very scary time when a person is not awake at the hospital, through the stage of a loved one not recognizing people that are very important to him, and finally coming home when there still may be a lot of work to do.

## Memento

Starring: Guy Pearce, Carrie-Anne Moss, Joe Pantoliano, Stephen Tobolowsky, Harriet Sansom Harris, Cullum Keith Rennie, Jorja Fox

This film starts at the end and works its way backward.

Leonard is a former insurance investigator and crime victim who is trying to find the man who raped and murdered his wife. Throughout the film he has two focuses: one, his revenge toward the man who violated his wife and two, the last insurance file that he denied because he thought the man was “faking” his claim of decreased memory following an accident. The complication in the plot is that Leonard has no short-term memory. During the attack that ended his wife's life, Leonard suffered brain damage when someone hit him from behind. Now, although his long-term memory is fine, he can't remember any recent events. He can meet the same person a hundred times and can't remember his/her name or who they are. To compensate for his condition, Leonard relies upon a series of Polaroid snapshots that he takes. He documents short notes about the people that he takes pictures of so that he can refer to the photo the next time they meet. In addition, he tattoos pictures of significant events on various areas of his body. Not exactly the ideal memory compensation strategies, but they work for him (or so he thinks).

Along the way, backward, Leonard is assisted by Teddy, a police officer who would like to see Leonard get his revenge. He is also assisted by Natalie, a friend whose motivation may not be as it seems. This story is told in pieces, each scene starting where the other has ended. Dispersed throughout the film are bits and pieces about the last insurance file Leonard handled. At first you are confused as to why he keeps referring to the file, but it becomes clear (or does it?) toward the end of the film.



# JOIN US FOR THE SIXTH ANNUAL HOLIDAY FUNDRAISER



Portland Center Stage Sunday December 11, 2005

## THIS WONDERFUL LIFE

Entertainment: 11:30 am

Classical Pianist—Michael Allen Harrison

Portland Holiday Ornament signing by Betty Woods-Gimarelli

Brunch and Silent Auction: 12 noon

In the Rotunda of the Portland Center for the Performing Arts  
1111 SW Broadway

Portland Center Stage - 2 pm

This Wonderful Life (from It's a Wonderful Life)

**Please Purchase Tickets by December 1, 2005**

Tickets for:

Brunch, Music, Silent Auction, Auction, and Play: \$100

Sponsor Table: \$1000

For further information please contact:  
Sherry Stock [biaor@biaoregon.org](mailto:biaor@biaoregon.org)

What a splendid head, yet no brain.  
Aesop (620 BC - 560 BC)

Severe spasticity is tight, stiff muscles that make movement – especially of the arms and legs – difficult or uncontrollable.

**Has a brain injury given you or someone you care for this symptom?**

There are ways to help control even the most severe spasticity in adults and children.

For more information, talk to your doctor and call Steve Garland with Medtronic at 1-800-638-7621, ext. 95886.



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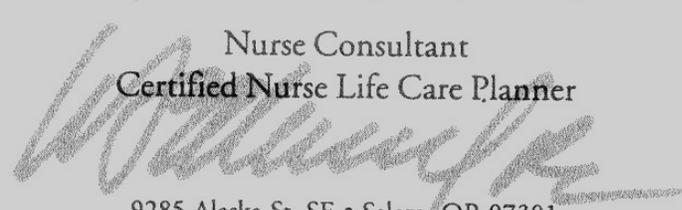
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# Oregon Brain Injury Support Groups

## Bend

### **CENTRAL OREGON SUPPORT GROUP**

2nd Saturday 10:30am to 12:00 noon  
St. Charles Medical Center  
2500 NE Neff Rd, Bend 97701  
Rehab Conference Room, Lower Level  
Amy King, 541-382-5882  
amyk@cohospise.org

## Brookings

### **BRAIN INJURY GROUP (BIG)**

2nd Monday 7:00—8:00 pm  
Brookings Evergreen Federal Bank  
850 Chetco Ace, Brookings OR 97415  
Liz Prendergast, 541-469-5306  
lizzietiz@usa.net

## Corvallis

### **STROKE & BRAIN INJURY SUPPORT GROUP**

1st Tuesday 1:30 to 3:00 pm  
Church of the Good Samaritan Lng  
333 NW 35th Street, Corvallis, OR 97330  
Call for Specifics  
Amy Nistico, (541) 768-5157  
aeasterl@samhealth.org

## Eugene (2)

### **COMMUNITY REHABILITATION SERVICE OF OREGON**

2nd Tuesday 7:00 to 8:30 pm  
Central Presbyterian Church  
15th & Patterson, Eugene, OR. 97401  
Call for Information  
Jan Johnson, (541) 342-1980  
comrehabjan@aol.com

### **BIG (BRAIN INJURY GROUP)**

Tuesdays 11:00am-1pm  
Hilyard Community Center  
2580 Hilyard Avenue, Eugene, OR. 97401  
Curtis Brown, (541) 998-3951  
BCCBrown@aol.com

## Hillsboro (2)

### **HELP**

(Help Each Other Live Positively)

4th Saturday - 1:00-3:00 pm  
TBI Survivor self-help group  
(Odd months)  
TBI Family & Spousal (Even Months)  
Cognitive Enhancement Center  
982 Naomi Court, Hillsboro, OR 97124  
Brad Loftis, (503) 547-8788  
bcmuse2002@yahoo.com

## Klamath Falls

### **SPOKES UNLIMITED TBI GROUP**

4th Friday 3:00pm to 4:30pm  
415 Main Street  
Klamath Falls, OR 97601  
Dawn Lytle, (541) 883-7547  
sustaff@cdsnet.net

## Lebanon

### **BRAIN INJURY SUPPORT GROUP OF LEBANON**

1st Thursday 6:30 pm  
Lebanon Community Hospital  
525 North Santiam Hwy, Lebanon, OR  
97355  
Conf Rm #6  
Lisa Stoffey 541-752-0816  
or Mary Bergeman, 541-367-8344  
lstoffey@aol.com

## Medford

### **TURNING POINT**

3rd Tuesday 4:00pm-5:00pm  
Call for More Information  
Pam Ogden, (541) 776-3427  
PAM@sogoodwill.org

## Newport

### **BRAIN INJURY SUPPORT GROUP OF NEWPORT**

2nd Saturday 2-4 pm  
657 SW Coast Hwy  
Newport, OR 97365  
(541) 574-0384  
www.progressive-options.org

## Pendleton

Inactive at this time.

For more information contact:

Joyce McFarland-Orr (541) 278-1194  
jmcfarland@Oregontrail.net

## Portland (9)

### **BRAINSTORMERS I**

2nd Saturday 10:00 - 11:30am  
Women's self-help group  
Wilcox Building Conference Room A  
2211 NW Marshall St., Portland 97210  
Next to Good Samaritan Hospital  
Northwest Portland  
Jane Starbird, Ph.D., (503) 493-1221  
drstarbird@aol.com

### **BIRC Alumni Support Group**

Last Tuesday of every odd month  
1815 SW Marlow, Ste 110, Portland, 97211  
Contact Doug Peterson for additional  
information  
503-292-0765 or doug@progrehab.com

### **BRAINSTORMERS II**

3rd Saturday 10:00am-12:00noon  
Survivor self-help group  
Emanuel Hospital, M.O.B.-West  
2801 N Gantenbein, Portland, 97227  
Northeast Portland  
Steve Wright (503) 413-7707  
biaor@biaoregon.org

### **CROSSROADS (Brain Injury Discussion Group)**

2nd and 4th Friday, 1-3 pm  
Independent Living Resources  
2410 SE 11th, Portland, OR 97214  
Southeast Portland  
Darian Hartman, 503-232-7411  
ilr\_darian@hotmail.com

### **FAMILY & SPOUSAL SUPPORT GROUP**

3rd Saturday 1:00 pm-2:00 pm  
Self-help and support group  
Emanuel Hospital, M.O.B.-West  
2801 N Gantenbein, Portland, 97227  
Northeast Portland  
Jean Ellen Herzegh (503) 413-1134  
jeanellen@comcast.net

### **FARADAY CLUB**

**Must be pre-registered** -1st Saturday 1:00-2:30pm

Peer self-help group for professionals  
with brain injury  
Emanuel Hospital, Rm. 1035  
2801 N Gantenbein, Portland, 97227  
Northeast Portland  
Arvid Lonseth, (503) 680-2251 (pager)  
alonseth@pacifier.com

### **TBI CLUB**

Location varies, call for times and  
location of meetings  
Meets twice a month - days and times vary  
call for information  
Sandra Ward, (503) 735-4857  
slwsundance@qwest.net

**If you are receiving unwanted or multiple newsletters or have errors in your name or address, please contact BIAOR—**

# ARE YOU A MEMBER?

The Brain Injury Association of Oregon relies on your membership dues and donations to operate our special projects and to assist families and survivors. Many of you who receive this newsletter are not yet members of BIAOR. If you have not yet joined, we urge you to do so. It is important that people with brain injuries, their families and the professionals in the field all work together to develop and keep updated on appropriate services. Professionals: become a member of our Resource Referral Service. 2005 dues notices will be mailed this month. Please remember that we cannot do this without your help.

Your membership is vitally important when we are talking to our legislators. For further information, please call 503-413-7707 or 1-800-544-5243 or email [biaor@biaoregon.org](mailto:biaor@biaoregon.org).

## Residential Alternative Housing, Inc.

**Sharon Slaughter**  
Executive Director

3005 Windsor Ave  
Salem, Oregon 97301

Phone: 503-581-0393

Fax: 503-581-4320

[sharonslaughter@qwest.net](mailto:sharonslaughter@qwest.net)

### HANDLING STRESS AND ANGER

This group will meet once a month to learn methods of stress reduction and to explore ways of lessening impulsive anger.

2145 NW Overton St  
Portland OR 97210  
503-413-7707

### PARENTS OF CHILDREN WITH BRAIN INJURY

This group will meet once a month, and will be a self-help support group.

2145 NW Overton St  
Portland OR 97210  
503-413-7707

### Roseburg UMPQUA

### VALLEY DISABILITIES NETWORK

2nd Monday 12 noon - 1pm  
419 NE Winchester, Roseburg, OR  
97470

Tim Rogers, (541) 672-6336  
[timrogers@udvn.org](mailto:timrogers@udvn.org)

### Salem (2)

### SALEM BRAIN INJURY SUPPORT GROUP

4th Thursday 5pm-7pm  
Salem Rehabilitation Center  
2561 Center Street, Salem OR  
97301

Steve Paysinger, (503) 561-1974  
[smpays@salemhospital.org](mailto:smpays@salemhospital.org)

### SALEM SOCIAL CLUB

6:30pm - 8:30pm  
2nd Wednesday

Residential Alternative Housing  
3005 Windsor Ave. NE, Salem, OR  
97301

Pam Olson, (503) 588-7594  
[p-olson@comcast.net](mailto:p-olson@comcast.net)

### Vancouver Washington VANCOUVER TBI SUPPORT

1st Thursday, 6-8pm  
Disability Resources of SW  
Washington  
5501 NE 109th Court Suite N  
Orchards, WA  
Cindy Falter (360) 694-6790  
Kaycie Tolleson, (360) 750-6773

### Brain Injury Association of Oregon

New Member

Renewing Member

Name: \_\_\_\_\_

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### Type of Membership

- Basic \$35 (\$50 for family)  Professional \$100  
 Non Profit \$75  Sustaining \$200  
 Survivor Courtesy \$ 0 (Donations from those able to do so are appreciated)

### Sponsorship

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Additional Donation/Memorial: \$ \_\_\_\_\_

In memory of: \_\_\_\_\_  
(Please print name)

Member is:

Individual with brain injury  Family Member

Professional. Field: \_\_\_\_\_

Other: \_\_\_\_\_

### Type of Payment

Check payable to BIAOR for \$ \_\_\_\_\_

Charge my VISA/MC/Discover Card \$ \_\_\_\_\_

Card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Print Name on Card: \_\_\_\_\_

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### Please mail to:

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Portland, OR 97210

503-413-7707 or 800-544-5243

Fax: 503-413-6849

[www.biaoregon.org](http://www.biaoregon.org) • [biaor@biaoregon.org](mailto:biaor@biaoregon.org)

The human brain starts working the moment you are born and never stops until you stand up to speak in public. —

**George Jessel**



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## How To Contact Us

### *Brain Injury Association of Oregon (BIAOR)*

2145 NW Overton  
Portland, OR 97210-2924  
(503) 413-7707  
Toll free: (800) 544-5243  
Email: [biaor@biaoregon.org](mailto:biaor@biaoregon.org)  
Website: [www.biaoregon.org](http://www.biaoregon.org)

*Oregon Brain Injury Resource  
Network (OBIRN)*  
Toll free: (800) 544-5243  
Email: [tbi@wou.edu](mailto:tbi@wou.edu)  
Website: [www.tr.wou.edu/tbi](http://www.tr.wou.edu/tbi)

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