



**BIAM Annual Education Conference
April 8 - 9, 2010**

Brain Injury: Seasons of Change and Growth

**Sheraton Baltimore North Hotel &
Conference Center
Towson, MD**

Detailed session descriptions

AGENDA**THURSDAY, APRIL 8, 2010**

7:15 am - 8:00 am

REGISTRATION AND CONTINENTAL BREAKFAST

8:00 am - 8:15 am

WELCOME/OVERVIEW

8:15 am - 9:30am

OPENING SESSION: A Path to Recovery Lee Woodruff A

Prior to January of 2006, Lee Woodruff was a freelance writer and public relations executive. When her husband, ABC News anchor Bob Woodruff, sustained a near-fatal traumatic brain injury while reporting from Iraq, Ms. Woodruff's life changed forever. She was thrust into the role of caregiver, struggling to keep her family intact while helping her husband on his long path to recovery.

9:30 am - 9:45 am

BREAK/EXHIBITORS/SILENT AUCTION

9:45 am - 11:15 am

CONCURRENT MORNING BREAKOUT SESSIONS A

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

A1 Common Ground, Brain Injury Among Us Alicia Cignatta (Survivors ONLY)

An interactive session for individuals with brain injuries. The sessions will include discussions on our continued recovery experiences and highlight the things that have helped inspire and motivate us individually to keep going (our family, a mentor, a special quote, phrase, song lyrics etc.) What have we discovered to be helpful in our lives on this road called recovery?

A2 Caregiving Jean Wilson, RN, MSN, CCE (Caregivers ONLY)

This conference presentation is an open forum of caregivers who can share their trials and tribulations on caregiving the brain injured individual in a non-threatening environment. Resources and coping techniques for the caregiver and the brain injury individual will be shared.

A3 Effective Behavior Management for Persons with Acquired Brain Injury: A Holistic Approach - Revisited 20 Years Later

N. Dennis Satanoff A

In 1990, as a young psychologist relatively new to the field of brain injury rehabilitation, I presented a paper at the National Head Injury Foundation 9th Annual National Symposium, New Orleans entitled "Behavioral Treatment of the Traumatic Brain Injured Patient: The Need for Greater Specialization." The following year the presentation became a journal article entitled "Effective behavior Management of the Head Injured Patient: A Holistic Approach." Both the presentation and article received positive attention. In the ensuing two decades, much has changed in brain injury rehabilitation and behavior management. This presentation will critically review the 1991 journal article with emphasis on the changes which have occurred both in my thinking and in the practice of effective behavior management for persons with ABI today

A4 Impaired Awareness Following Acquired Brain Injury: Overview and Treatment Strategies Part I

Elizabeth Povanda, MA, CCC-SLP and David Scarisbrick, PhD P, C

Accurate self-awareness is considered an essential prerequisite for successful participation in rehabilitation. This presentation will focus on the deficits in awareness which are seen after an acquired brain injury. Several hypotheses on possible mechanisms underlying disorders of awareness will be explored as well as the importance self-awareness plays in brain injury rehabilitation. Various subjective and objective measures of assessment will be introduced and discussed. In addition, established and innovative interventions aimed at increasing awareness after an acquired brain injury will be discussed.

A5 Transitioning Persons with TBI into Young Adulthood: Bridging the Gap Between Pediatric and Adult Rehabilitation Services

T. Andrew Zabel, PhD, Lisa Jacobson, Pegah Touradji, and Kathleen Kortte, PhD E, P, C

Individuals with histories of TBI frequently experience a gap in rehabilitation services when they transition from pediatric to adult-focused service providers. The transition of TBI patients from adolescence into adulthood represents a challenging "border zone" for adult-focused and pediatric rehabilitation professionals. This presentation will focus upon a "lifespan" approach to TBI rehabilitation, and will discuss ways of bridging the transition gap between pediatric and adult-focused rehabilitation in clinical practice, research, and training/education.

11:15 am - 11:30 am

BREAK/EXHIBITORS/SILENT AUCTION

11:30 am - 12:30 pm

CONCURRENT AFTERNOON BREAKOUT SESSIONS - B

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

B1 Calming and Charging Your Brain and Your Self William Perry, MSW, LCSW-C A

Based on neuroplasticity, this presentation offers ways to calm and charge a person's brain through training in Meditation, EEG Biofeedback, Interactive Metronome, and Tomatis Auditory Treatment. EEG Biofeedback and Interactive Metronome has been found beneficial to all severities of brain injury while Tomatis Auditory Training has been found to benefit mild brain injury. Exemplifying the benefits of these trainings, I will share my struggles to successfully overcome an auditory delay.

B2 Family Dynamics after Brain Injury: Strategies and Roles David Barclay, PhD and Sarah Loeffler, LCSW-C F, S

Family dynamics, including such things as communication, expectations, expression of feelings, and rules of behavior within the family, are explored as they pertain to the family system of a survivor of brain injury. Specific unique struggles and situations are examined within the family system along with specific strategies that can be used by survivors, family members, and professionals to maximize family functioning after brain injury.

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

- B3 Dementia and Other Long-Term Neurological Problems Following Mild Brain Injury: Who is Most at Risk?** *Kevin Crutchfield, MD* C
Repeated concussions, also known as mild brain injuries, have come to the attention of the professional athletic world. What was once considered just part of the game, is currently receiving public scrutiny for the safety of professional athletes who sustain repeated concussions. This presentation will explore the long-term consequences of repeated concussions (also known as mild brain injuries). Some of the risk factors include increasing a person's risk of dementia, sleep problems, sleep apnea, anxiety, depression, and visual problems, to name just a few. This presentation will use professional athletics to illustrate some of the potential long-term effects of repeated concussions. It will also provide information regarding who are most at risk for these problems and some of the interventions used to treat them
- B4 Impaired Awareness Following Acquired Brain Injury: Overview and Treatment Strategies Part II**
Elizabeth Povanda, MA, CCC-SLP and David Scarisbrick, PhD P, C
Accurate self-awareness is considered an essential prerequisite for successful participation in rehabilitation. This presentation will focus on the deficits in awareness which are seen after an acquired brain injury. Several hypotheses on possible mechanisms underlying disorders of awareness will be explored as well as the importance self-awareness plays in brain injury rehabilitation. Various subjective and objective measures of assessment will be introduced and discussed. In addition, established and innovative interventions aimed at increasing awareness after an acquired brain injury will be discussed.
- B5 Developmental Disabilities Administration - Everything You Wanted to Know but Were Afraid to Ask!** Speaker - TBD A
Funding and services through the Developmental Disabilities Administration (DDA) can be helpful to many individuals with brain injury. Learn about what DDA does and how to apply. There will be plenty of time to answer questions.
- B6 ACBIS Review Session** *Mark Huslage, LCSW-C, CBIST*
ACBIS was created in 1996 to address the growing need to provide a standard of training for persons working in the brain injury field. The ACBIS credentialing is given to those individuals who successfully complete the application process, meet the employment standards and pass a written exam. This two part session will explain the process for AACBIS and review the study materials. Participants should have already applied for or be in the process of applying for ACBIS.

12:30 pm - 1:30 pm LUNCH

1:30 pm - 2:30 pm **GENERAL SESSION - BIAM Presents:**

- *Partnership for Independence Awards** *Kathy McCormick, BIAM Conference Committee*
- *More than Just a Peach and Scarecrow** *Suzanne Kantt, BIAM Assistant Director*

This brief overview of BIAM will highlight the work and accomplishments of the organization, including outreach activities, information and referral, resource coordination, case management, and legislative and advocacy activities.

2:30 pm - 2:45 pm BREAK/EXHIBITORS/SILENT AUCTION

2:45 pm - 3:45 pm CONCURRENT AFTERNOON BREAKOUT SESSIONS - C

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

- C1 Brain Injury Advocacy Academy: How to Present Your Victories and Needs to People Who** *Victoria Harding, MBA, MS, CCC-SLP* A
The workshop will provide a focused opportunity for participants to learn how to both write and succinctly verbally present their story of brain injury to legislators and other governmental decision makers. Participants will emerge from the workshop with: 1) a written letter focusing on their needs of support and services which will be mailed to the appropriate representative, senator and governor 2) a practiced and critiqued verbal presentation that can be made to government decision makers, including a "what to expect" preparation 3) a human interest story that can be sent to local and state newspapers.
- C2 The Gift of a Laughing Heart Transforming Stress into Play** *Thomas Hunt, PhD* F, E, P, C
Attending playfully to the heart is often a vital way to stay attuned to liveliness and to counteract the sudden impact of stress. This experiential learning session will draw upon participants' inner resources, invite the creative awakening of the playful self and enact selected laughter exercises - all to activate spontaneity, evoke positive emotions and focus on the heart. Dialogue will occur concerning the value of self-developing a personalized stress release practice that includes laughter exercises, evoking and enjoying positive emotions and focusing on the heart. Those participants with hernia, advanced piles, heart diseases with chest pain, epilepsy, severe back ache, recent surgery, uterovaginal prolapse, pregnancy, attacks of cold or flu, eye complications, asthma and any other discomfort should refrain from selecting this session.
- C3 Effective Return to Work Considerations and Methods** *Susan Budden, MS, CRC* A
This session is intended for attendees with a vested interest in the facilitation of a successful return to work of a client, employee or loved one following a traumatic brain injury. Important information for all parties to consider including assessment of the individual with a TBI's strengths, weaknesses, employment barriers, solutions, job accommodations, supported employment and methods useful to insuring a successful return to work will be highlighted. Please join this session provided by an experienced vocational counselor to learn more about the challenges of job placement and job retention while identifying the barriers and solutions for successful return to work. This session will touch on vocational assessment, job accommodations, job analyses, Americans with Disabilities Act, and supported employment. Additional resources will be cited for more in depth information or research by attendees.

- C3 Effective Return to Work Considerations and Methods** *Susan Budden, MS, CRC* **A**
 This session is intended for attendees with a vested interest in the facilitation of a successful return to work of a client, employee or loved one following a traumatic brain injury. Important information for all parties to consider including assessment of the individual with a TBI's strengths, weaknesses, employment barriers, solutions, job accommodations, supported employment and methods useful to insuring a successful return to work will be highlighted. Please join this session provided by an experienced vocational counselor to learn more about the challenges of job placement and job retention while identifying the barriers and solutions for successful return to work. This session will touch on vocational assessment, job accommodations, job analyses, Americans with Disabilities Act, and supported employment. Additional resources will be cited for more in depth information or research by attendees.
- C4 Behavior Management in the Brain Injured Patient** *Edward Murphy, PsyD and David Long, MD* **P, C**
 Rehabilitation is important in improving long-term psychological outcome of patients with brain injury who often suffer emotional and behavioral impairments. This session describes in detail the importance of a focused program for behavioral management in an acute rehabilitation setting. It demonstrates how advances in technology with the use of audiovisual capabilities and computer assisted functional behavior analysis can improve patients outcomes.
- C5 Sleep Study Results** *Michael Makley, MD* **P, C**
 This presentation will focus on the patient emerging from moderate to severe head injury and in particular the stage of emergence termed post traumatic amnesia [PTA]. Preliminary data from our research will be presented which looks at the prevalence of sleep disturbance in patients during this period and the relation of sleep efficiency to return of memory. Clinical implications will be discussed.
- C6 ACBIS Review Session** *Mark Huslage, LCSW-C, CBIST*
 ACBIS was created in 1996 to address the growing need to provide a standard of training for persons working in the brain injury field. The ACBIS credentialing is given to those individuals who successfully complete the application process, meet the employment standards and pass a written exam. This two part session will explain the process for AACBIS and review the study materials. Participants should have already applied for or be in the process of applying for ACBIS.

3:45 pm - 4:00 pm BREAK/EXHIBITORS/SILENT AUCTION
 4:00 pm - 5:00 pm CONCURRENT AFTERNOON BREAKOUT SESSIONS - D

- D1 Strategies and Skills for the Caregivers Journey** *Janet Cromer, RN, MA, LMHC* **A**
 Family caregivers deal with their own emotional responses, adjustment issues, and learning needs as the survivor moves along the brain injury continuum from acute crisis to rehabilitation to living at home in the "new normal" for years. Join us to learn a repertoire of stress management and adaptive skills matched to each stage of the caregiver's journey.
- D2 Education Module - What Every Educator Needs to Know About Brain Injury** *Patricia Janus, MEd and Panel* **E**
 There are policies and procedures, best practices and creative strategies that can be implemented in the classroom to help a student with brain injury be successful even during the most challenging times. Learn from a panel of seasoned experts, review some case studies and discuss classroom situations in a group setting.
- D3 Mindfulness and Recovery** *Amy Fox, PhD* **A**
 Mindfulness is living in the moment with awareness and appreciation of all that is possible in the present moment. This awareness allows a person to move forward purposefully, not being held back by standards from the past or fears of the future. This workshop will introduce participants to the attitudinal factors involved in mindfulness practice. They will be informed of the neuroanatomy of mindfulness as well as research demonstrating how mindfulness promotes social and emotional well being. Participants will also have an opportunity to practice a mindfulness exercise.
- D4 Identifying Individuals at Risk of Delayed Onset PTSD or Depression Following Mild Traumatic Brain Injury** *Paul Rapp, PhD* **A**
 In some instances individuals receiving closed skull head injuries do not present symptoms in the immediate post-injury, but they do present significant subsequent impairment in cognitive and affective processing. The object of this research program is to develop methods based on the dynamical analysis of event related potentials that can identify at-risk individuals before the appearance of overt symptoms. Event related potentials are the brain's response to external stimuli. These potentials can be recorded noninvasively by scalp electrodes. This investigation is driven by a specific physiological hypothesis which argues that progressive diffuse axonal injury results in the failures in the communication between nerve cells that is necessary effective cognitive processing. It is further hypothesized that these network deficiencies will result in abnormalities in brain synchronization that can be observed in the analysis of event related potentials.
- D5 Sexual Health after Brain Injury** *Daniel Sullivan, DO, CBIS, Donny Cook, RN, CBIS, and David Gross, MSW* **P, C**
 After suffering a traumatic brain injury, many individuals who once were sexually active may have questions regarding their return to intimacy. This session will address the medical, physical and psychosocial aspects of returning to healthy sexual activity post brain injury.

AGENDA**FRIDAY, APRIL 9, 2010**

7:15 am - 8:00 am

REGISTRATION AND CONTINENTAL BREAKFAST

8:00 am - 8:15 am

WELCOME/OVERVIEW

8:15 am - 9:30am

30am

OPENING SESSION: Legacies and Possibilities*Eileen Rudnick A*

A disability is what you make of it. Helen Keller taught us to disregard deficits and to utilize the gifts we possess to explore and shape our world. She was a great humanitarian and ambassador who spoke seven languages. She was also blind and deaf. Brain injury is not one's identity. It is one fiber woven into the tapestry of a lifetime and acquisition of a brain injury does not detract from one's giftedness. Brain injury may be the essential ingredient in a great life.

9:30 am - 9:45 am

BREAK/EXHIBITORS/SILENT AUCTION

9:45 am - 11:15 am

CONCURRENT MORNING BREAKOUT SESSIONS – E

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

E1 Common Ground, Brain Injury Among Us *Alicia Cignatta and Martin Kerrigan, MA, EdS (Survivors ONLY)*

This is a survivor-only interactive session that will break down into three groups based on the following:

Not Able to Work and Have Other Interests

Not Working and/or in School Yet

Have Returned to Work or School

The peer-survivor groups will discuss their continued recovery experiences amidst the challenges of everyday life and focus on the things that have helped inspire and motivate them to keep going (family, a mentor, a special quote, phrase, song lyrics, etc). What have we discovered to be helpful in our lives on this road called recovery?

E2 Care Giving *Jean Wilson, RN, MSN, CCE (Caregivers ONLY)*

This session is an open forum of caregivers who can share their trials and tribulations on care giving for the individual with a brain injury in a non-threatening environment. Resources and coping techniques for the caregiver and individuals with a brain injury will be shared.

E3 Treatment for Minimally Responsive Brain Injured Patients in Acute Rehab*Stephanie Wilder, COTA/L, Lisa Clossey, MS, CCC-SLP, and Dan Gladmon, PT C*

This session focuses on the progression of minimally responsive brain injured patients through the use of an interdisciplinary therapy team in the acute rehabilitation setting. Specific, individualized treatment plans and activities to maximize patients functioning and quality of life regarding Physical, Occupational, Speech, and Recreational Therapies will be discussed along with case studies.

E4 Navigating the System: Identifying and Accessing State, Private, and Federal Programs After Brain Injury*Anastasia Edmonston, Charlotte Wisner, Lauren Dorsey, and Catherine Mello A*

This workshop will provide attendees with tools for navigating community, state and federal systems. Lessons learned are based on consumer identified goals and needs during the Maryland TBI Project. On average, each of the 182 individuals served in five Maryland counties utilized 75 hours of resource coordination services. This includes direct time spent with the resource coordinator, as well as the resource coordinator's advocacy on behalf of consumers with community, state, and federal agencies and human service providers. It is the Project's experience that the most pressing needs of individuals served are: 1. Links to housing and housing resources 2. Assistance in identifying and applying for entitlements and supports (e.g. Social Security benefits, Developmental Disability Administration related services) 3. Access to mental health/substance abuse/domestic violence/medical/rehabilitation services Selected case examples will be shared to illustrate successful strategies and approaches. Feedback from individuals served regarding their experiences and measurement of quality of life issues pre and post services will be discussed.

E5 Changes to Special Education Practices, Policies, and Procedures in Maryland *Maureen Van Stone, JD A*

Ms. Van Stone will provide an overview of special education practices, policies, and procedures in Maryland, with specific information about the Maryland online IEP. Ms. Van Stone will also highlight information about how graduation requirements affect students with disabilities in Maryland. Attendees will be provided time to ask questions and the presenter will provide information and materials at the conclusion of the presentation.

E6 Unlike Malcolm in the Middle . . . Nurses are in the Middle of Interdisciplinary Care Delivery *Rosemary Payne, BSN, RN P, C*

Nurses can either be viewed by the interdisciplinary team as disengaged in the rehabilitation process of the brain injury patient or viewed by the interdisciplinary team as the gatekeepers, observers and communicators of in the rehabilitation process. In many programs nurses are challenged to identify their role in brain injury rehabilitation. This presentation will offer nurses in the acute/chronic/long-term care settings working with patients with brain injury to identify a strong sense of presence and voice within the interdisciplinary team approach to treatment.

11:15 am - 11:30 am

BREAK/EXHIBITORS/SILENT AUCTION

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

- F1 Innovative Collaboration for ABI: Strategies for Vocational Success**
Stacy Seymore, COTA/L, Carla Bazile, CTRS, CBIS, and Sharon Plump, MS, CRC P, C
 Returning to work following a TBI is a job in itself. Presenters will discuss the importance of building a collaborative team approach to assist consumers with vocational success. Attendees will learn strategies and take away tools to assist clients with vocational planning and developing realistic career goals.
- F2 Living with Lloyd: A Spouse’s View of Acquired Brain Injury** *Alice Kolman, MSW A*
 Three years ago my otherwise healthy husband, Lloyd, became unexpectedly and critically ill with bacterial meningitis. He spent one week in a life threatening coma followed by one month more of hospitalization with intensive daily therapies. Lloyd was then discharged home with a recommendation of continued treatment as an outpatient. This continued for the next 1.5 years and included weekly therapies. As a result of his illness and it's affect on brain functioning living life with Lloyd has changed. I have weathered the initial crisis, am still learning to manage the chronic issues and will share my unique perspective of this experience.
- F3 Neurotherapy for TBI in Iraq/Afghanistan and Vietnam Veterans: Reduction in Fatigue, Headache, Mood, and Cognitive Symptoms following Neurofeedback** *Mary Lee Esty, PhD P, C*
 There is a critical need to efficiently address complex trauma symptoms manifested in veterans of the Afghanistan and Iraq wars (OEF/OIF). OEF/OIF male and female veterans with mixed TBI/PTSD symptom syndromes were referred to the Neurotherapy Center of Washington and treated with the Flexyx Neurotherapy System (FNS) for up to 25 sessions. Measures completed at pre- and immediately post-treatment included the Neurobehavioral Functioning Inventory, the Post-Traumatic Stress Disorder Scale (PTSD); Current Symptoms Scale and ratings of body and headache pain. Results: Highly statistically significant results were obtained from these research measures. Data showing response of chronic TBI/PTSD symptoms for two Vietnam Veterans will also be presented.
- F4 The Effects of Acquired Brain Injury on the Developing Brain**
Kathy McCormick, OT, Amanda Smith, SLP, Brenda Elliott, PhD, and Danielle Landwehr, PsyD A
 It was once thought that the earlier the brain injury, the better the outcomes. More recent evidence suggests, however, that an injury affects the brain in the process of development and that the specific skills that are affected are those that were emerging when the injury occurred. While several other factors are known to play a role in recovery, including: premorbid functioning, psychosocial factors, gender, and severity of injury, the age at the time of injury can help predict the long term outcomes and the challenges a child might face as they get older. This presentation will provide an overview of how the brain develops and how specific developmental stages interact with acquired brain injury to produce cognitive, emotional, social, and physical changes that are characteristic of each stage. The effects of disruptions occurring during early childhood (ages 3-7), middle childhood (ages 8-12), and adolescence (13-17) will be discussed and case examples will be used to illustrate the different developmental stages.
- F5 Sexual Health after Brain Injury** *Daniel Sullivan, DO, CBIS, Donny Cook, RN, CBIS, and David Gross, MSW P, C*
 After suffering a traumatic brain injury, many individuals who once were sexually active may have questions regarding their return to intimacy. This session will address the medical, physical and psychosocial aspects of returning to healthy sexual activity post brain injury.

12:30 pm - 1:30 pm LUNCH

1:30 pm - 3:00 pm CONCURRENT AFTERNOON BREAKOUT SESSIONS - G

Choice of one session only. Please mark your selection in the appropriate box on the registration form.

- G1 Opening Doors to Freedom** *Jamey George, Shirl Tarbox, Lori Magruder, Nancy Diehl, and Marie Robinson A*
 The panelists will provide a brief overview about the roles of a center for independent living and explain the services and programs of the centers for independent living throughout the State of Maryland. One panelist will give an overview of the services and then, each panelist will give a brief overview of the services and programs available at her center.
- G2 Tai Chi Demonstration** *David Foulk A*
 David Foulk will present a modified short form of tai chi, tai chi 12 step, specifically developed to address the needs of individuals with physical challenges. The postures done in this 12 step form are taken from the postures done bilaterally in the Bei-jing Simplified Short Form of tai chi. This 12 step form can be done in an area as small as 2' x 4' if space is an issue. The form is simple to learn and the opening and closing postures are the same which makes this form circular and continuous. Students may continue performing the form for a desired length of time without interrupting the form's natural flow.

- G3 Treatment of Mild Brain Injury: Lessons Learned** *Mark Huslage, LCSW-C and Julie O'Reilly, PsyD* **P, C**
 Mild Traumatic Brain Injury (mTBI), also known as "concussion", is the most common form of TBI, representing 80% of those injured. The vast majority of mTBI cases, ranging from 80-85%, resume normal physical, cognitive and communicative functioning in the first month of recovery. But for those individuals whose abilities are affected past this time, many express that their day-to-day lives have been significantly altered. For some, it is to the point of despair.
 Post-concussion Syndrome describes a constellation of symptoms that are associated with an mTBI event, including headaches, sleep disturbance, loss of balance, visual disturbance, decreased memory, decreased attention/concentration, fatigue, depression, and anxiety. Such a description only hints at the root of these problems. This seminar looks to better understand the complex nature of "complicated recovery" from concussion, describe a thorough diagnostic methodology and champion the need for a comprehensive, informed approach to neuro-rehabilitation for mTBI.
- G4 From Crisis to Calm: A New Shade of CODE GREEN** *Janet Nogle, PhD, ABPP-CN and Leah Bellinger, MS, CCC-SLP, CBIS* **P, C**
 Within many American hospital settings, Code Green is a universal code for "Manpower Needed." When a Code Green is called, a situation exists that requires all available staff to respond to a potentially dangerous situation. Usually an individual is in crisis who can no longer manage his or her own behavior. During a response to a Code Green, one expects to find an aggressive and or combative person using physical force. This program will present a unique Code Green process that is tailored to individuals who often have cognitive impairments and require specialized techniques for intervention. This Code Green process is part of a continuum of services offered through a behavioral protocol for individuals with traumatic brain injury. However, the Code Green techniques are applicable to assist with any individual with cognitive difficulties who becomes unmanageable enough to endanger self or others.
- G5 Testing Outside the Box: Neuropsychological Evaluation using Non-Verbal, Non-Motor, and Non-Standard Tools** *Cynthia Salorio, PhD, Megan Kramer, PhD, Sarah McCann, MS, and Maegan Swartwout, MA* **F, E, P, C**
 This presentation will discuss how the neuropsychologist's knowledge of brain/behavior relationships helps guide our choice of assessment tools, and how we approach testing individuals with multiple impairments to get information about the individual's cognitive strengths and weaknesses. It will also focus on more technical aspects, such as review of specific tools and methods, interpretation of results, and how educators and therapists can use the information to maximize efficacy of treatment interventions, education, and vocational planning.

3:00 pm - 3:15 pm BREAK/EXHIBITORS/SILENT AUCTION

3:15 pm - 4:30 pm **CLOSING SESSION Living Through Personal Crisis: Traits of Triumphant Survivors** *Ann Kaiser Stearns, PhD* **A**
 Dr. Ann Kaiser Stearns coined the phrase "triumphant survivors" to describe those who have endured some of life's most harsh and devastating events yet have gone on to live fulfilling lives. Knocked down by the quake and aftershocks of tragedies, accidents and illnesses, disappointments and losses of many kinds, they keep standing up again and again. When broken by the world, triumphant survivors are the people who "grow strong at the broken places," as Hemmingway described. You can listen with hope and inspiration as Dr. Stearns shares her insights on finding the best life within reach.

4:30 pm - 4:45 pm Closing Remarks - Diane Triplett, Executive Director, BIAM

4:45 pm Winners of Silent Auction, 50/50 Raffle and Exhibitor Drawings Announced