Brain Injury Alliance
NEW JERSEY

2023 Annual Professional Seminar

May 8, 2023
8:30 AM - 4:00 PM
The Berkeley Oceanfront Hotel
Asbury Park, NJ
FREE PARKING

Independent Study
Available May 22, 2023 - June 25, 2023

UNCOVERING THE INVISIBLE: DELVING INTO THE SILENT EPIDEMIC OF BRAIN INJURY

NEW JERSEY'S PREMIER BRAIN INJURY CONFERENCE FOR:
Athletic Trainers - Behavioral Healthcare Specialists - Brain Injury Specialists - Case Managers
Cognitive Rehabilitation Therapists - Life Planner Specialists - Neuropsychologists - Nurses
Occupational Therapists - Physical Therapists - Psychologists - Rehabilitation Counselors
Social Workers - Speech Language Pathologists - Vocational Counselors

EVENT BROCHURE

Funding provided by
DDS NJ DIVISION OF DISABILITY SERVICES

Sponsor of Continuing Education
Hackensack Meridian JFK Johnson Rehabilitation Institute

SEMINAR SNAPSHOT

The 2023 Annual Professional Seminar is funded in part by the New Jersey Division of Disability Services and the New Jersey Department of Children and Families.

The overall objective of the seminar is to provide an educational opportunity to professionals working with individuals affected by brain injury through workshops related to research, clinical innovations and strategies, rehabilitation and advocacy.

8:30 - 9:00	**Welcome/Opening Remarks**
9:00 - 10:15	**Keynote Address - Eve Valera, PhD** Understanding "Concussion+": The Overlooked Epidemic of Brain Injuries Sustained by Women Experiencing Intimate Partner Violence
10:15 - 10:30	**Break/Exhibits/Student Posters**
10:30 - 11:45	**Block A Workshops**
Workshop 1	Recovery from Sports Concussion: Definitions, Decision-Making Criteria and Research (Mayer, Moser, Uhrig)
Workshop 2	Did I Say What You Heard? Delivering Effective Patient Feedback (Murphy)
Workshop 3	From Lab to Rehab: Examining the Connection Between Clinical Research and Clinical Practice of Cognitive Rehabilitation (Alexander, Chiaravalloti)
11:45 - 1:15	**Lunch/Awards Presentation/Advocacy Update/Exhibits/Student Posters**
1:15 - 2:30	**Block B Workshops**
Workshop 4	Brain Injury in Intimate Partner Violence: The Hidden Epidemic (Dorman, Esopenko, Monahan)
Workshop 5	Improving Walking Function: High Intensity Gait Training in Inpatient Rehabilitation (Ariano, Coutts, Morilla, Perret)
Workshop 6	Strategies for Addressing Cognitive Dysfunction After Brain Injury (Leiby, Reed, Sarfaty)
2:30 - 2:45	**Break/Exhibits/Student Posters**
2:45 - 4:00	**Block C Workshops**
Workshop 7	Research Panel - Fluid Dynamics of OnabotulinumtoxinA Injection as Visualized Under Ultrasound Guidance (Harris) - An Observational Study Correlating Attention, Gait Speed and Discharge Disposition within the Brain Injury Population (Ryan) - Difference in Outcomes in Hypoxic-Ischemic Brain Injury Based on Mechanism: Cardiac Arrest versus Non-cardiac Etiology (Hartsgrove)
Workshop 8	Leisure: The Forgotten Occupation (Sabo, Schwartz)
Workshop 9	Yoga as a Skilled Intervention in Acute Rehab Post Brain Injury (Flaherty, Turoff)

CONFLICT OF INTEREST DISCLOSURE

In compliance with the requirements of **ASHA's Continuing Education Board** concerning transparency in course planning, delivery, and marketing, please follow the link below to review information on the financial and non-financial interests of presenters relevant to the content of their presentation.

In accordance with the **American Psychological Association's Standards on Promotion and Advertising of Programs**, sponsors are required to disclose any known commercial support for the CE program or instructors and any other relationships that could be reasonably construed as a conflict of interest.

Follow the link below to review information on the financial and non-financial interest of presenters relevant to the content of their presentation.

Statement of Financial and Non-Financial Disclosure for the **American Occupational Therapy Association** is pending approval for this Professional Development Activity.

VIEW THE FINANCIAL AND NON-FINANCIAL CONFLICT OF INTEREST DISCLOSURE

KEYNOTE ADDRESS

EVE VALERA, PHD

Associate Professor, Harvard Medical School
Research Scientist, Massachusetts General Hospital

Dr. Valera, Associate Professor in Psychiatry at Harvard Medical School and Research Scientist at Massachusetts General Hospital has worked in the domestic violence field for over 25 years. She uses a range of methodologies to understand the neural, cognitive and psychological consequences of brain injuries from intimate-partner violence, with her most recent focus being on transgender women.

As a pioneer in the field of IPV-related brain injury, she regularly lectures internationally and has received national and international recognition for her work being featured in news outlets such as NYT Magazine and Forbes. She was an inaugural recipient of the Women Making History Award from Safe Living Spaces and has also been the recipient of the prestigious Robert D. Voogt Founders Award, Rappaport Research Fellowship in Neurology, PINK Concussions Domestic Violence Award and the Anne Klibanski Visiting Scholars Award. She is passionate about raising awareness and educating all relevant stakeholders about this tremendously overlooked public health problem.

FACULTY

Aubree Alexander, PhD
Post-Doctoral Fellow
Kessler Foundation

Stephanie Ariano, PT, DPT, NCS
Physical Therapist
Kessler Institute for Rehabilitation

Nancy Chiaravalloti, PhD
Director, Center for Neuropsychology
Neuroscience and TBI Research
Kessler Foundation

Kayla Coutts, PT, DPT
Physical Therapist
Kessler Institute for Rehabilitation

Katherine Dorman, MA
Clinical Health Research Coordinator
Mount Sinai Hospital

Carrie Esopenko, PhD
Associate Professor
Icahn School of Medicine at
Mount Sinai

Natalie Flaherty, MOT, OT/L
Occupational Therapist
Kessler Institute for Rehabilitation,
Marlton Campus

Kristen Harris, MD
Brain Injury Medicine Fellow
Hackensack Meridian Health

Cait Hartsgrove, MD
Brain Injury Medicine Fellow
Rutgers University

Arlise Leiby, OT/L
Occupational Therapist
Kessler Institute for Rehabilitation

Bridget Mayer, PsyD
Neuropsychologist
Sports Concussion Center of
New Jersey
RSM Psychology Center, LLC

Graciela Morilla, PT, DPT NCS
Physical Therapist
Kessler Institute for Rehabilitation

Kathleen Monahan, DSW, LCSW
Associate Professor,
Stony Brook University
Private Practice

Hilary Murphy, PhD
Senior Neuropsychologist,
Director of Training
NeurAbilities

Melissa Perret, PT, DPT, NCS
Physical Therapist – Advanced
Clinical Specialist
Kessler Institute for Rehabilitation

Lynn Reed, MA, CCC-SLP, CBIS, MSCS
Speech-Language Pathologist –
Advanced Specialist
Kessler Institute for Rehabilitation

Maria Ryan, PT, DPT, CBIS, CSRS
Physical Therapist
Hackensack Meridian Health/
JFK Medical Center

Jennifer Sabo, OTR/L, CSRS, CBIST
Bancroft NeuroRehab

Deborah Sarfaty, MA, CCC-SLP, CBIS
Sr. Speech-Language Pathologist
Kessler Institute for Rehabilitation

Nicole Schwartz, OTD, OTR/L, CBIS
Bancroft NeuroRehab

Rosemarie Scolaro Moser, PhD, ABN,
ABPP-RP, Director,
Sports Concussion Center of New Jersey
RSM Psychology Center, LLC

David Turoff, MS, OTR/L
Occupational Therapist
Kessler Institute for Rehabilitation

Connor Uhrig, MS, MA
Pre-Doctoral Intern
Sports Concussion Center of
New Jersey
RSM Psychology Center, LLC

Eve Valera, PhD
Associate Professor, Harvard
Medical School
Research Scientist, Massachusetts
General Hospital

Keynote Address: Understanding "Concussion+": The Overlooked Epidemic of Brain Injuries Sustained by Women Experiencing Intimate Partner Violence
Eve Valera, PhD

Intimate-partner violence (IPV) is an under-appreciated public health epidemic, in which women experience a high prevalence and number of brain injuries. Dr. Valera will discuss her work aimed at understanding the prevalence, cognitive, psychological, and neural effects of brain injuries (including both traumatic brain injuries and strangulation related ischemic brain injuries, namely "concussion+") experienced from intimate partner violence.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Discuss the high prevalence of partner violence and partner inflicted brain injury. 2) Summarize cognitive and neural correlates of partner inflicted brain injury. 3) Describe ways in which partner inflicted brain injuries may be misinterpreted in social, law enforcement and judicial settings.

Block A Workshops **10:30 - 11:45**

Workshop 1: Recovery from Sports Concussion: Definitions, Decision-making Criteria and Research
Bridget Mayer, PsyD; Rosemarie Scolaro Moser, PhD, ABN, ABPP-RP; Connor Uhrig, MS, MA

Athletes with concussion are managed by different health care professionals. The International Concussion in Sport Group has considered definitions of recovery. Yet, there is no clear specific guidance on what criteria should be used to determine if an athlete is recovered. This presentation will focus on definitions of recovery and will present new research on the value of different criteria that health care professionals use in making decisions about concussion recovery. The goal is to offer a possible "best practice" based on current clinical practice in the field of sports concussion.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Summarize the current definitions of concussion recovery. 2) Apply the variety of criteria that clinicians use to determine recovery. 3) Understand the importance and value of certain criteria over others in determination of concussion recovery, for adults versus children, based on new research.

Workshop 2: Did I Say What You Heard? Delivering Effective Patient Feedback
Hilary Murphy, PhD

One of the challenges faced by clinicians of many professions is how to deliver effective and practical feedback. This workshop will involve a discussion of how to avoid jargon and engage patients and their families in discussions of medical functioning and treatment. While cases will often involve pediatric clients, strategies can be applied to multiple populations.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Discuss how the use of jargon or imprecise language can interfere with patient care. 2) Apply strategies to clarify findings and effectively communicate expectations to patients and their families. 3) Evaluate language for clarity when providing patient feedback.

Workshop 3: From Lab to Rehab: Examining the Connection Between Clinical Research and Clinical Practice of Cognitive Rehabilitation *Aubree Alexander, PhD; Nancy Chiaravalloti, PhD*

This interactive presentation aims to expand the dialogue between clinical researchers and clinical practitioners in brain injury rehabilitation, with an emphasis on cognitive rehabilitation research and practice. Integration of evidence-based care in rehabilitation settings can be challenging, but recent research strives to examine the process of implementing evidence-based cognitive rehabilitation into clinical care environments. Potential barriers to knowledge implementation will be highlighted and discussed, as will current methods of communication between clinicians and researchers. Recent research and clinical anecdotes will be considered in order to highlight the need for clinical research to echo the flexibility often required in clinical care.
Multi-disciplinary and inter-disciplinary professionals are invited to discuss perspectives on evidence-based practice in brain injury rehabilitation and issues related to implementing evidence-based knowledge into daily clinical practice. Live and interactive polls will be conducted during the presentation to gather and share information. Audience participation is highly encouraged.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Review practitioner access to, and use of, evidence-based guidelines in cognitive rehabilitation. 2) Identify potential barriers to implementation of evidence-based practice guidelines in clinical care settings. 3) Examine current and potential communication systems between researchers and clinicians in cognitive rehabilitation.

Block B Workshops **1:15 - 2:30**

Workshop 4: Brain Injury in Intimate Partner Violence: The Hidden Epidemic
Katherine Dorman, MA; Carrie Esopenko, PhD; Kathleen Monahan, DSW, LCSW

An estimated one in three women worldwide experience physical or sexual trauma as an outcome of intimate partner violence (IPV) in their lifetime (WHO, 2021). Recent scoping reviews have demonstrated that a high proportion of women exposed to IPV report experiencing head, face, or neck trauma (Haag et al., 2022; Campbell et al., 2022), which confers high risk of brain injury (BI). BI can occur in IPV due to being hit, punched, kicked, and violently shaken, as well as non-fatal strangulation (NFS), which can result in focal trauma and/or diffuse axonal injury or hypoxic-ischemic BI (HIBI; Monahan et al., 2020), respectively.

Thus, IPV-related BI represents a significant, yet commonly underrepresented public health concern. In this session, we will describe the prevalence and mechanisms of IPV-BI, their potential outcomes and will conclude with information about global strategies developed to increase education and stakeholder engagement in IPV-related BI research and clinical care.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Understand the mechanisms, prevalence, and outcomes of IPV-related brain injury. 2) Assess the acute and long-term outcomes of non-fatal strangulation specifically in an IPV population. 3) Identify strategies for support and engagement for those working with individuals living with an IPV-related brain injury.

Workshop 5: Improving Walking Function: High Intensity Gait Training in Inpatient Rehabilitation
Stephanie Ariano, PT, DP, NCS; Kayla Coutts, PT, DPT; Graciela Morilla, PT, DPT, NCS; Melissa Perret, PT, DPT, NCS

Improving walking function after an acquired brain injury is one of the most common goals stated by patients and/or caregivers receiving inpatient physical therapy. Walking function as measured using gait speed or timed distance has been shown to be a major predictor of discharge disposition and length of stay during inpatient rehabilitation, falls, quality of life, community mobility and mortality. Providing interventions that maximize walking function is therefore important. The Clinical Practice Guideline (CPG) to Improve Locomotor Function Following Chronic Stroke, Incomplete Spinal Cord Injury and Brain Injury by the Academy of Neurologic Physical Therapy- American Physical Therapy Association strongly recommends that physical therapists provide task-specific walking training at moderate to high cardiovascular intensity (HIT). This presentation will provide an overview of HIT through a review of the evidence and case study presentations illustrating HIT in clinical practice.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Summarize the evidence on HIT and how it was adapted to clinical practice in an inpatient rehabilitation environment. 2) Apply strategies for implementing HIT for a patient session (e.g. calculating heart rate range, setting up heart rate monitor, selecting an activity monitor, use of RPE scale, selecting the appropriate patient, planning a HIT session). 3) Discuss strategies for implementing HIT across a clinical program.

Workshop 6: Strategies for Addressing Cognitive Dysfunction After Brain Injury
Arlise Leiby, MS, OTR/L; Lynn Reed, MA, CCC-SLP, CBIS, MSCS; Deborah Sarfaty, MA, CCC-SLP, CBIS

This course will provide a comprehensive overview of common diagnoses that affect cognitive functioning, the areas of cognition most commonly affected by acquired and traumatic brain injury, and their connection to daily functional activities. We will also discuss and provide examples of compensatory strategies and activities to support and maximize a client's recovery and independence after brain injury.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Identify common cognitive deficits associated with acquired or traumatic brain injury. 2) Recognize compensatory strategies which address each of these main cognitive deficit areas. 3) Differentiate methods for implementing these compensatory strategies.

Block C Workshops **2:45 - 4:00**

Workshop 7: Research Panel (Includes 3 presentations)

Panel Presentation 1: Fluid Dynamics of OnabotulinumtoxinA Injection as Visualized Under Ultrasound Guidance *Kristen Harris, MD*

Prescribing information for onabotulinumtoxinA ("Botox") recommends total dosage per muscle and number of injection sites. Lower dosages are indicated for the smaller muscles of the upper extremity. Multiple prior studies have demonstrated the safety and efficacy of Botox injections for spasticity, with the most common side effect being local muscle weakness. While some degree of toxin spread is expected, spread beyond the muscle fascicle can potentially impair patients' function. Combination techniques for muscle localization are commonly used to optimize accuracy, and ultrasound guidance has been used increasingly for procedures. While prior studies have investigated muscle changes as seen under ultrasound in patients with spasticity, toxin response associations in the upper extremity have not previously been documented, nor have associations between visualized fluid leak and clinical or demographic factors. In this study, we examine associations between effects of toxin injections and observed leak during injections in flexor carpi radialis muscle.

Additional panel presentations continued on the next page.

Panel Presentation 2: An Observational Study Comparing Gait Speed Trends with Discharge Disposition of Patients with an Acquired Brain Injury *Maria Ryan, PT, DPT, CBIS, CSRS*

The goal of this presentation is to discuss and present comparisons of cognitive function, discharge disposition, and 10-Meter Walk Test (10MWT) scores of patients with traumatic brain injury and stroke diagnosis. This presentation will discuss components of an observational study that was on the Brain Trauma Unit at JFK Medical Center. After one year of data collection, 10MWT results and subsequent discharges for each subject were reported and collected with additional objective measures. This presentation will compare walking speeds for community ambulators, normal walking speed and crossing street ambulators, household ambulators and limited community ambulators, and their discharge disposition. A study done in 2009 by Stacy Fitz PT, PhD and Michelle Lusardi PT, PhD supports the use of gait speed as a critical predictor for patient outcomes, including risk of death, re-hospitalization, and falls. However, there is limited evidence, especially in the brain injury population, in regard to cognition, gait speed, and discharge disposition.

Panel Presentation 3: Differences in Outcomes in Hypoxic-Ischemic Brain Injury Based on Mechanism: Cardiac Arrest versus Non-Cardiac Etiology *Cait Hartsgrove, MD*

Very little is known about the outcomes of those with hypoxic-ischemic brain injuries (HIBIs). HIBIs are acquired brain injuries sustained by lack of cerebral blood flow, which can lead to a disorder of consciousness (DOC). It is generally accepted that those with brain injuries secondary to HIBI typically have poorer outcomes than those with traumatic brain injuries with little known about those with disorders of consciousness specifically. While the data regarding HIBIs is limited, the studies available typically focus on HIBI secondary to cardiac arrest as this is the most common etiology of HIBI. Even further limited is the information regarding those with DOC secondary to HIBI with an etiology unrelated to cardiac arrest, such as drowning, drug overdose, or respiratory arrest that result in a DOC.

These etiologies may have unique prognosticators and/or outcomes that remain to be explored. This is a retrospective exploratory study that seeks to investigate the prognoses and outcomes of non-cardiac HIBI versus cardiac HIBI in persons with DOC. Data variables extracted and analyzed includes demographics, length of stay, coma recovery scale, orientation log, development of neurological sequelae, discharge disposition, level of consciousness upon admission, and level of consciousness upon discharge.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1)Understand the associations between effects of toxin injections and observed leak during injections in flexor carpi radialis muscle and how this will affect patient outcomes. 2) Investigate discharge disposition of a patient with an acquired brain injury based on gait speed 3) Examine factors related to etiology that may have an impact on prognosis and outcome in patients with hypoxic ischemic brain injury.

Workshop 8: Leisure: The Forgotten Occupation
Jennifer Sabo, OTR/L, CSRS, CBIST and Nicole Schwartz, OTD, OTR/L, CBIS

In occupational therapy, occupations refer to the everyday activities people do as individuals, in families and with communities to occupy time and bring meaning and purpose to life. Research shows that using purposeful activities (occupations) in interventions is an intrinsic motivator for patients. Such activities can increase attention, endurance, motor performance, pain tolerance, and engagement for better outcomes. Leisure is one of the 8 areas of Occupation but is often forgotten or underutilized in treatment. This course will explore the leisure occupation, the benefits and barriers to participation in leisure activity for those with brain injury using data from multiple case studies.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Identify the benefits of leisure activities, and how they contribute to quality of life and well-being. 2) Demonstrate knowledge of different types of assessments that measure leisure engagement and quality of life. 3) apply evidence-based research regarding the benefits of utilizing leisure in practice.

Workshop 9: Yoga as a Skilled Intervention in Acute Rehab Post Brain Injury
Natalie Flaherty, MOT, OT/L; David Turoff, MS, OTR/L

Yoga is an intervention occupational therapists can use to address a wide range of client needs such as strength, mobility, attention, upper extremity functioning, and mental health concerns that may keep them from engaging in meaningful occupations. A review of current literature revealed that yoga is useful in decreasing pain, decreasing stress and anxiety, decreasing sleep disturbance, decreasing fatigue, and reducing risk of falls, which leads to improved occupational performance and participation among people with various neurological conditions. It also shows improved quality of life, resilience, positive affect, and cognition specifically among people with TBI. The vast majority of available literature focus on individuals with chronic conditions and are predominantly community based. The purpose of this presentation is to illustrate the development and implementation of a therapeutic yoga group as a skilled therapy service in an acute inpatient setting for individuals affected by brain injury.

OBJECTIVES: At the conclusion of this workshop, participants will be able to 1) Identify the benefits yoga can provide to brain injury survivors, including improved strength, improved flexibility, improved proprioception, reduced feelings of stress, improved mental clarity, and improved sleep and pain management. 2) Examine strategies to incorporate yoga into clinical practice. 3) Assess a brain friendly seated yoga model.

POSTER PRESENTATIONS

Post Concussion Syndrome Patients Long-Term Rehabilitation Effects
Author: Amanda Abdelaal; Advisor: Chris Meny, MS, AT/L, ACBIS/T, Montclair State University

Physical Therapy Management of Pediatric anti-NMDA-receptor Encephalitis: A Case Report
Authors: Jeremy Bate and Alexandra Schiappa; Advisor: Jenna Tucker, PT, DPT, NCS, CBIS, Kean University

Global Volumetric Reductions Across Amygdala Nuclei in Chronic TBI
Authors: Denise Babbit, Ekaterina Dobryakova, Andriy Fomin, Sophia Lall, Michelle Mui, Joshua Sandry; Advisor: Joshua Sandry, PhD, Montclair State University

Does a Cervical Spine Strengthening Program Within Physical Therapy Intervention Reduce Incidence of Sport Related Concussion? A Literature Review
Authors: Angelee Delfin, SPT, Ashlin Martir, SPT, Elizabeth Pubchara; Advisor: Jenna Tucker, PT, DPT, NCS, CBIS, Kean University School of Physical Therapy

Complex Case of Traumatic Brain Injury and Huntington's Disease
Author: Shirley Shen, MD; Advisor: Brian Greenwald, MD, Johnson Rehabilitation Institute, Robert Wood Johnson

Benedikt Syndrome Post Cardiac Catheterization: A Case Report
Authors: Riddhi R. Machchhar, Pooja A. Patel, Rushi B. Lavani, Jessica S. Yang; Advisor: Casey Schoenlank, MD, Rowan University School of Osteopathic Medicine

Exploring Factors Contributing to Exercise Intolerance Severity After Concussion
Authors: Meaghan Dowdell and Giana Giorello; Advisor: Jenna Tucker, PT, DPT, NCS, CBIS, Kean University

Changes to Neural Circuit Dynamics in Neurons with Stretch Injury as a Model of TBI
Author: Dylan Sullivan; Advisor: Bonnie Firestein, PhD, Rutgers University

Exploring the Effects of Strain Rate on Stretched Injured Rat Neurons
Author: Kelly DiCristina, PhD Candidate; Advisor: Bryan Pfister, PhD, New Jersey Institute of Technology

Does High-Intensity Interval Training or High-Intensity Training Improve Function and Quality of Life in Patients Post-Stroke? A Systematic Literature Review
Author: Isabela DeSa, SPT; Advisor: Richard Hubler, PT, DPT, OCS, FAAOMPT and Angela Lis, PT, PhD, Seton Hall University

Neuronal Cell Death and Behavioral Deficits Following Exposure to Repeated Low Level Blast Traumatic Brain Injury
Author: Tulika Das, MS; Advisor: Bryan Pfister, PhD, New Jersey Institute of Technology

EDUCATION COMMITTEE

The Education Committee of the Brain Injury Alliance of New Jersey oversees the planning and execution of seminars, workshops, and other initiatives to assist professionals in staying abreast of the latest innovations and research in brain injury.

Steven Benvenisti, Esq., Co-Chairperson
Brain Injury Alliance of New Jersey
President, Board of Trustees

Mary Sharlow-Galella, LCSW – Co-Chairperson
Hackensack Meridian Health JFK Johnson
Rehabilitation Center for Brain Injuries

Christine Wade, BSN, RN, CRRN - Nurse Planner
Hackensack Meridian Health JFK Johnshon
Rehabilitation Institute

Mackenzie Breitowich MS, OTR/L, CSRS, CBIS, ATP
Johnson Rehabilitation Institute at Ocean University
Medical Center

Laura Brenner, BSN, RN, CRRN
JFK Johnson Rehabilitation Institute

Barbara Chabner, PsyD, MSW
Brain Injury Alliance of New Jersey

SuAnn Chen, MD, FAAPMR
Hackensack Meridian Health
JFK Johnson Rehabilitation Institute at Ocean Medical Center
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Rachel Harrington
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Brain Injury Alliance of New Jersey

Kirk Lercher, MD
Kessler Institute for Rehabilitation

Lois Mishkin, MA, CCC/LDTC, ADHA-RSP
Lois Mishkin LLC

Matthew Moore, DO
Hackensack Meridian Health Network
JFK Johnson Rehabilitation Institute

Jacqueline Moskowitz
NJ Deptartment of Human Services,
Division of Disability Services

Bradford Ross, PhD
Children's Specialized Hospital

Elisa Rozo, BA
NJ Traumatic Brain Injury Fund,
Division of Disability Services

Dianne Simmons Grab, MA, CCM, CDMS, CLCP
Simmons Grab & Associates

Devon Tapp, MS, CHES
Stockton University

Jenna Tucker, PT, DPT, NCS, CBIS
Kean University, Nathan Weiss Graduate College

CORPORATE CIRCLE

Corporate Circle offers the unique opportunity for businesses to partner with the Brain Injury Alliance of New Jersey in supporting individuals affected by brain injury.

16000 social media followers

5000 enews subscribers

144047 lives touched

2000 event attendees

PLATINUM

Davis Saperstein & Salomon PC

DIAMOND

Hackensack Meridian JFK Johnson Rehabilitation Institute

Rehabilitation Specialists

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Kessler Institute for Rehabilitation – Select Medical

Bancroft NeuroRehab – Rebound • Recover • Reconnect

MetLife

UIRehab

SILVER

Atlantic Physical Therapy Center – ATLANTICPTCENTER.COM

horizons Neurological – At Allaire Rehab

NeuroRestorative – Rebuilding Lives After Brain Injury

Weisman Children's

ReMeD – In Partnership With Learning Services

BRONZE

Neurabilities

St. Joseph's University Medical Center

JAG-ONE Physical Therapy

REGISTRATION INFORMATION

Please note that CEU/CE fees are not included with registration. A $15.00 processing fee is due at registration. You may register for as many CEUs as you wish for the single $15.00 processing fee.

Type of Registration	Dates of Registration	BIANJ Member Fee	Non-member Fee
Premier	Now - March 1, 2023	$220	$240
Early Bird	March 2, 2023 - April 15, 2023	$230	$250
Regular	April 16, 2023 - May 7, 2023	$250	$270
Day of/On site	May 8, 2023	$270	$290
Student	Now - May 8, 2023	$60	$60
Independent Study	Now - June 15, 2023	$50	$50
CEUs/CEs		$15	$15

Accreditation Information

This section will be completed as applications have been approved. Check back frequently for updates.

Hackensack Meridian Health, JFK Johnson Rehabilitation Institute is approved by the American Psychological Association to sponsor continuing education for psychologists. Hackensack Meridian Health, JFK Johnson Rehabilitation Institute maintains responsibility for this program.

Intermediate level, 0.5 ASHA CEUs.
ASHA CE Provider approval and use of the brand block does not imply endorsement of course content, specific products, or clinical procedures.

Application for CEU's has been made to the New Jersey State Board of Physical Therapy Examiners.

EARNING EDUCATION CREDITS

BIANJ has submitted applications with several disciplines to offer attendees the opportunity to earn educational credits. The requirements to earn educational credits vary with each discipline. Please review the following list carefully to determine your discipline's requirements. For questions about continuing education credits, contact the Director of Education and Outreach, Barbara Chabner, at bchabner@bianj.org.

Discipline	Requirements to earn CEU/CE credits	Application Status/CEUs/ CEs
AOTA Live Event	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
AOTA Independent Study	Submit completed evaluations for keynote address, each workshop, and the overall evaluation. Score >80% on required posttest.	

APA Live Event	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation. Send completed Attendance Verification form to Kathleen.Decamp@hmhn.org. Form is available at registration.	
APA Independent Study		
ASHA	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation. Send completed ASHA CEU Participant Form and Attendance Verification forms to Kathleen.Decamp@hmhn.org. These two forms are available at registration.	
BOC (Athletic Trainers)	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
CBIS	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
CCMC	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
CDMS Live Event	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
CMDS Independent Study	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation. Score >80% on required posttest.	
CLCP	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
CRCC	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
NASW-NJ Live Event	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation.	
NASW-NJ Independent Study	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation. Score >80% on required posttest.	
NJNSA	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation. At the conclusion of this seminar, nurses should be able to identify at least three clinical innovations or strategies from the following topics: ethical and legal norms related to care and treatment of patients with brain injury; current treatment modalities and their impact on patients with brain injury; and areas of ongoing research in the treatment of brain injury.	
PTE	Complete all sign in sheets. Submit completed evaluations for keynote address, each workshop attended and the overall evaluation. Send completed Attendance Verification form to Kathleen.Decamp@hmhn.org. Form is available at registration.	

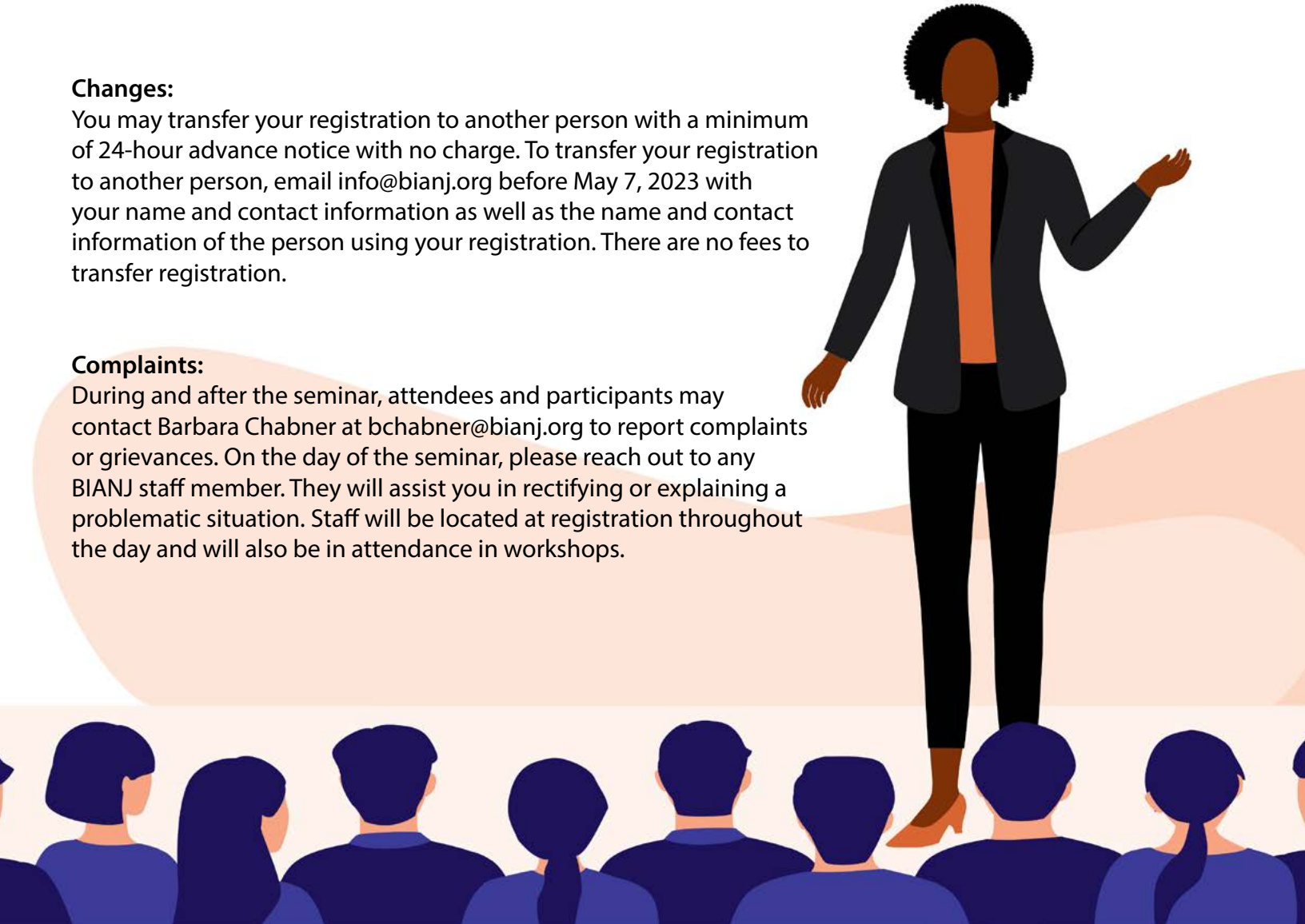
TRAVEL & MORE INFORMATION

Accommodations:
The Brain Injury Alliance of New Jersey (the Alliance) encourages all individuals with disabilities to attend and participate in our events. If you anticipate needing any type of accommodation or have questions about the physical access for this event, please contact us at info@bianj.org, or by phone at 732-745-0200 prior to this program. If leaving a message, provide your name and contact information and appropriate staff will contact you to facilitate your request. Every effort will be made to provide reasonable accommodations in an effective and timely manner.

Cancellations:
Participant cancellations will be accepted via email no later than May 2, 2023. There is a $25.00 cancellation fee. If the Seminar is cancelled in part or entirely, a partial or full refund will be provided. Cancellation information will be posted at bianj.org.

Changes:
You may transfer your registration to another person with a minimum of 24-hour advance notice with no charge. To transfer your registration to another person, email info@bianj.org before May 7, 2023 with your name and contact information as well as the name and contact information of the person using your registration. There are no fees to transfer registration.

Complaints:
During and after the seminar, attendees and participants may contact Barbara Chabner at bchabner@bianj.org to report complaints or grievances. On the day of the seminar, please reach out to any BIANJ staff member. They will assist you in rectifying or explaining a problematic situation. Staff will be located at registration throughout the day and will also be in attendance in workshops.



ROOM RESERVATION INFORMATION

BIANJ has made arrangements with the Berkley Oceanfront Hotel to reserve rooms for Seminar attendees.

- Click here to begin making a reservation.
- "Select" the 2023 BIANJ Annual Seminar
- "Select and Go to Next Step" to confirm dates of stay.
- Make a room selection.
- If not already entered, type in this code at check out: 0523BRAINI

Please see the Hotel's Cancellation Policy below:

CANCELLATION POLICY:
The Berkeley Ocean Front hotel has a 7-day cancellation policy. The hotel must be notified of any cancellations by 4:00 PM EST 7-day prior to arrival. Failure to show up for your reservation without notifying the hotel will result in a no-show fee equal to the entire stay. Exceptions may apply- please see rate rules.

RESIDENCE FEE:
($25.00 + TAX PER ROOM/PER NIGHT)

Our Goal is to Give You the Most Valuable Experience During Your Stay. To Simplify Your Supplementary Charges, The Berkeley Oceanfront Hotel Residence Fee Has You Covered!

- Unlimited Premium High-Speed Internet Access for All Devices
- 2 Pool Towels per day (available at pool)
- Complimentary Daily Coffee & Tea
- 2 Complimentary Bottle of Water Daily
- Complimentary Local Phone Calls
- Unlimited Use of Hotel Fitness Center

REGISTER AT BIANJ.ORG/SEMINAR AND SELECT YOUR WORKSHOPS

Brain Injury Alliance NEW JERSEY

825 Georges Road, 2nd Floor
North Brunswick, NJ 08902
Phone: 732-745-0200
Helpline: 1-800-669-4323
Email: INFO@BIANJ.ORG

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