

Consumer-based organization for people surviving brain injury, brain tumor and stroke and for caregivers.



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THE BRAIN INJURY ASSOCIATION OF NEW HAMPSHIRE

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Issue #43, Winter 2009

HEADWAY Newsletter

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UPCOMING EVENTS...

7th Annual Vertical Challenge

Saturday, January 23, 2010
Bretton Woods Resort
Bretton Woods, NH

27th Annual Brain Injury & Stroke Conference

Wednesday, May 19, 2010

Boston-New England Air Show

August 28-29, 2010
Pease International Airport
Portsmouth, NH

BIANH ONLINE

MAIL@BIANH.ORG

HTTP://WWW.BIANH.ORG

Brain injury is the leading cause of death, disability and hospitalizations for children, teens, and young adults in New Hampshire.

Get Out of My Way 'Cuz Here I Come

A survivor story by Michael Yopp, Pelham, New Hampshire

Written by Renee Fistere, BIANH

As a young boy, Michael Yopp loved the winter season and being involved in a variety of winter sports. He had a passion for snowmobiles and became an avid rider, traveling as many as four to five thousand miles each season. Michael had always been a man of stamina and perseverance. In 1979 he served in the US Navy being involved in sea and air rescue and deep sea diving. As a naval serviceman, he assisted in the two-year duration of bringing the *USS Albacore* from Philadelphia (in reserve at the Inactive Ship Facility) to her place of rest as a museum in Portsmouth, New Hampshire.

On Thursday, March 9, 2006, Michael kissed his wife, Donna, goodbye and headed to northern Maine and New Brunswick, Canada, with hopes of meeting some friends to snowmobile on the Gaspé Loop. The next day, Michael drove his van and snowmobile into Canada, crossing the border at Holten, Maine. He parked his van and purchased a pass at a local snowmobile club in Presq Isle, Canada. Around 9:00 on Saturday morning, March 11, he headed for Grand Falls and the Gaspé Bay Peninsula. Temperatures were on the rise coaxing the warmth of spring into the area, the snow had started to soften with the early signs of melting. Michael was riding the trail alone. He was always conscientious of his speed, being careful to travel any new areas with more alertness and caution. But a sharp corner appeared just ahead and the soft snow grabbed at the ski of the snowmobile. Michael lost control and was plunged into the woods head first into a tree. He sustained a brain injury, multiple cuts and bruises on his face, and a fractured hand.

Greg and Kelly were also riding the same trail as Michael on that warm morning in March. Greg came around the same sharp bend and noticed unusual tracks leading off the trail. Husband and wife stopped their snowmobile and followed the markings to see what had caused them. They found Michael lying in the snow beside his snowmobile, eyes open, but he was unable to speak. Kelly stayed with Michael as Greg hurried off to find help and a rescue team. "It was calculated that by the time I had purchased my Canadian snowmobile pass and the distance I had traveled, that I had



Michael & Donna Yopp

been in the woods approximately two to three hours before I was found," said Michael.

By the time Michael reached this hospital, he had become unconscious. He was then airlifted to Moncton, Canada, where he spent sixteen days in ICU with a 50/50 chance of surviving. Michael's wife, Donna, who was still in New Hampshire had been notified. Immediately Donna, the children, and Donna's sister flew out on a private plane that evening.

Five days later Michael regained consciousness but was still intubated, unable to speak, and did not recognize Donna or the children. Greg and Kelly lived a few miles from the hospital in Moncton, Canada. They came



Michael Yopp at Mt. Sunapee

to visit Michael and Donna in the hospital several times. They encouraged and supported Donna through this ordeal and took her out for meals and gave her a place to spend the night in their home. Donna was very grateful for these two who found Michael and saved his life. After Michael had recovered from the accident, he and Donna returned to Moncton, Canada, and visited with Greg and Kelly and thanked them for all that they had done.

Sixteen days after the accident, Michael and Donna were flown to Hanscom Field in Massachusetts where an ambulance was waiting and transported Michael to Mass General in Boston. Michael spent another week in ICU and three more weeks in the hospital. After this time, Michael was transferred to Spaulding Rehabilitation Center where he began doing physical, speech, and occupational therapy. It wasn't until this time that Michael began remembering things. He still had no recollection of the accident.

Donna commented, "My struggles were to get Michael the best medical care, including all his therapies and all the tools he needed to recover to get back. Knowing Michael as well as I do, I knew he would fight hard to regain himself and would not be happy any other way. Watching Michael struggle pulls at my heart strings, and watching him succeed each step of the way makes me proud of him. The doctors did not give me much hope for a good recovery, but it only made me fight harder to help him. I know there are differences in Michael, but I don't see them."

After three long enduring months in hospitals, Michael was sent home. He could hardly walk, had very little memory, and was learning all over again, just like a young child. "I wasn't able to stay at home alone or drive. Family, friends, and other people that my wife hired came into our home to take care of me or drive me to my therapy appointments," Michael stated. However, with determination and hard work, Michael was able to start being left alone at home, with the aid of medical alertness in case of

Continued on page 4

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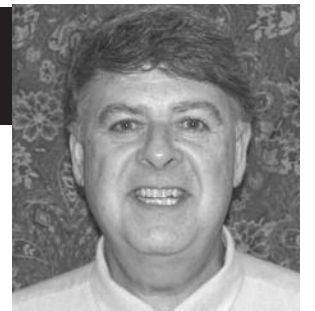
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- Editor** Renee Fistere
- Design/Layout** Cantin Design Inc.
- Printer** Upper Valley Press

PRESIDENT'S MESSAGE

Academy for the Certification of Brain Injury Specialists (ACBIS) Constantly Evolving, Adapting and Raising the Bar

By Brant "Bud" Elkind, President, MS, CBIS-T



Created in 1996 with its own Board of Governors and administered under the auspices of the Brain Injury Association of America, the American Academy for the Certification of Brain Injury Specialists (AACBIS) began offering a standard of training for providers. Initially, it offered two training programs: Certified Brain Injury Specialist (CBIS) and Certified Brain Injury Specialist Instructor. As time moved on, privately designed regional training programs gave way to CBIS, a National Standard, which was recognized in the United States and Canada. The "Instructor" certification gave way to "Clinical Examiner" and now "Trainer." Most recently, "American" was dropped in its name – it is now the Academy for the Certification of Brain Injury Specialists (ACBIS) because the program has gone international. Ireland is now partnering to train brain injury specialists, and soon England will join in the same. It is a slow and methodical process, one with tremendous potential, requiring major changes to The Essential Brain Injury Guide.

There are currently 3,944 CBIS's, 234 CBIS-T's in the States, and Ireland is currently trialing newly written material

which meets their social, cultural and legal systems. A potential of 300 – 500 additional CBIS's could come from this effort.

Certification for specialty groups is on the rise. Specialized attorney certification is in discussion with the American Bar Association. The ABA has clear guidelines for this and the next meeting will be in February 2010. ACBIS is collecting data to determine if a specialty certification for Case Managers is viable. A provisional certification for graduate students was scheduled for September 2009, however technical difficulties pushed it back to the Spring of 2010. A Caregiver Curriculum survey indicated interest but return on investment would be too slow. It has been placed on a backburner so focus can be on more viable training opportunities.

The Essential Brain Injury Guide recently received minor updates and an additional 4000 copies were printed. The ACBIS manual workgroup recently met to look at the next edition and related updates. This next edition will likely be a "3-ring binder" design so updates and specialty materials can be added as necessary.

An On-line CBIS Testing Design and Practice is nearly complete. This is the next step following a successful on-line application and renewal implantation.

Last but certainly not least, ACBIS is considering a proposed "ACBIS Alliance Award" for facilities meeting ACBIS compliance standards, i.e. standard fee, required percentage of employees to be CBIS certified, have a CBIS-T on staff, will be based on one, two and three years compliance standards and experience. A vetting process will likely be developed, which will add other requirements. This award will identify facilities, who are strongly committed to ACBIS standards and training. It will allow facilities to formally display the ACBIS logo, will include a plaque for public display and will tell people: this facility firmly supports and recognizes higher standards in the service of taking care of people with brain injuries.

As a member of the ACBIS Board of Governors, I would be pleased to entertain questions and will provide updates in future issues of Headways. I can be reached weekdays at Robin Hill Farm, Inc. 603-464-3841.

EXECUTIVE DIRECTOR'S MESSAGE

THE BLUE ANGELS ACCEPT OUR INVITATION FOR AUGUST 2010!

By Steven D. Wade, Executive Director of BIANH



We are very pleased to announce that the world famous USN Aerial Demonstration Team, the *Blue Angels*, have accepted our invitation to perform in New Hampshire at our Air Show event to be held at the Pease International Tradeport in Portsmouth in August 2010.

This will be a major charity event, hosted and produced by the Brain Injury Association of New Hampshire, in partnership with the Daniel Webster Council Boy Scouts

of America, for the benefit of the youth in our community and the region. As a charity event, a core goal is to raise awareness about the "silent epidemic" of brain injury and to help raise funds to support the charitable work we undertake each year.

As many of you may know, this is the culmination of years of work on the part of all those involved since our first air show event at Pease in the summer of 2000.

Air shows are exciting, family oriented, and inspirational! Since no governmental funding (military or civilian) was available to produce this event, we are doing so by seeking sponsorships and ticket sales. Even if you cannot attend the air show, please consider

purchasing a ticket to help benefit the Brain Injury Association of New Hampshire.

Tickets go on sale the end of January 2010 and a link to the show's website can be found on the BIANH website. The show is planned for August 28-29, 2010. A preshow event for brain injured and developmentally disabled children, adults, and families is planned for Friday, August 27, 2010. Please let us know if you would like to attend the Friday pre-show to meet the *Blue Angels* and to see them perform. Also, please let us know if you would like to help out – many volunteers are needed!

Thank you, and be sure to mark your calendar for next summer's exciting event!

Submission & Editorial Policy: *HEADWAY* is published by the Brain Injury Association of New Hampshire. The Editor invites and encourages contributions in the form of articles, special reports and artwork. BIA of NH reserves the right to edit or refuse articles submitted for consideration. The Association does not endorse, support, or recommend any specific method, facility, treatment or program mentioned in this newsletter. Please submit items to: Editor, Brain Injury Association of NH, 109 North State St., Suite #2, Concord, NH 03301. For advertising rates please call 603-225-8400.

Our Largest Walk-a-thon Thus Far!

Another commemorative year has passed for the Brain Injury Association of New Hampshire as a host of over 800 individuals drew together to participate in the annual Walk-By-The-Sea against brain injury along the beautiful walkways and sands of Hampton Beach State Park. This has been the 23rd year since the Walk has started and it proved to be our largest crowd ever! Despite overcast skies and threatening drizzle, several family members, brain injury survivors, board members, and even canine companions enjoyed the 3.1 mile walk to show their support to the Association for its many years of dedicated service to assisting the families of New Hampshire who are living with brain injury.

As a kick-off to the walk, president of the Association, Bud Elkind, welcomed the participants and thanked everyone for giving of their support. Then the *Red Star Twirlers* gave another high-stepping, baton-twirling performance, followed by a Scottish tune played on the bagpipes by David Armstrong, Administrator of Lakeview NeuroRehabilitation Center. Once the 800 walkers returned, a picnic lunch was waiting for them at the park pavilion. As guests were being served, they were entertained by musicians Billy Glynn and Tom Sadowski.



Red Star Twirlers, coached by Gina Hutchinson, NH State Representative

Thank you to all the team captains and members who worked so hard on raising pledge dollars. This year we had 36 teams registered. The top winners for Most Pledge Dollars Raised were Bob Holmes, in the individual non-team category, and Northeast Rehab Walkers, for the team category. Northeast Rehab Walkers also had the largest number of walkers this year with 74 members participating, and the Sassy Serotonins walked off with the most original name.

We would also like to thank all of the individuals, organizations, and businesses that contributed to this year's walk. We could not have done it

without you! A special thank you to Seacoast Coca Cola, Lakeview NeuroRehabilitation Center, Robin Hill Farm, Residential Resources, North Country Independent Living, Eldon Munson Jr., Eldon Munson III, the Red Star Twirlers, Shaw's Supermarket, Dunkin Donuts, Contemporary Catering, 1st Impressions Imprinted Sportswear, State of New Hampshire Division of Parks & Recreation, Billy Glynn, Tom Sadowski, John & Marti Capuco, Jennifer Andrews-Peters and Catherine Costanzo.

And the Winners are.....

Top 4 Individual Fundraisers

Bob Holmes	\$2768
Dianne & Gil Burelle	\$1022
Jennifer Field	\$ 420
Nancy Vieira	\$ 420

Top Team Fundraisers (who raised over \$1000)

Northeast Rehab Walkers	\$2321
SteppingStones Striders	\$2104
Team Cunningham	\$1970
Crotched Mountain	\$1909
Sara's Strutters	\$1861
Barb's Believers	\$1627
Braintesters	\$1351
2nd Chance	\$1325
We Believe in Miracles	\$1310
New Hampshireites	\$1110
AD Team	\$1000



Northeast Rehab Walkers



Team It's Just In Your Head



AD Team (in memory of Alex Danielson)



Over 800 participants in the Walk

A Special Note of Recognition and Thanks goes to...

Gil & Dianne Burelle, who have been involved with BIANH for over 20 years, and for just as many years have been involved in the annual Walk-by-the-Sea fundraiser. This year's Walk was a special one for them as it was their last due to Dianne's declining health. They have worked tirelessly each year sending letters to family and friends asking for their support, volunteering at the event, and taking part in the Walk. Their diligence has resulted in raising more than \$40,000.

We wish to thank them for their support and friendship over the years and wish them well. They share their last Walk-By-The-Sea letter with us:

Dear Friends and Family — It is that time of year again for the BIANH Walk-By-The-Sea. This year it will be held on Sunday, October 4. This one will be a very significant one for us. It will be our last. Dianne's health is deteriorating so quickly we cannot handle the work involved any more.

It is our biggest hope that we leave the association with a big HURRAH! Every year we have placed second in funds raised, but this year, with your help we would like to be first.

Over the years the BIANH has been very good to us, and the walk is the only way we can say thank you. Also we feel very committed to its mission to help those with traumatic brain injury (TBI) and to prevent TBI through education and legislation. The BIANH case managers, the legislative representative, Ellen Edgerly; the director, Steve Wade; the board of directors (Gil was a member for many years), the people who work in the office, and all the volunteers are tireless in their efforts to help anyone who needs it, and we are so proud to be members of this organization.

As we have said in the past, all the funds collected from the walk remain right here in New Hampshire. Nothings goes to any national agency. Please help us say goodbye..... We thank you for all your past support and for your kindness this year. If in the future you would like to continue your support of the BIANH and its mission, you may send a check in September 2010 to the office of BIANH.

Thank you all for your help over these years, for without you, we would have never succeeded in helping make the BIANH Walk-By-The-Sea the success it has been. Your contributions have helped us give back to an organization that has given so much to us and one that we truly believe in. Thank you again for your contributions this year in hopes that Gil will be the walker who has raised the most in donations.

*With Love and Friendship—
Gil & Dianne Burelle*

LAKEVIEW SCHOOL OPEN HOUSE

*Contributed by Paula Dempsey, M.O.Ed.,
Clinical Liaison*

Lakeview NeuroRehabilitation Center located in the White Mountain Region of New Hampshire, held an open house for its School on a glorious fall afternoon, Friday, September 25. This was Lakeview's first open house for the school. It was an incredible day for all in attendance!

Lakeview School is a private special education school, licensed by the State of New Hampshire, Department of Education, to serve students with special needs in grades 1 – 12. The school is a year-round day and residential school that provides services for children who experience significant behavioral and emotional difficulties as a result of neurological condition. Common diagnoses include autism, pervasive developmental delays and neurobehavioral impairments.

Lakeview was proud to greet prominent guests such as Dr. Robert Andrews with Southeastern Regional Education Service Center (SERESC), and Jon Eriquezzo, Executive Director of Residential Resources for Crotched Mountain Rehabilitation Center, and also Director of New Hampshire Partners in Service. Other attendees

were Andrea Fournier from the Governor Wentworth School District, and Donna Keefe and Mike O'Hara from Easter Seals.

With the young men dressed in suits and young ladies in dresses, the students were prepared to share their excitement about their new classroom space, curriculum, and give guided tours. Other students were operating a nearby cider press serving warm cider, delicious warm apple pies and crisp!

As part of Lakeview School's long-term improvement plan, the completion of the construction of classroom and treatment space, as well as a state-of-the-art wellness center, was scheduled to be open for school sessions at the start of the 2009-2010 year. Lakeview's Wellness Center exemplifies the School's continued commitment to providing a quality education which encompasses a holistic approach to health in which mind, body, and spirit are integrated as a way of life to promote student wellness.

The Lakeview School integrates the Individualized Education Plan into a highly structured program. Academic subjects are addressed by all students independent of their intellectual level. Occupational Therapy, Speech Language Therapy and Physical Therapy are available within the school building and can be integrated into the school day.

The classrooms were shining with new floors, walls, signage, and harvest snacks. The school buildings were arrayed with mums, pumpkins, and photography projects completed by the students.

Following the campus tours, Dr. Kim Whitesell, a board certified pediatric and adult psychiatrist at Lakeview, made a thought provoking presentation on autism and led a lively discussion between guests and participating Lakeview staff.



Cathy Bergeron, Director of Education, with one of her students

Cathy Bergeron, Director of Lakeview School, could not have been more proud of the entire team at Lakeview. "Our staff and students are a shining example of the importance of a strong therapeutic relationship as the core to an individual's progress." Ms. Bergeron joined Lakeview's professional staff as the Director of Education in July 2009.

Get Out of My Way 'Cuz Here I Come

Continued from page 1

emergencies. Michael's memory and physical condition continued to improve. His thought process is slow, his short-term memory is not always functioning, and therefore he struggles with expressing himself. The bones on the right side of his body from his head to his toes feel numb.

As for overcoming many of the hurdles in recovery, Michael continued, "My most challenging accomplishment was learning to walk again, it was painful, but I forced myself. I have a lot of numbness, but I learn to work around it. Learning to drive was a challenge. I had to go through vigorous occupational therapy and testing by a handicapped driving school. I loved to bike ride and Donna rented me a recumbent bike from the University of NH in Durham. That started me biking again. The summer of 2007 I began riding a regular bike, I was wobbly in the beginning, but as time went by it became easier." Michael now rides his bike approximately eighty miles a week.

"I was in sales before my accident and friends called me 'the convincer', but since my accident I find it hard to express myself. I feel like I am tripping over my tongue. In the beginning I was uncomfortable about meeting with old friends and customers, because I had a hard time putting my words together correctly. I pushed myself to do this and I have made big improvements. I have to set up in my head what I am going to talk about before I get there and I have to think about what I am going to say before I say it. It may not always flow perfectly, but practice makes improvements."

Donna understood that Michael needed to do something to help him get back to where he used to be. She took Michael to New England Handicapped Ski Association (NEHSA) to encourage him to get back into snow skiing – another sport Michael loves. Donna enjoys watching him

ski as if she is watching a professional dancer – smooth, lots of rhythm and flawless – others would stop and watch Michael glide down the slopes. NEHSA was so impressed with his efforts that on his third time skiing at Mt. Sunapee, the instructors asked him to volunteer to help others who were physically challenged.

In August of 2009 he completed a Granite Man Triathlon. The Triathlon, held in Wolfeboro, NH, is a ¾ mile swim from Carry Beach (Lake Winnepesaukee), a 15-mile hilly bike course, and a 3.7 mile run with an uphill beginning.

"I know there are differences now, but I will never stop trying to improve myself. I want to keep moving forward. It will be one step at a time," says Michael. "My wife was my inspiration to move forward."

"We are each other's cheering squad," Donna mentioned. "We have been through a lot together. Our inner faith keeps us going."

In asking Michael any closing words to give to his readers, family members, and survivors, Michael says, "GO FOR IT!"



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LAKEVIEW NEUROREHABILITATION CENTER

244 Highwatch Road
Effingham, NH 03882
800.473.4221
FAX 603.539.8815

Email: admitnh@lakeviewssystem.com



Michael Yopp finishing the Granite Man Triathlon in Wolfeboro, NH

Mark your calendar!
7th Annual Vertical Challenge

At
Bretton Woods Ski Resort
Bretton Woods, NH
Saturday, January 23, 2010



For more information, please contact BIANH at 603-225-8400 or visit the website at verticalchallengebianh.org




Team ZOE VEASEY #1—winning most vertical in January 2009

Come join us for a day of fun on the slopes. The 7th Annual Vertical Challenge is about to take place. This challenge will help to promote brain injury awareness and provide support to our individuals and veterans who are living with a brain injury or stroke.



Pre-Registration Form

REGISTRATION FEE - \$50.00

REGISTRATION DEADLINE (to receive Team t-shirt) – January 8, 2010

Team name: _____

Team captain (and shirt size) _____

Address: _____

Phone Number: _____

Remaining 3 team members (if known)

T-shirt Size
 (if no size given, a large will be issued)

_____	_____
_____	_____

Teams are required to raise at least \$400 in donations to participate in the event. Upon receiving your registration, pledge sheets will be sent to you to record your pledges. All money should be turned in the day of the event.

To receive a team t-shirt, registration must be received by Friday, January 8, 2010.
 Registrations will be accepted the day of the Challenge

Please mail this form, along with the \$50 registration fee:

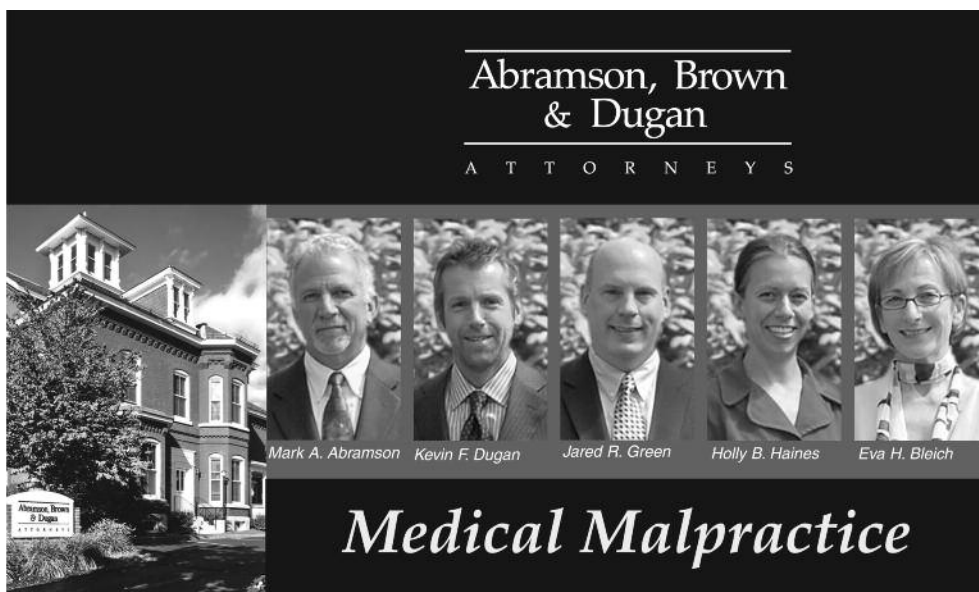
Brain Injury Association of New Hampshire
 Attn: Vertical Challenge
 109 North State Street, Suite 2
 Concord, NH 03301
 (603) 225-8400

Please make checks payable to BIANH

Thank you for registering for the 7th Annual Vertical Challenge for the Brain Injury Awareness. Don't forget to go out and get those donations! The cost per team is \$400, which can be raised through pledges. The \$50 registration fee can also be applied to your team's total. Have fun! We look forward to seeing you in January. Registration begins at 7AM on Saturday, January 23, 2010, in the Main Base Lodge at Bretton Woods Ski Resort. Pledge sheets will be sent to you with confirmation of registration. Additional forms and information are available at our website.

www.verticalchallengebianh.org

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5th Annual Survivor Art Exhibit

to be featured at the next annual Brain Injury & Stroke Conference
 Wednesday, May 19, 2010
 Center of New Hampshire Radisson,
 Manchester, NH

This is to formally invite you, or survivors you may know, to submit up to two pieces of artwork for display at the conference.

Parameters for this year's submissions include:

- Exhibiting in this event is open only to brain injury survivors who are New Hampshire residents.
- Each piece must be matted and/or framed.
- Each piece should be no larger than 12" x 14".
- The back of each piece of artwork should be labeled with the artist's name, address, and phone number.
- Include a title for each piece, the name of the artist and a short biography telling a little about the artist and/or their work.
- A statement giving your permission to the Brain Injury Association of New Hampshire to exhibit your art at the 27th Annual Conference on Wednesday, May 19, 2010.

Art media accepted includes:

- Photography • Etchings • Drawings • Quilt/Fabric Art • Paintings

The deadline for submissions is April 16, 2010. All pieces should be delivered to:
 Brain Injury Association of New Hampshire
 109 North State Street, Suite 2
 Concord, NH 03301

Arrangements will be made to return artwork as soon as possible.
 BIANH is not responsible for loss or damage.

Please note that a limit of 30 pieces will be selected by the Brain Injury Association of New Hampshire's Conference Committee.

We look forward to receiving your submissions by April 16, 2010!
 For any questions please contact:

Nicki Beauregard	or	Nina Hopkins
603-365-1868		603-641-6700
NBeauregard@elliot-hs.org		hopkins@CMC-NH.ORG

Community Mental Health Services: What are My Rights?

By Julia Freeman-Woolpert, Outreach Director, Disabilities Rights Center



The news on the state budget is grim for the mental health system: budget cuts are causing vital services to scale back or close altogether. In October, New Hampshire Hospital turned away several patients in crisis because of a shortage of pharmacists. The Neuropsychiatry Unit at New Hampshire Hospital closed in November, and access to neuropsychiatry consultation services at the hospital are likely to be curtailed even further. Community Mental Health Centers (CMHCs) across the state have declared they will be rationing services.

This is of great concern for people who have had brain injuries, who often need mental health services due to emotional and behavioral difficulties pre-existing, or as a result of, the brain injury. Historically, people with brain injuries have had trouble accessing mental health services, with mental health providers reluctant to treat them, instead referring them to neurologists, who in turn refer them back to psychiatrists. New Hampshire Hospital, even before the Neuropsychiatry Unit closed, was often reluctant to admit a person with a brain injury, even if the person was experiencing mental illness and was a danger to himself or others. With tighter budgets, we can expect to see an increase in problems accessing adequate services for people with brain injuries, including eligibility denials and waits for services.

While funding for services has decreased, the rights to access to quality mental health services have not changed, though you may have to be more assertive to get your needs met. If you have a mental illness causing a severe impairment of your ability to function, or your child has a severe emotional disturbance causing impairment in functioning, and you or your child meet the eligibility criteria, you have a right to state funded services provided by a CMHC*. The CMHC must evaluate you, determine if you are eligible for state funded services, and inform you of the determination. Others who need mental health services, but who do not have severe mental illnesses, can also get less intensive assistance, such as short term counseling, from CMHCs.

If you are eligible for CMHC state funded services, you have the right to adequate and humane treatment, including but not limited to the right:

- To an individual service plan that addresses your own goals, and to the services in the plan within the time frame set forth in the plan;

- To "receive necessary services when those services are available";
- To quality treatment "in keeping with generally accepted clinical and professional standards";
- To full information about your condition and to "be informed of all significant risks, benefits, side effects and alternative treatment and services";
- To treatment and services which promote your full participation in the community;
- To refuse treatment except in certain limited circumstances;
- To reasonable accommodations if needed because of a disability, such as services in a physically accessible location and assistive technology such as assistive listening devices if needed so that you can have equal access to services;
- If your English proficiency is limited, you have the right to accessible services, such as having a therapist who speaks your language, or an interpreter.

These are just some of your rights. If you have a guardian, that person may be the one to exercise your rights for you.

Finally, if you are denied access to services, or if the services offered are inappropriate or inadequate, you have the right to appeal. More information is on the DRC's website about your rights to mental health services: <http://www.drcnh.org/Issue%20Areas/Mental%20Health.htm>

- Complete eligibility criteria can be found here: http://www.gencourt.state.nh.us/rules/state_agencies/he-m400.html

The Disabilities Rights Center is New Hampshire's protection and advocacy system for persons with disabilities, including persons with traumatic brain injury. If you would like to speak with an advocate, call the Disabilities Rights Center at 1-800-834-1721 or email us at advocacy@drcnh.org.

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Stroke Survivor Shares Story of Recovery

Reprinted with permission by Aimee Lockhardt, Portsmouth Herald, November 9, 2009.

Julia Fox Garrison believes in HUGS: Humor Ultimately Gives Strength. This is part of the reason why when you meet her she'll decline a firm handshake and have you dive right into her out-stretched arms.

A stroke survivor and author of the book "Don't Leave Me This Way (Or When I Get Back On My Feet You'll Be Sorry)," which chronicles her recovery, Garrison came to the Community Campus in Portsmouth Friday to inspire those who have led similar paths that anything can be faced with a good sense of humor and a positive outlook.

The event was hosted by the Krempels Brain Injury Foundation, an organization dedicated to improving the lives of people affected by stroke, tumor or brain trauma. The foundation currently has 75 active members.

"She has a really positive message," said Barb Kresge, program coordinator for SteppingStones. "She truly believes a positive attitude leads to a positive outcome."

SteppingStones is a program within the foundation that focuses on helping improve skills, receive support and build relationships for people living with brain trauma.

On July 17, 1997, Garrison had a massive hemorrhagic stroke that completely paralyzed her left side, damaging 40 percent of her brain on the right side. For nine months, Garrison said she was never told she would live and she said because of this she had to create her own hope.

"We can do things on our own with the power of human spirit not science," she said. "We have the power."

Garrison thanked her faith for helping her get through the ordeal and giving her the strength to carry on when no one else thought she'd live. She is now able to walk with the help of a cane and has limited movement on her left side. "I believe you can take a sick mind and make a healthy body sick and take a healthy mind and make a sick body well," she said. "... If you handicap your mind you handicap your body."

Jim Scott, a member of the foundation, suffered a traumatic brain injury after a car accident at age 23. It's been 3½ years recovering and he said he's had to relearn to walk and talk. He, as well, suffers from left side paralysis and connected to Garrison because he has faced a lot of the same obstacles.

Garrison explained to the group that while she was in recovery, anyone who came to visit her in the hospital had to bring a joke and have a good laugh. She said it changed the atmosphere. "If you illuminate the positive, the negatives will still be there," she said, "but they're in the dark."

Scott used the same method in his recovery. "Humor was the only thing that got me through it," he said. "It's the only thing to do. It's how I handled it."

Ric Kavanaugh is a member of the foundation and said he has gone through a number of injuries with his latest about a year ago suffering from hematoma. He had to have emergency surgery and was told if they hadn't found it when they did he would have died within a few days.



"She kind of hits lots of points I deal with daily," he said of the presentation and agrees about the strength of humor in recovery. "You have to cultivate (humor) sometimes," he said. "It's a very strong coping mechanism."

Aside from using humor and positive outlook, Garrison also urged stroke survivors to be flexible, to realize every day routines may not be what they once were but to not give up.

"Can't must be followed by yet," she said. "Can't closes all doors to possibilities. If you say yet it leaves the door ajar. I plan to Rollerblade and run. I can't do it yet, but I will."

But just changing the survivor's mind was not her only advice. She said it's equally important for people in the medical field to change their outlook as well. Survivors, she said, can't be intimidated by doctors and to look for an equal say and partnership in their health care. People suffering from brain trauma are not just a statistic and should not be treated that way, she said. It was Garrison's own intuition that saved her life when a doctor suggested putting her on chemotherapy again for something she didn't end up having and she declined.

She said to anyone within the medical profession that routine is not an option. She said when she was in recovery she wanted to deal with the people for whom medicine was really their calling; the ones who care.

"You can feel the difference," she said. "Routine happens. It's more difficult dealing with people who are fearful, vulnerable and hurt."

She said she looks for two things in nurses and doctors she deals with: passion and compassion, and that even the simplest acts of kindness are the ones she still remembers to this day.

"She gives everyone a sense of hope and makes everybody feel they're a part of the world and influential," Noel Jodoin said of Garrison. Jodoin is a graduate student at the University of New Hampshire and suffered a stroke two years ago at age 25.

Jodoin said she was hit most when Garrison said, "Don't call me a victim. I'm a survivor. A victim is someone who's on the ground." "I always try to use it as my own mantra," Jodoin said. "I'm a survivor."

Garrison left the presentation asking the group to find their own personal anthem stating hers as Christina Aguilera's song "Fighter."

"It's words about a relationship ending," she said. "Mine's with my stroke. Thanks for making me stronger, better...It was a gift for me. It was an opportunity to impact all the people I can."



The Larry Lap

Contributed by Ellen Edgerly, BIANH Staff

With photograph of Larry Hanlon, Joyce Thorman, Sara Edgerly
November 18, 2009

The 4th Annual Brain Injury Recover Ride "The Larry Lap 2009" was held at New Hampshire Motor Speedway during Round 7 of the Loudon Road Racing Series (LRRS) on a beautiful late summer day on Sunday, September 6, 2009.



For the fourth year, Larry Hanlon and Joyce Thorman organized this fundraiser event that raised \$5,752 for the Brain Injury Association of New Hampshire.

Larry sustained a brain injury on May 5, 1996, while racing his motorcycle and continues to travel his life's road with perseverance. Larry has not lost his spirit and sport of motorcycles and continues to help raise money to support individuals with brain injuries and their families.

Special thanks to Larry and Joyce, along with all motorcyclists who participated in "The Larry Lap 2009" and to the New Hampshire Motor Speedway.

2010 Brain Injury Legislative Leadership Training

Contributed by Ellen Edgerly, BIANH staff

The Brain Injury Association of New Hampshire has been awarded a grant by the New Hampshire Developmental Disabilities Council to offer a 2010 Brain Injury Legislative Leadership Training to 25 individuals. The Brain Injury Association of New Hampshire is accepting applications for this training from interested individuals representing the brain injury community as a survivor, family member or professional. There is no cost for registration.

This Leadership Training will consist of two full-day Saturday sessions offered in January and February in Concord along with two participant teleconferences that will be held in March and April.

Individuals will have an opportunity to sharpen their advocacy skills through information gained from legislators, key state policy makers, state government officials and advocates. This training will provide individuals with the advocacy tools necessary to advocate for public policy and legislation for survivors and their families.

If you are interested in participating and/or would like additional information, please e-mail Ellen Edgerly at Ellenedge@metrocast.net or contact at (603) 332-9891.

Spotlight on Krempels

Research at the Krempels Brain Injury Foundation

The Krempels Brain Injury Foundation's mission is to improve the lives of people living with brain injury. Our community day program is our greatest investment in our mission. While you may be aware of our program and services, and you may even know about the 100 interns from up to eight disciplines that support our program, were you aware of our collaborative efforts with select researchers with the same goal as ours: improving the lives of people with brain injury?

Through a selection process, The Krempels Brain Injury Foundation chooses quality, feasible research projects and offers opportunities for members to voluntarily participate. This collaborative process, which typically occurs with University of New Hampshire faculty, is beneficial to all involved: members have an opportunity to make a difference for others living with brain injury, the research team has a supportive setting in which to accomplish their goal, and the organization has access to cutting-edge information to better serve our membership.



Dave Halloran, Emily Warner (Researcher), and Roy Goudreault.

The following is a description of a research project in process with volunteer members here at Krempels Brain Injury Foundation.

Do people with expressive aphasia experience stress? Many individuals with aphasia feel that way, as do the clinicians with whom they work. Even so, there is very little research looking at stress perception around communication activities in individuals with expressive aphasia. Long term, or chronic stress, can have negative implications for overall physical and mental health. Further, high stress perception can impact the degree to which individuals feel comfortable and accepted while participating in daily life. Stress can also make weak communication abilities even weaker as some individuals become anxious, flustered and disorganized in public speaking contexts.

The purpose of the aphasia-stress project is to examine whether stress perceptions are impacted by communication events, as well as an individual's stress hormone production. In addition to being asked about stress while ordering food at a restaurant, participants provide saliva samples of cortisol, a major stress hormone in the body, so that it can be measured. Researchers are examining daily baselines of this hormone to see whether individuals show signs of prolonged and heightened stress.

An anticipated outcome of this project is earlier identification of individuals at risk for chronic stress as a result of aphasia, as well as a potential marker of the benefits of interventions such as assistive communication technology and/or other



Jim Register

augmentative communication techniques. The project is being conducted by Emily Warner, a graduate student in the Communication Sciences and Disorders Department, and Barbara Prudhomme White, PhD, OTR/L, Associate Professor in the Occupational Therapy Department at the University of New Hampshire.



Brain injury can happen to anyone, at any time

The Krempels Brain Injury Foundation

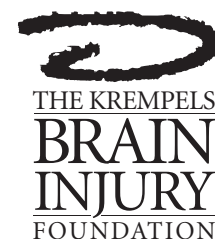
Improving the lives of people living with brain injury from trauma, tumor or stroke

SteppingStones is a community-based post-rehabilitative program located at the Foundation for Seacoast Health's Community Campus in Portsmouth, N.H. It provides opportunities for social

interaction, life skill training, recreation, and support for brain injury survivors who are now living in the community. Call (603) 430-7668 for more information.

The Family Support Program offers a community of comfort and care for families and caregivers of people living with brain injury from

trauma, tumor or stroke. Call (603) 433-9821 or e-mail familysupport@krempelsfoundation.org for more information.



MIND VERSUS MACHINE

By Lee Gomes, *Forbes*, May 11, 2009; reprinted with permission

Any list of buildings that have played an important role in the computer industry would no doubt contain parts of MIT and Xerox Parc. But a complete historical roster should include Moses Hall at UC, Berkeley, an office not for engineers or programmers but instead for the school's philosophy department.

Besides the usual Plato and Aristotle, the department has been home for many decades to two of the most famous critics of what might be called the "computerist project."

Hubert Dreyfus is best known for his 1972 book *What Computers Can't Do*, one of the first to question whether the field of artificial intelligence could ever attain the lofty goals it set for itself. A little later another philosopher, John Searle, did battle with technologists like Ray Kurzweil over proposals that computers might one day be not just superintelligent but also conscious the way humans are.

To the extent that the world now realizes the brain is not just a big computer – as the first generation of AI researchers described it – Dreyfus and Searle get much of the credit.

Two may be a pattern, but three is definitely a trend, and those two famous computer critics have some company in the form of Alva Noe, a 44-year-old hired by UC, Berkeley in 2003 to teach the philosophy of consciousness. While Dreyfus and Searle found a target in programmers, Noe is concerned with another technically minded group: brain researchers.

Neuroscience research in recent years has involved the use of imaging technology, which takes pictures of the brain in action. Some neurobiologists are beginning to talk about one day being able to know everything about what people are thinking by looking at magnetic resonance scans of their brains.

A typical experiment along these lines was performed in 2007 by German neuroscientist John-Dylan Haynes, who showed his subjects two numbers and asked them to think about performing either addition or subtraction with them. Haynes was able to tell what they had chosen nearly three-quarters of the time by looking at brain scans.

Noe's dim view of that line of research is summed up by the title of his recent book, *Out of Our Heads: Why You Are Not Your Brain*. The problem with the neurobiological approach, he argues, is that it regards the brain as something akin to a computer, an "intrinsic generator" that creates consciousness the way a music box creates a melody.

Noe doesn't disagree that the brain is necessary for consciousness, or dispute that our understanding of the links between our thought processes and the brain's chemical and electrical firing will continue to grow. His point, rather, is that the mind makes sense only when understood in the context of the real world that it is living in. Attempting to understand the mind in isolation from that outside world is akin to trying to understand the movements of a dancer without any knowledge of the music that is being danced to or trying to understand emotions simply by looking at the movement of the facial muscles involved in smiling or frowning. "The mind is an ecological phenomenon," Noe says. "We are in the world and of it, not trapped in some cavern of consciousness."

Noe says that the neurobiologists don't do justice to the complexity of what they are studying because they look at one small, reduced part of the puzzle. He is following the example of his colleague professor Dreyfus, who often quotes the German philosopher Heidegger about how you can't really understand what a hammer is unless you also understand nails, wood and the human need for shelter.

Noe and Haynes represent two poles in an emerging debate about the nature of consciousness, and each thinks the other misses a big part of the story. Whatever their technical disagreements, the two are on friendly terms, and indeed Noe has spoken in Berlin at Haynes' research outfit.

The problems of consciousness and the mind are among the few areas left in academic life where philosophers and scientists still work side by side. Centuries ago philosophers also worked on what we now call physics and biology; eventually science won out, and philosophers were left with little or nothing to do.

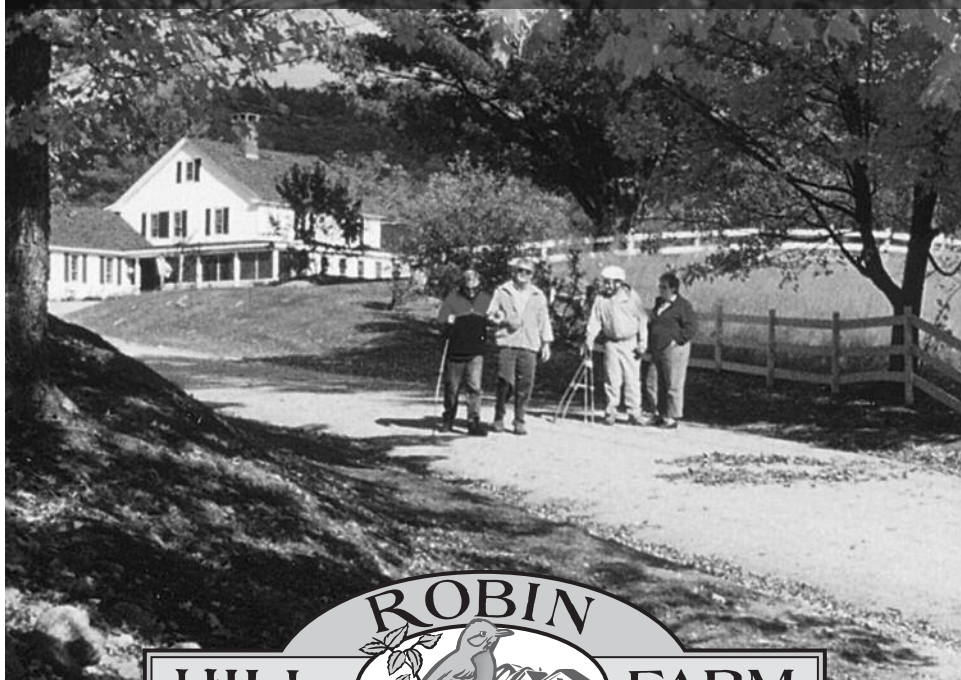
Noe says that our understanding of the mind and of consciousness is still so primitive that philosophers will have their work cut out for them for many years to come.

"A few decades ago we were in the 'behaviorist' phase of studying the mind. Now we are in the 'brainy' phase. Something else will come along. Neuroscientists need to read philosophy. Philosophers need to read neuroscience. Both groups need to talk to each other."



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The Question of the Week

Several readers of the Main Street page have given us their feedback! They have requested to have the "Question of the Week" reinstated as they enjoyed seeing pictures of local folks and tourists visiting the Main Street area and looked forward to reading their responses.

Andrew Duncan Robinson, a local resident has offered to volunteer his services in interviewing patrons of Main Street to ask them the "Question of the Week." Andrew will make frequent visits to Main Street to take a quick photo of the respondents and record their answers.

Andrew is an avid writer, likes to meet new people and enjoys his daily cup of coffee at Café Monte Alto. To kick off the reinstatement of the "Question of the Week," Robinson thought it would be fitting to ask "When was the last time your picture and/or name was in the newspaper?" So don't be surprised the next time you are on Main Street when you are approached by a gentleman requesting your photo and response to the "Question of the Week." Andrew looks forward to meeting you.



???? ASK JON ???? ?

by Jonathan Lanteigne

Dear Jon,

When people meet me and realize I have a brain injury, they treat me differently – sometimes in a good way, sometimes in a bad way – how can I communicate to them that I am still me? -- Anonymous.

Thank you for your question. It is definitely a tough world out there! There are a lot of good people who are understanding and show compassion to those of us who have a brain injury. Then there are other people who will always treat you/us, or anyone else they see as being different from them, in a negative manner. Always be straightforward and upfront by saying, “I have a brain injury,” and let the discussion proceed from there. Making first impressions and coming across in an honest way can make a difference in how people will respond to you as the same person you were before your brain injury.



Only you know how much information you want to share about your brain injury. We all know how complicated it is to try to explain how we are affected – everyone is affected differently. Some symptoms are minor, whereas some are more noticeable. You might try a more general approach when describing some of the issues associated with your brain injury. This might encourage direct questions from people about how you are affected. We typically use different approaches to communicate effectively. It appears to me that you already are capable of communicating to others about your brain injury and that you are able to let them know that “you” are still you.

Effective communication is a two-way street. By this, I mean that listening skills and acknowledgement of what is said is extremely important for communication to be effective. Those who treat you well and accept that you have a brain injury apparently have effective listening skills and are capable of accepting you the way you are. However, those that treat you negatively only hear or see things the way they want to. Unfortunately, no matter how you try to share information with them about your brain injury and that you might seem to be a little different but are still the same person inside, they will not accept it. Personally, I would not waste my time trying to convince them to accept me. It is their loss, not mine. It is time for me to move on!

Use “keywords” for clarification when describing your brain injury. This can definitely help people understand that you are still the same person under the same coat. Regardless of the type of brain injury, internal or external, any individual could experience a wide variety of physical, cognitive, and/or emotional-behavioral changes. With a physical impairment, an individual can experience seizures, or may become less coordinated. Cognitive examples include problems with attention, perception, comprehension, memory, learning, organization, reasoning, problem solving, and/or judgment. Some behavioral examples are impulsiveness, agitation, acting without thought, irritability, varying mood swings, and depression.

Make good use of any tools that can help you communicate. Using someone or something as an “interpreter” can help you clarify to others about your brain injury. For instance, if someone is deaf or hard of hearing, they can make use of sign language. If someone has a brain injury, they can carry a brain injury survivor card and format the phrase “brain injury” in bold type, italicized, and in all caps (“BRAIN INJURY”) and make use of images that are known worldwide, such as a handicap symbol and an illustration of a brain.

Networking with others is a systematic way of proper communication. By this, I mean that when you are communicating with someone, you are networking with them. This is why your first impression is purely dependent on how others rate their interactions with you. Based on feedback I receive from others, I’ve noticed that being friendly impacts the viewer’s/questioner’s impression of me and vice versa. If you are not courteous to each other, your overall “satisfaction norms” may drop below certain people’s standards! Remind family and friends that a successful recovery is dependent on committed and persistent effort from everyone involved. It is definitely a team effort. Take into consideration their views by asking questions that help them understand how their expectations can help you maximize your capabilities.

More specific guidance for information and support can be obtained through the Brain Injury Association of New Hampshire. They offer many services which you can use to both give and accept feedback to and from others. These services include a helpline at 1-800-773-8400, a technology and resource library, a Web site at "www.bianh.org, the Headway Newsletter, monthly support groups, and peer support programs for families and survivors.

In conclusion, always view communication as a two-way street. New noticeable changes can be of a physical, cognitive, and/or emotional-behavioral type. It is wise to be upfront about your brain injury and let communication go from here as necessary. Use tools to help you communicate with others in various ways about your brain injury. Come to an agreement on how you can meet one another’s expectations, within reason. For others to be able to respond to you as the same person you were before your brain injury, reinforce in your mind that the first impressions you make and the way you come across will always make a difference.

Good luck,
Jon



Do you have a question for Jon? Send it to the Brain Injury Association of New Hampshire, Attention: Newsletter Editor, 109 North State Street, Suite 2, Concord, NH 03301 or email it to renee@bianh.org. Due to the popularity of this feature, we cannot guarantee that all letters will receive a response.

If you have questions regarding brain injury, benefits, and/or programs, please call our office (603-225-8400) and speak to Barbara at extension 304, or Linda at extension 307.

BIANH can now be found on Twitter!
Simply go to Twitter.com and sign in under BrainInjuryNH.

SUPPORT GROUPS IN NEW HAMPSHIRE

(Times and places may change without notice – please call in advance)

Revised December 10, 2009

Aphasia:

Seacoast: Aphasia Support Group, 3rd Monday of the month, Community Campus, 100 Community Campus Drive, Portsmouth, NH
Contact: Dave or Rosemarie Phone: (603) 659-6161

Brain Injury:

Claremont: 4th Tuesday of the month, 6:00pm, Valley Regional Hospital, 243 Elm Street, Claremont, NH
Contact: Kendra Yakovleff
Phone: (603) 558-2123

Concord: 3rd Tuesday of the month, 6:30pm-8:00pm, Granite State Independent Living, 21 Chenell Drive, Concord, NH
Contact: Jan Perkins Phone: (603) 568-6021
Co-Facilitator: Pat Winski Contact: (603) 463-3035

Conway: 1st Wednesday of the month, 6:00pm-7:30pm, Northern Human Services, Center Conway, NH
Contact: Freddi Gale Phone: (603) 356-0282
Contact: Chris Dearborn Phone: (800) 424-7153 x 367

Derry: 2nd Friday of the month, 6:30pm, Nutfield Building, Parkland Hospital, 44 Birch Street, Derry, NH
Contact: Cathy Rudd Phone: (603) 458-5648

Franklin: 1st Wednesday of the month, 6:30pm-8:00pm, Genesis Mountain Ridge Center, 7 Baldwin Street, Franklin, NH
Contact: Karen Burke-Troon Phone: (603) 783-0444
Co-Facilitator: Jim Helton Phone (603) 934-2065

Greenfield: 6:30pm-8:00pm call for dates, Children and Young Adults, Crotched Mountain Center Children & Young Adults Specialty Hospital, 1 Verney Drive, Greenfield, NH
Contact: Lisa Walsh Phone: (603) 547-3311 ext 2010

Keene: Monadnock Pacers 4th Tuesday of the month, 6:00pm-7:30pm – DHMC, 580 Court St., Keene, NH
Contact: Cindy Carney Phone: (603) 352-6556
Co-Facilitator: Sandy Forest Phone: (603) 355-9970

Lakes Region: 3rd Thursday usually every other month, 7:00pm, Lakes Region General Hospital, 80 Highland Street, Laconia, NH. Call for upcoming dates.
Contact: Helen Robinson
Phone: (603) 279-3926 or in summer call (603) 744-0522
Co-Facilitator: Jamie Troon Phone: (603) 783-0444

Littleton: 2nd Wednesday of the month, 6:00pm-7:30pm, Ammonoosuc Community Health Services, 25 Mount Eustis Road, Littleton, NH
Co-Facilitator: Steve Noyes Phone: (603) 444-5930/2464
Co-Facilitator: Jackie Poulton Phone: (603) 444-3165

Manchester: Greater Manchester Brain Injury and Support Group;
2nd Tuesday of the month, 6:00pm-7:30pm, Catholic Medical Center, Rehab Medicin Unit F200, 100 McGregor Street, Manchester, NH
Contact: Bob Viera Phone: (603) 663-6662
Co-Facilitator: Gail Sederquest Phone: (603) 606-7944

Milford: 3rd Saturday of the month, 4:00pm, St. Joseph's Clinic, 442 Nashua Street, Milford, NH
Contact: Laura Horning Phone: (603) 673-8951

Nashua: 1st Wednesday of the month, 6:00pm, St. Joseph Hospital (4th floor), Nashua, NH
Contact: Patti Motyka Phone: (603) 882-3000 ext. 7501

Peterborough: 1st Tuesday of the month, 6:00pm-8:00pm, Summerhill Assistive Living, 183 Old Dublin Road, Peterborough, NH
Contact: Tom Badgley Phone: (603) 547-8891
Co-Facilitator: John Richards Phone: 547-3311 ext 1418

Rochester: 2nd Thursday of the month, 6:00pm at Frisbee Memorial Hospital, Rochester, NH
Contact: Paula Dempsey Phone: (603) 539-8718
Co-Facilitator: Doug DuFresne Phone: (603) 332-9435

Salem: 1st Wednesday of the month, 5:00pm-6:00pm, Northeast Rehab Hospital, Administrative Conf. Room, Salem, NH
Contact: Jessica Anderson Phone: (603) 893-2900 ext 3218

Seacoast: 1st Tuesday of the month, 7:00pm, North Hampton United Church of Christ, North Hampton, NH
Contact: Lil Charron Phone: (603) 659-5769
Co-Facilitator: Rosalie Johnson Phone: (603) 749-1825

Upper Valley: 2nd Wednesday of the month, 6:30pm, Dartmouth Hitchcock Medical Center, Fuller Board Room, Lebanon, NH
Contact: Donna Crowley Phone: (603) 650-7305

Brain Tumor:

Derry: 2nd Monday of the month, 5:30pm-7:00pm, Derry Public Library, Paul Collette Conf Room A, Derry, NH
Contact: Urszula Mansur Phone: (603) 425-2822

Stroke:

Lebanon: 1st Tuesday of the month, 10:30am-11:30am, Dartmouth Hitchcock Medical Center, 1 Medical Center Drive, Lebanon, NH
Contact: Jane Stephenson Phone: (603) 650-5789

Manchester: 4th Wednesday of the month, 1:15-2:30pm, Easter Seals, 555 Auburn Street, Manchester, NH
Contact: 1-800-870-8728

Nashua: 2nd Wednesday of the month, 6:00pm-7:30pm, 4 South dining room, St. Joseph Hospital, 172 Kinsley Street, Nashua, NH
Contact: Karen Shaw Phone: (603) 882-3000


Salem: 1st Wednesday of the month, Northeast Rehab Hospital, Family Conf. Room, 70 Butler Street, Salem, NH
Contact: Renee Baxter Phone: (978) 373-2901

Salem: 1st Saturday of the month, Northeast Rehab Hospital, T-R Department, 70 Butler Street, Salem, NH
Contact: Kim Errico Phone: (603) 893-2900 ext. 469

Caregivers

Portsmouth: Every Wednesday, 10:00am-11:00am, Community Campus, 100 Campus Drive, Portsmouth, NH
Contact: Lisa Hanson Phone: (603) 433-9821
familysupport@krepelsfoundation.org

Providing an alternative to institutionalized and campus living for persons with an acquired brain injury and other neurological disorders.



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Northeast Rehab has enabled me to see beyond today's challenges and into tomorrow's possibilities. Without them, I don't know where I'd be."

Our team now includes individuals who are Certified Brain Injury Specialists (CBIS) and a CBIS Trainer.



For more information on Northeast Rehab or any of the services we offer, please call us at (603) 893-2900 or visit www.northeastrehab.com.

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