Brain Injury Rehabilitation Fellowship



Carolinas Rehabilitation Carolinas Healthcare System Charlotte, North Carolina

Charlotte Rehabilitation (CR) is offering a one-year fellowship in Brain Injury Rehabilitation for a board eligible/board certified physiatrist interested in developing further expertise in clinical management and research pursuits within this subspecialty. *CR* is a 159-bed CARF-accredited rehabilitation hospital with 3 inpatient facilities and also has 13 pediatric rehabilitation beds located at Carolinas Medical Center (CMC). CR dedicates 30-beds to brain injury. This fellowship allows for flexibility between clinical and research time and will be specifically designed to meet the candidate's interest. Clinical opportunities include inpatient and outpatient management of TBI patients with a focus on treatment of active medical problems, neuropharmacological trials, neuropsychological evaluations and procedural management of spasticity. The clinical experience also provided time for learning opportunities and neuroradiologists, neurosurgeons and trauma surgeons located at the CMC Level I Trauma Center, adjacent to CR. From a research perspective, CR is a member of the NIDRR-funded TBI Model System Project. This project provides opportunities to participate in ongoing and future studies focused on TBI issues. Brain injury research at CR also includes opportunities to participate in clinical trials initiated at either CR or CMC. Interested candidates must have excellent clinical and academic credentials and be very motivated to be challenged in a dynamic clinical/research environment.

Program Objectives: By completion of this program, the Fellow will be able to demonstrate:

- 1. An improved knowledge and understanding of the medical and rehabilitation needs of patients with acquired brain injury in the acute care, inpatient, and outpatient rehabilitation settings.
- 2. An understanding of neurobehavioral anatomy and how it relates to the clinical syndromes demonstrated by patients with acquired brain injury.
- 3. An improved knowledge and understanding in the neuropharmacologic management of post traumatic agitation and psychostimulant trials for prolonged post-traumatic unconsciousness.
- 4. Knowledge and competent clinical skill in the management of spasticity, including medication management, phenol neurolytic blocks, botulinum toxin injections and intrathecal baclofen.
- 5. The ability to perform a comprehensive musculoskeletal and neurological examination, including a comprehensive mental status examination.
- 6. Improved knowledge and understanding of common medical complications associated with brain injury and proper management of problems.
- 7. Improved knowledge and management skills in the treatment of patients with mild traumatic brain injury, including post concussion symptoms.
- 8. A thorough knowledge and understanding of management of common post concussion symptoms including headache, dizziness, irritability and cognitive impairment.
- 9. The ability to evaluate CT and MRI scans and to integrate this knowledge into the clinical management of acquired brain injury.
- 10. Improved understanding and knowledge in the evaluation of patients with hydrocephalus.
- 11. Improved understanding of available neuropsychological batteries and their inherent strengths and weaknesses.
- 12. The ability to provide accurate prognostic information at both the acute care consultative level and at the rehabilitative functional outcome level.
- 13. Leadership skills in the management of a treatment team and in the brain injury healthcare community.
- 14. The ability to develop clinical research ideas that would improve the management and outcome of acquired brain injury survivors.
- 15. The ability to develop an understanding of the physiatrist's role in the medical, legal, and ethical issues as it relates to the degree of severity of the traumatic brain injury and subsequent patient issues.
- 16. The ability to develop skills as a teacher and educator of resident physicians and allied healthcare professionals on topics in traumatic brain injury.

Curriculum:	Please refer to the sample curriculum on the following page for an example of a fellowship program with a 70 percent clinical and 30 percent research mix.
Requirements:	Completions of an accredited residency program in Physical Medicine and Rehabilitation and eligible for medical licensure in North Carolina.
Salary/Benefits:	\$52,947 Salary \$1,900 CME allowance
Training Period:	Full benefits including 14 days paid vacation 1 year
Start Date:	July/August 2010
Location:	Carolinas Rehabilitation is located within two miles of the heart of uptown Charlotte. Charlotte offers a wide array of cultural, dining and recreational activities. Charlotte is also conveniently located within two hours of the Great Smoky Mountains and three hours of Charleston, SC and other oceanfront communities.

Sample Curriculum Schedule:

Monday	Tuesday	Wednesday	Thursday	Friday
Inpatient Rounds	Inpatient Rounds	Inpatient Rounds	Inpatient Rounds	Inpatient Rounds
Care Team I		Care Team II		
Lunch	Lunch	Lunch	Lunch	Lunch
Admissions	Outpatient Clinic	Admissions	Admissions	Admissions
	Admissions			

Clinical:

Inpatient Service (6-9 months): Management of inpatients daily and leadership of a team of therapists involved in care.

Clinic (full year): Two half-day clinics/week (up to 8 patients /clinic- new/established). Clinic volume will include significant diversity of TBI patients including a large number of mild TBI patients.

Specialty clinics (as available or during non-inpatient months): Baclofen clinic (1st and 3rd Tues AM); Botox clinic (3rd Fri AM); Adult Hydrocephalus clinic (once/month); Neuropsychiatry clinic; Movement disorder clinic

Other: Acute care TBI consults; Neuroradiology film reading; Neuropsychological testing; outpatient therapies (driving evals, vestibular evals); vocational rehab/services

Education:

Update BI notebook

Review/ update resources manual of key articles in BI literature.

Grand Rounds

Formal presentation to the local healthcare community (once / year).

Neuroscience/Trauma Conference

Monthly conference that includes Neurotrauma topics.

Journal Clubs; Didactics

Regular participation in resident education and allied healthcare.

Call Responsibilities:

Short call (rounding/dictating progress notes on 30-50 patients) 6-8 Saturdays/year. No pager call.

Faculty: The faculty includes multiple physiatrists with specific interests and care responsibilities in the management of brain injury. Additional faculty includes: neuroradiologists, neurosurgeons, trauma surgeons, neuropsychologists and research staff.

Lori Grafton, MD	Medical Director, Brain Injury Program Director Rehabilitation Services, CR
Shilpa Kasuganti, MD	PM&R Faculty, CR
James McDeavitt, MD	SVP Medical Education Research, PM&R Faculty
Maureen Nelson, MD	Director, Pediatric Rehabilitation
William L. Bockenek, MD	Medical Director, CR Chairman, Department of PM&R, CR
Jennifer Camp, MD	Director, PM&R Consult Service, CMC
Robert Mittl, MD	Neuroradiology, CMC
C. Scott McLanahan, MD	Neurosurgeon
Michael Thomason, MD	Chairman, Trauma Surgery, CMC
Sara Schara, Ph.D.	Clinical Neuropsychology, CR
Mark Hirsch, Ph.D.	Research Faculty, CR
Tami Guerrier	Assistant Director of Research, CR

For more information please send cover letter and curriculum vitae to:

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