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Pictured is US Congressman Steve Scalise’s lead acute rehab care team.
Adding Life to Years® — Helping You Live a Full and Healthy Life

STAYING WINTER SAFE

The Old Farmers’ Almanac—a reliable source for weather prognostication for hundreds of years—says we’re still in for a potentially nasty finish to this winter. And when it snows, it means the potential for some very sore muscles!

When the snow falls, adults wander out into the “mess” to shovel, sweep and unearth their cars beneath inches of the white stuff. But there are hazards lurking in the picture-perfect winter scene, warns Kim Morrison, DPT, physical therapist at the MedStar NRH Rehabilitation Network, Dundalk, Md.

“If you have been sedentary for a while and go out into the cold weather and exert yourself, you are putting yourself at risk of injury,” she says. “The cold can make muscles stiffen and more susceptible to injury. Your back, wrist, knees and shoulders are the most vulnerable. But there are things you can do to protect yourself and your family. Warming up before you venture outside can make a big difference.”

Morrison says make it a family affair. “Gather everyone together before shoveling, running, walking or sledding and do some warm-up exercises.”

She recommends these dynamic movements that increase blood flow and heart rate as they stretch and warm muscles:
- Marching in place
- Heel raises
- Squats
- Leg swings
- Arm circles

In addition, she advises taking a few more preventive actions:
- Hydrate: Drink water before and during exertion.
- Layer-Up: Pile on layers of clothing that you can take off as you—and the temperature—warms.

If you are intent on shoveling snow, remember these tips:
- Make the appropriate choice of tool—not too heavy or too long a handle for your body type.
- Push the snow instead of picking up piles of the heavy stuff.
- Put one leg slightly in front of the other to improve leverage.
- Don’t twist your body—this leaves your spine in a more unstable position.
- Pace yourself, take breaks and don’t forget to hydrate.

What should you do if despite all your efforts you slip and fall on an icy spot? Morrison says, “It’s all about how you fall. Try to remember these moves to prevent serious injury:
- Don’t stiffen your body—stay loose as you fall.
- Don’t stretch your arms out in front of your body to brace the fall.
- Try to land on the “meatiest” part of your body—in most people, that’s the rear end!

If you do get injured, Morrison notes that most achy bodies will get better in a few days with self-care. “Use ice first to relax inflamed muscles—10 minutes on and 10 minutes off. But never put ice directly next to the skin. Wrap it in cloth. After 48 hours, turn to a heating pad to increase blood flow.”

Still she warns, if you experience any of these symptoms, it may indicate a more serious problem that requires professional diagnosis and treatment:
- Bowel or bladder problems.
- Pain that migrates from your back down your leg.
- Any unusual symptoms after hitting your head.

To learn more about services at MedStar NRH’s Dundalk location—or any of the Network’s outpatient centers—go to MedStarNRH.org/locations
President’s Message

Boosting Recovery through Continuity of Care

For many patients who have suffered critical illness or injury, recovery is greatly enhanced with an integrated delivery of services across different settings of care. This “continuum of care” is vividly depicted in the stories of two patients highlighted in this issue of MedStar NRH Today.

For U.S. Congressman Steve Scalise and D.C. Firefighter Dane Smothers, Jr., survival from critical injuries was made possible by the expertise of the trauma, critical care and surgical teams at MedStar Washington Hospital Center. For both, sustained recovery and return to life in their communities was made possible by rehabilitation at MedStar NRH.

It’s the special relationship between the two hospitals and between our medical and therapy teams that promotes the smooth transition from one care setting to another. The Hospital Center’s skilled staff saves lives and restores function. Our MedStar NRH team maximizes function and independence.

**Care Transitions**

Even before patients are transferred from the Hospital Center to acute rehab at MedStar NRH, our physiatrists and therapists meet with patients and families to begin an evaluation process—and explain what to expect during the next steps in their recovery.

They consult with their Hospital Center colleagues about the patients’ continuing medical needs—and prepare our multidisciplinary rehab team ahead of the patients’ transfer. Our shared electronic health records system makes for an easier and safer transition. And our shared campus in Northwest Washington makes transition of care faster and easier for patients and families.

We also share this kind of collaborative relationship with other MedStar Health hospitals. MedStar NRH physiatrists and therapists use a shared electronic health records system. In addition, our physicians have a consult service to make sure that patients throughout the system are finding their way to the right level of care. This service even helps patients when it is unrelated to acute rehabilitation.

This “systemness” is also a critical component of research at MedStar NRH, and throughout the MedStar Health system. In another story in this issue you will read about a $5 million grant we received in partnership with MedStar Georgetown University Hospital to boost the career development of rehabilitation research-clinicians—and improve the future of treatment and recovery (see page 11).

**Power to Heal**

These efforts prove the true value of partnerships—and the power of strong relationships to produce positive results. These bonds truly have the Power to Heal.

That’s also the name of the annual fundraising campaign among MedStar NRH Team Members. Each year, they pledge their support through payroll deductions to fund programs and services at MedStar NRH. I’m so very proud that more than 300 Team Members came together to help enhance the patient experience, breaking all records and far exceeding goals (see page 6).

This annual campaign truly represents the dedication of our Team Members. They care deeply for their patients—and their skill and caring makes a critical difference in the lives of thousands of people every year. Each one of them plays an important role in helping patients achieve their goals—and leave MedStar NRH ready to live their fullest possible lives.

As we continue through 2018 and beyond, I’m excited and optimistic about the future of the MedStar NRH Network. I hope you share my enthusiasm—and I’m honored by the continued support of our community and its keen interest in our programs and services.
Meeting the Challenge of Complex Injury:  
**The Case of Congressman Steve Scalise**

In an instant with the crack of a bullet, the spin of a car, or the sudden burst of vessels in the brain, lives are irrevocably changed. For U.S. Congressman Steve Scalise, the innocence of a baseball game was shattered when a gunman aimed his weapon at the field where members of Congress were practicing for an annual game scheduled for the next evening.

His grave bullet wounds and his difficult journey through multiple surgeries and infection have been well documented. But like so many other patients with complex injuries, survival is just the first step in a recovery that may continue for months or years.

When the Congressman left his stay at MedStar Washington Hospital Center, he was immediately admitted to MedStar National Rehabilitation Hospital (MedStar NRH). His eight week stay at MedStar NRH demonstrates the critical importance of acute rehabilitation for patients who have suffered serious injury and who continue to have complex medical needs, as well.

For Congressman Scalise—and other patients with more complicated injury or illness—rehabilitation begins even before they enter the doors of MedStar NRH, explains John Aseff, MD, the physiatrist who cared for Rep. Scalise while he was in acute rehab.

“I visited the Congressman at the Hospital Center before he came to us. That’s an important element in creating continuity of care for our patients,” he says. “It’s good for patients and families to know what to expect during the next steps in the recovery process. When patients have multiple organ, nerve and blood vessel injury like the Congressman, we complete assessments before they are discharged from acute care to better understand their continued medical needs, as well as begin to map out their rehab.”

The shared electronic medical record systems among MedStar Health hospitals helps smooth transition of care from one facility to another, he adds. “We also have MedStar NRH physiatrists at our sister MedStar hospitals across the region to provide support and counsel,” Dr. Aseff explains.

**Multidisciplinary Care Team**

When the Congressman arrived at MedStar NRH, a team of rehabilitation experts had already been assigned to his care and provided an initial review of his immediate needs.

Every patient has a multidisciplinary care team that works collaboratively with one another, the patient and the family throughout hospitalization. Physiatrists, nurses, physical and occupational therapists, speech language pathologists, recreation therapists, neuropsychologists, case managers and dietitians work in concert to develop a treatment plan to help ensure the best possible recovery.

The care team meets weekly to share updates on the patient’s progress—and to address problems that may impede recovery. “Family meetings are also held to provide the patient and loved ones with a more global picture of the present—and the future,” explains Social Worker Joan McKinon Reeves, LICSW, MedStar NRH director of case managers.

“For the very beginning of a patient’s hospitalization, we provide an evaluation and create open communication between us and the patient and family,” she adds. “With patients who have more complex injuries, it’s important to understand what kind of support system they have at home and even begin to look at what they may require when they are discharged.

“Acute rehab is about planning a patient’s future daily life. Our goal is to help patients return to their work, their life, and their passions after a life altering event, and help ensure that the progress
Meeting the Challenge of Complex Injury: The Case of Congressman Steve Scalise

they have made during inpatient rehab is sustained. Case managers act as a bridge to services in the community—to the best next steps in a patient’s rehabilitation,” McKinon Reeves says.

“Unlike some other facilities, an acute rehab facility like ours is equipped to provide a full-range of medical services, 24/7, especially for patients with more complicated issues,” says Nailah Campbell, BSN, RN, nursing manager. “We are trained to care for sicker patients and prepared for all kinds of special needs from patients requiring kidney dialysis or wound care to assistive devices.”

Rigorous Therapy, Six Days a Week

Patients with complex injuries like Rep. Scalise require the skills of a team with special expertise. At MedStar NRH, therapy care teams have specialized training to meet a variety of patient needs.

For patients with multiple injury and nerve damage like the Congressman, the care team includes therapists who have years of experience caring for people with neurological injury.

For all patients, learning to do every day activities is critical to recovery. “Some patients need to relearn to walk,” says Meaghan Minzy, PT, DPT. “For them—and most patients with major trauma or illness—our goal in physical therapy is to improve endurance, balance, and strength.”

Amanda Summers, MS, OTR/L, ATP, says patients who have suffered serious illness or injury are often very weak following surgeries and weeks of hospitalization. “Occupational therapy is focused on helping patients perform daily tasks such as dressing and eating. We also work to improve cardiovascular fitness and muscle strengthening.”

Patients are put through rigorous therapy during their acute rehab—often for hours a day, nearly every day of the week. Rep. Scalise was no exception. He pushed himself and his body for three hours a day, six days a week, moving from wheelchair, to a walker and onto crutches.

“In time, he went from walking 20 feet to 200,” says Minzy.

Progress like this is the result of a patient's determination, the skill of rehab experts—plus the latest technology, such as FES, functional electrical stimulation to muscles, and the ZeroG®, the robotic body weight support system first developed at MedStar NRH.

Dr. Aseff visited Rep. Scalise twice a day and watched him during his therapy. “That’s typical for patients who have had critical trauma,” says Dr. Aseff. “It’s important to understanding their medical needs and to assess their progress.”

He also says that most people are inpatient about recovery—including the Congressman. “But too much therapy can be harmful—rest is important. Using energy efficiently and effectively is very important to recovery,” Dr. Aseff adds.

The Congressman’s hard work paid off and he has made a remarkable recovery. “Still patients with very complex injuries face enormous challenges as they learn to “accept the injury and adjust to a new normal,” says Minzy. “For all of us, it never gets old to watch as patients improve and leave us able to move on with their lives.”
The Power to Heal Meets the Power of Eartha

Grassroots Effort
The secret to her 2017 success? “I took the campaign to the people,” she says. “I pushed my cart along the hallways and visited every unit calling, ‘Yoo-hoo Sugar,’” she says, laughing.

“You have got to talk to people face-to-face and take to the campaign trail. And it helps to have some incentives too. I filled the cart with little gifts for those who signed up—everything from candy and water bottles to cell phone stands.”

Eartha’s magic did the trick and the campaign reached new heights, surpassing every goal. More than 300 Team Members pledged their support through payroll deductions—well past the previous year’s number and more than twice the goal of 139.

“After a while people came looking for me. And it’s not the gifts they were after. Our Team Members care about their patients. They want to be involved to help improve care,” Eartha adds.

Improving the Patient Experience
“In 2016, campaign funds supported the purchase of new robotic technology, called DIEGO, used in arm rehabilitation after stroke and brain injury.

“Earlier last year, Team Members gathered for a demonstration of DIEGO,” says Sooji. “When people see the real value of their efforts it becomes very meaningful. A plaque honoring Team Members and Board Members who made its purchase possible is now displayed alongside the robot.”

The 2017 campaign began in October with a kickoff party where Team Members dressed like superheroes. “We collected more than 80 commitments to the campaign from Team Members on that day alone,” she adds.

“These contributions are going to support the updating of Independence Square—the unique occupational therapy space that helps patients tackle real life situations they will face once they are discharged. Renovations will include self-check-out registers with touch screens, a Metro ticket machine and map, and a galley kitchen that many of our patients are likely to have,” Sooji explains.

The campaign also includes outpatient services—Team Members may choose which service to direct their contribution. This past year, funds collected for outpatient services are supporting transportation to and from therapy for patients in need.

The campaign is mounted throughout the MedStar Health system, but Sooji adds, “I’m proud to say that we had the highest participation rate from among hospitals across MedStar—and we were the first to reach our goal.”

More than 300 Team Members pledged their support to the Campaign to fund projects that improve the patient experience.
The new center features the expertise of MedStar Health orthopaedic and sports medicine primary care physicians, as well as MedStar NRH Rehabilitation Network’s physical therapists in one location to serve this large east Baltimore County community,” says John Brickley, vice president for ambulatory operations and network development.

“The program occupies two floors of the Medical Arts Building directly across the street from the hospital to provide convenient, seamless care to patients.”

East Baltimore’s First Orthopaedic and Sports Medicine Center

The center is the first in this area to provide a wide range of orthopaedic, sports medicine and rehabilitation services. “There has been a real need for specialized care of this magnitude in a centralized location,” Brickley says. “It’s been designed in keeping with our other orthopaedic and sports medicine centers in the Greater Washington, D.C., area, and the Greater Baltimore region in Bel Air, Timonium and Ellicott City.

“In addition to sports medicine services, we provide full-service orthopaedic and musculoskeletal care for everything from back pain and joint replacement rehabilitation to orthopaedic injuries, as well as post-surgical care. Over time, we will be expanding services to include other specialty care, such as the expertise of a certified hand therapist,” he adds.

The joint project with MedStar Franklin Square—one of the largest hospitals in the area with the busiest emergency room—features the skills of four physical therapists and a physical therapy assistant, says Jill Anderson, PT, assistant vice president for the Baltimore region.

“The 3,500 square-foot, fully equipped rehab gym is located adjacent to the physician offices and features the AlterG® Anti-Gravity Treadmill—unique technology that decreases the force of impact of walking and running, and increases it over time as injury heals,” Anderson explains.

“Our therapy services are focused on the full scope of sports injury rehab and prevention, including concussion care, and a ‘return to play’ program to rehab ACL knee injuries and ensure a safe return to sports activity,” she adds.

“Our physical therapists are orthopaedic certified specialists, and among the team are therapists with special certification in concussion and manual therapy,” says Laura Long, PT, regional director.

“We are treating both adolescents and adults—including weekend warriors and kids playing team sports. And for our patients’ convenience, we are open early and late, before and after work and school,” Long notes.

“Franklin Square Sports Medicine physicians and therapists provide services to athletes all over the area, including Maryland jockeys through the Horseman’s Health program, and a variety of other professional level athletes,” Long adds.

Diverse Physician Expertise

Ten physicians are currently staffing the center, bringing together the teams of two practices with long histories of service to this community, explains David Cohen, MD, director of sports medicine at MedStar Franklin Square.

“The practice has a wide range of expertise, with orthopaedists who specialize in hand surgery, pediatrics, joint replacement surgery and general orthopaedics. Two primary care sports medicine physicians are also a critical part of the practice,” he adds.

“I provide services for the Baltimore Brigade arena football team, and Dr. Leigh Ann Curl provides orthopaedic care for the Ravens and Orioles. But we aren’t simply treating professional athletes: The center is also providing services to collegiate teams and high school athletes.

“The key feature of the center is our integrated care—including a shared waiting area for both physicians and therapists. Our location across from the hospital gives surgical patients ready access for post-procedure appointments and therapy. It is streamlined service that benefits our patients and promotes fuller recovery,” Dr. Cohen adds.

MedStar NRH Rehabilitation Network at Franklin Square Medical Center
Sports Medicine • Orthopaedics • Musculoskeletal Services
9101 Franklin Square Drive, Suite 205, Baltimore, MD 21237
Phone: 410-282-2255  Fax: 410-238-1581
MedStar National Rehabilitation Network Updates

Expanding MedStar NRH Outpatient Network

### MEDSTAR NRH REHABILITATION NETWORK TIMONIUM

**2118 Greenspring Drive, Suite 200, Lutherville-Timonium, MD 21093**

This site is located at 1400 Front Ave., Suite 205, Lutherville, Md.

The MedStar Health ambulatory site at Timonium, designed to be the region’s premier sports medicine, orthopaedic and spine center, consolidates services previously provided in several nearby sites. The Lutherville location is now called the MedStar NRH Rehabilitation Network, Lutherville Hand Center, and will continue offering hand and upper extremity therapy, along with occupational therapy.

The new site in Timonium is a 45,000 square foot refurbished building and home to more than 25 medical specialists, including MedStar NRH physiatrists and physical therapists.

“Our physical therapists are housed alongside the sports medicine physicians on the facility’s second floor,” explains Steve Frantz, PT, ATC, clinic director. “The center is very comprehensive—with imaging services including MRIs; 26 exam rooms; and all of the most advanced technology for sports performance evaluation, and injury rehab and prevention. In addition, we are providing therapy for the full scope of musculoskeletal problems, such as joint replacement and spinal issues.”

The facility houses a state-of-the-art rehabilitation gym that includes an AlterG® anti-gravity treadmill, for weightless training of lower body injuries. “Our ‘return to play’ program is focused on rehabbing ACL injuries to ensure a safe return to sports activities using the most sophisticated testing modalities,” says Frantz. “The gym includes a 50-foot throwing lane and our team of 10 PTs include experts in cycling, running, throwing, orthotics, manual therapy and dry needling,” he adds. “We also provide comprehensive concussion management.”

The Timonium center is medical home for a number of professional teams and athletes, club teams and area colleges and high schools. In addition, the center houses an ambulatory surgery center with two procedure rooms.

### MEDSTAR NRH REHABILITATION NETWORK, BEL AIR

**12 MedStar Boulevard, Suite 255, Bel Air, MD 21015**

This site is located at 12 MedStar Boulevard, Suite 255, Bel Air, MD 21015.

In addition to full service sports medicine physical and occupational therapy services at MedStar Bel Air Medical Campus, MedStar NRH is now offering neuro-rehabilitation services for a range of diagnoses from stroke to post-concussion.

The center also provides pediatric speech and occupational therapy services—and is the network’s first comprehensive outpatient pediatric rehab program.


The facility combines treatment rooms and a pediatric gym equipped with special tools for children with sensory and motor issues, such as a platform swing. The rehab space is adjacent to the new MedStar pediatric primary care offices.

“Many children come to our clinic with limited verbal skills, poor eye contact and reduced fine and gross motor skills,” Root says. “A variety of therapeutic methods are employed to help them, including co-treatments, where the speech language pathologist and occupational therapist work concurrently with the child.”

### NRH REHABILITATION NETWORK, OLNEY, MD.

**18109 Prince Philip Drive, Suite 155 Olney, Maryland 20832**

This site is located at 18109 Prince Philip Drive, Suite 155, Olney, Maryland 20832.

The NRH Rehabilitation Network at Olney outpatient center housed in the MedStar Montgomery Medical Center’s adjacent Physician Office Building has expanded therapeutic space located adjacent to MedStar Georgetown Orthopaedic Institute. The center is also expanding its hand therapy, sports medicine and orthopaedic therapy programming. The outpatient center, which underwent a major renovation less than a year ago, now occupies more than 8,000 square feet of the building.
Medical Staff News

Erika Gosai, MD, joins the MedStar NRH medical team as an inpatient attending physician on the Spinal Cord Injury unit at MedStar National Rehabilitation Hospital. She has a particular interest in spasticity management and wound care and prevention—two areas that are particularly critical to this population.

Dr. Gosai comes to MedStar NRH from the University of Texas-Southwestern, where she completed both her residency in physical medicine and rehabilitation at Johns Hopkins University School of Medicine. She has a particular interest in spasticity management and wound care and prevention—two areas that are particularly critical to this population.

Dr. Gosai received her PhD and master’s degrees in clinical psychology from Howard University, and her undergraduate degree from the University of Maryland. At Johns Hopkins, Dr. Gosai provided neuropsychology services to a variety of patients in both inpatient and outpatient settings.

Rajat Mathur, MD, joined the MedStar NRH team providing physiatry services at MedStar Good Samaritan Hospital and at the new MedStar NRH Rehabilitation Network, Bel Air center. Prior to his most recent appointment, Dr. Mathur served as an interventional pain specialist at MedStar NRH/MedStar Georgetown University Hospital Spine Center.

Dr. Mathur received his MD from the Medical College of America, and completed his physical medicine and rehabilitation residency at the MedStar NRH-MedStar Georgetown University Hospital program. He completed a fellowship in pain management at Cooper University Hospital.

Melita N. Moore, MD, has joined the MedStar NRH medical team specializing in Sports Medicine at MedStar Union Memorial Hospital in Baltimore. Prior to her appointment, Dr. Moore was the head team physician, intercollegiate athletics and associate professor, Department of Physical Medicine and Rehabilitation at the University of California, Davis, where she completed a sports medicine fellowship in 2009.

She received her medical degree from the Ohio State University College of Medicine & Public Health. She completed her internship in internal medicine at MedStar Union Memorial Hospital and her residency at Sinai Hospital of Baltimore.

MedStar NRH-MedStar Good Samaritan Partnership

The busy unit provides comprehensive rehabilitation services for a range of orthopaedic and neurological illnesses including stroke, traumatic brain injury and spinal cord injury—and we will soon be adding programs for interventional pain, concussion care and sports medicine.

In addition, the MedStar NRH outpatient center at the hospital will continue to grow and diversify during the coming months.

The unit is currently undergoing renovations to add 49 beds—43 private rooms, and six semi-private rooms. Renovations will also provide more space in the unit’s main room, and the auxiliary gym space. Look for more in the coming months on this exciting new partnership and our expansion of inpatient rehabilitation in Baltimore!
Superlative Super H 5K!

Once again the community rallied for the 2017 Super H 5K Run, Walk & Wheel when more than 300 adaptive and able-bodied athletes gathered to raise funds for the MedStar NRH Network adaptive sports programs. The race, held on a sunny September day at the Sport & Health Club/Tysons Corner, is now in its 14th year. It was first organized in 2003 by the wife, children and friends of Harry Freedman, an accomplished athlete who lost his left leg in a worksite accident.

The purpose of the first race was to outfit Harry with a state-of-the-art sport prosthetic leg, but in just a few short years, the event gained regional attention and has grown into a competitive event attracting a diverse group of runners, walkers, handcyclists, moms pushing strollers and athletes punching the rims of sleek, aerodynamic racing wheelchairs.

“The race has helped to sustain the network’s very active program for disabled athletes—children and adults,” says Joan Joyce, director of recreation therapy and community relations. “We depend on the generosity of donors to fund this important program. It enables physically challenged athletes the chance to compete in sports and participate in our unique fitness program. This is critical to keeping people active and healthy—and preventing secondary health problems,” she adds.

Congratulations to the 2017 Winners

WHEELCHAIR
• Margaret Redden; Arlington, Va.
• Bryce Doody; Rockville, Md.

HANDCYCLE
• Anne Hilliard; Silver Spring, Md.
• Anthony Caparella; Silver Spring, Md.

RUNNERS
• Megan Heidt; Silver Spring, Md.
• Joseph Baremore; Silver Spring, Md.
**MedStar NRH Wins Prestigious Five-Year NIH Grant**

A joint MedStar NRH-Georgetown University program has been awarded a five-year, $3.5 million grant to promote career development of the next generation of academic rehabilitation clinician-scientists.

One of just four networks nationwide to receive the National Institutes of Health award, the MedStar NRH-Georgetown program is the only one in the nation designed to foster the independent research of a multidisciplinary group of researchers who will develop future treatments.

These scholars will include individuals with any advanced neurorehabilitation-related degree including physicians (neurologists, neurosurgeons, geriatricians, psychiatrists), as well as physical therapists, occupational therapists, speech language pathologists, bioengineers, and others.

**Multidisciplinary Research Focused on One Issue**

“Our grant has been designed to attract faculty-appointed rehab clinicians across disciplines focused on a single issue—disabling chronic neurological disorders,” explains Alexander Dromerick, MD, MedStar NRH chief research officer, who serves as program director with Barbara Bregman, PhD, professor of Neuroscience and Rehabilitation Medicine.

The MedStar NRH/Georgetown program, named the Neurorehabilitation and Restorative Neuroscience Training Network (NRNTN), also includes an executive committee made up of some of the nation’s most successful investigators with a track record of interdisciplinary research training. “We’re creating a community of scholars and mentors focused on approaching these diseases and injuries from many angles,” Dr. Dromerick adds.

In addition to the coordinating sites of Georgetown University and MedStar National Rehabilitation Hospital, NRNTN includes these additional sites: John Hopkins/Kennedy Krieger Institute; Harvard University Massachusetts General Hospital Institute of Health Professions; Massachusetts Institute of Technology; University of Maryland/Kernan; and Cornell/Burke Rehabilitation Hospitals.

The program has three major goals:

1. To provide outstanding research training and mentorship for clinical scholars in neurorehabilitation
2. To create a community of scholars
3. To prepare rehabilitation clinician investigators for sustained and productive academic careers in neurorehabilitation

**Career Development and Networking**

“The program provides more than money,” says Dr. Bregman. “These young faculty members will have access to a nationally respected group of mentors and other scholars—an environment that encourages an exchange of ideas among clinicians and researchers from across the U.S. and across disciplines, from basic science to clinical trials.”

Grantees and mentors will meet at least twice a year, once at the American Society of Neurorehabilitation and another spring meeting held at a major institution. “As the network grows, the meetings will become a fertile ground for a cadre of hundreds of scientists—and a way to jump-start new interventions for neurorehabilitation,” says Dr. Dromerick.

Grantees are required to have a faculty appointment and be supported by a strong institutional commitment to neurorehabilitation. Four awards will be made in the first round of funding for two years of support. The grantees may come from any institution in the country—and from any discipline as long as the research is focused on disabling neurological conditions.

“The program will ultimately help set the stage for the translation of basic and clinical research into a better understanding of the recovery of function after central nervous system injury,” says Dr. Dromerick. “The bottom line is to improve the quality of life of individuals with neurological injury and disease.”
Injured Firefighter Heads Home

When he first arrived at MedStar NRH, Dane Smothers, Jr., wasn’t sure he would ever walk again. It was touch and go for the D.C. firefighter, who was critically injured at the scene of a house fire last year. During the first 48 hours in intensive care at MedStar Washington Hospital Center, the medical team worked minute to minute to try and keep him alive.

But he proved his mettle. “Life was not easy for him when he first came to MedStar NRH, but he really progressed much more quickly than any of us could have expected,” said Erika Gosai, MD, Spinal Cord Injury Physician and Rehabilitation Specialist. “He is a remarkable young man and has shown really, truly a strong healing capability.”

The day “DJ” left MedStar NRH, he was surrounded by his colleagues from the D.C. Fire Department and many of those who cared for him when he vowed to return to work fighting fires in the District one day. “I want to thank the nurses and doctors and the trauma team; everyone who cared for me,” he said. “I have never really been scared away from a challenge. I'm not scared to run into a burning building. And I’m still not afraid of a challenge.”

D.C. Firefighter Dane Smothers, Jr., bids farewell to MedStar NRH Team Members at a press conference.