



January 23, 2023

Chair Blouin, Vice-Chair Robinson and members of the committee,

Thank you for giving this important bill an early hearing.

My name is Jayesh Palshikar, I am a registered nurse, working in the intensive care unit, and I am speaking today on behalf of Oregon Nurses Association, but I am also a traumatic brain injury survivor. My story is three years ago I went for a bicycle ride, and woke up in the back of an ambulance. I have no memory of the crash. I got out of the hospital and went almost immediately back to work. I had problems using the computer, tracking simple tasks and remembering things that I had been told. So I went out on medical leave and had a very frustrating experience trying to figure out how to navigate a system made of medical and insurance companies that is difficult to navigate in the best of times, but in order to get the care I needed to restore brain function, I had to use that injured brain to unravel this Byzantine process and sort out the conflicting messages I was receiving. Thankfully I was able to get help not only from my doctor, but also from a local nonprofit. It was not easy, and I almost lost my job at the hospital, but with support I was able to get the care I needed and return to work.

Unfortunately, my case is not unique, and many people do not find the resources they need to recover without turning their lives upside down.

The heartbreaking truth is that in Oregon we actually have excellent medical resources available. We have programs that support patients and families of brain injury survivors, whether they are athletes, military veterans, survivors of intimate partner violence or people like me who had an accident while riding a bicycle. But when we need them most is when our brains are freshly injured, and we need help navigating the system to allow for the highest level of rehabilitation possible.

As a nurse, I am science based professional, and the science is very clear, that the most effective rehabilitation is provided by an interdisciplinary team, however patients and caregivers are often not given the information they need to be functional and plan for after-hospital life even when information is available. Research also shows that medical followup with brain injury survivors is poor.

This is why Oregon needs a brain injury navigator program. Oregon is one of only eleven states without such a program, a program that helps make sure the healthcare team has a warm hand-off and is aware of the resources available, as well as follows up to make sure that physicians, nurses, caregivers and patients have the tools they need to return Oregonians to their highest state of independence. And that is what Oregon Nurses Association is here for: to advocate for patients throughout Oregon's healthcare systems.

On behalf of Oregon Nurses Association, I urge your support for Senate Bill 420.

Supporting Data

Cronberg, Tobias, et al. “Brain Injury after Cardiac Arrest: From Prognostication of Comatose Patients to Rehabilitation.” *The Lancet Neurology*, vol. 19, no. 7, 2020, pp. 611–622., [https://doi.org/10.1016/s1474-4422\(20\)30117-4](https://doi.org/10.1016/s1474-4422(20)30117-4).

- Symptoms of TBI after arrest include cognitive impairments, emotional problems and fatigue
- Symptoms increase caregiver burden
- Patients are often not assessed or provided with adequate information for rehabilitation

Haag, Halina (Lin), et al. “Battered and Brain Injured: Traumatic Brain Injury among Women Survivors of Intimate Partner Violence—a Scoping Review.” *Trauma, Violence, & Abuse*, vol. 23, no. 4, 2019, pp. 1270–1287., <https://doi.org/10.1177/1524838019850623>.

- Frontline professionals need further education on signs and symptoms of TBI in IPV settings
- Studies are needed on the needs of brain injured survivors of IPV, especially in IPV settings
- Importance of an interprofessional approach to care

Nelson, Lindsay D., et al. “Recovery after Mild Traumatic Brain Injury in Patients Presenting to US Level I Trauma Centers.” *JAMA Neurology*, vol. 76, no. 9, 2019, p. 1049., <https://doi.org/10.1001/jamaneurol.2019.1313>.

- Many patients with TBI experience difficulties at 12 months post injury
- Better followup and treatment are needed

Wyse, Jessica J., et al. “Employment and Vocational Rehabilitation Experiences among Veterans with Polytrauma/Traumatic Brain Injury History.” *Psychological Services*, vol. 17, no. 1, 2020, pp. 65–74., <https://doi.org/10.1037/ser0000283>.

- Veterans with TBI have unique difficulties accessing and navigating the VA system
- Identified difficulties include physical, emotional, cognitive and interpersonal sequelae