I Have A What?!
A Guide for Coping with Mild TBI

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Modified version of the “What’s Mild about this?” manual
by Margaret A. Struchen & Tresa M. Roebuck

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If you are reading this manual, you have had what doctors would call a **mild traumatic brain injury (TBI)**.

This manual provides some information about this kind of injury. It tells you about what you can expect as you recover. This manual tells you about some of the problems (or symptoms) that people sometimes have after this kind of injury. These symptoms are **common** after a mild traumatic brain injury. They are considered part of the **normal** recovery pattern. You may experience **none** of these symptoms, **some** of these symptoms, or **all** of these symptoms after your injury. For most people, these symptoms will go away or get better in the first few days, weeks, and months after the injury. Knowing what to expect after a mild traumatic brain injury can be helpful. This manual gives you lots of tools to help you deal with some problems you might have. Information about where to go for help is also included.

Jason Ferguson, a TBI survivor, was asked to assist in the development of this manual. We hope his experiences, suggestions, and words of encouragement will be a powerful educational tool. We anticipate that this information will be helpful and useful throughout your recovery.
I had a minor bump on my head, I am sure I will be O.K.,

Now, I am having a hard time remembering what

I was doing the other day.

That is better and I hear it will steadily improve,

Now it is the issue with the swings in my mood.

I used to not be depressed but some days

all I want to do is cry,

I found out too that this is called a TBI.

A traumatic brain injury, at least it is not as bad as it could be,

It is a mild one

but I still have things that will be short-term.

There is so much that I still have to learn.

I had a mild TBI, it hurts, was confusing

but I am O.K.,

It’s getting better day-by-day-by-day.

What a way to learn something new,

I have to advocate now so people may try to prevent themselves

from going through what I went through.
TABLE OF CONTENTS

I.  What is a head injury? .......................................................... 1
II. What is a traumatic brain injury (TBI)? ................................. 2
III. How does injury to the brain happen? ................................. 2
IV.  Why is my brain important? ................................................. 4
V.  How serious was my injury? .................................................. 5
   Mild traumatic brain injury .................................................. 7
   Moderate-to-severe traumatic brain injury ............................ 7
   What about my injury? ....................................................... 9
   Poem: Mild ......................................................................... 10
   Insights: From One Survivor to Another .................................. 11
VI.  What problems may I have after a mild TBI? What can I do? 12
   Insights: Common Problems ............................................... 13
   Physical problems ................................................................ 14
   Thinking/Cognitive problems .............................................. 19
   Emotional/Behavioral problems ......................................... 25
VII. How long will my symptoms last? ...................................... 35
   Tips for helping your recovery ............................................. 36
   Insights: Recovery Tips from One Survivor to Another .......... 37
   Insights: Coping Strategies from One Survivor to Another .... 38
VIII. When should I seek medical help? ..................................... 39
IX.   Common Misconceptions ................................................... 40
X.    Where can I go to get help? ................................................ 43

EXTRA INFORMATION

A. Ways to help you relax ....................................................... 53
B. Ways to change your thinking ........................................... 59
C. How do I apply for a Gold Card? ...................................... 64
   Poem: God Moment .......................................................... 67
I. What is a head injury?

A head injury happens when a person’s head is hit by something. Many things can cause a head injury. For example, a car accident, a fight, a fall, or other events can cause a head injury.

◊ Most of the time, a head injury does not cause lasting problems. This is because the brain is well protected. The brain is surrounded by fluid. This fluid protects and nourishes the brain. There are also several coverings around the brain. These coverings include the hair, the scalp, and the skull. Layers of tissue, called meninges, cover the brain. These protective layers will often keep the brain from getting hurt. Often, a bruise, swelling of the scalp or a cut to the scalp may be the only injury.

◊ Sometimes the force of the hit to the head is greater. The skull is like a “helmet” that protects the brain. The skull can fracture or break. When the skull breaks, it lessens the force of the hit. This may help keep the brain from getting hurt. However, the brain may be injured whether the skull breaks or not.

◊ Sometimes the head injury can affect the way the brain works. Doctors call this kind of injury a “traumatic brain injury.”
II. What is a traumatic brain injury (TBI)?

A traumatic brain injury (TBI) occurs when a head injury causes problems with the way the brain normally works. These problems can be small or large. They can also be short-term or more long-lasting. The brain can get hurt even if the skull is not broken. Sometimes you will hear a TBI called a “concussion.” The term traumatic brain injury is used today, since this better describes what has happened.

After a TBI, some people are “knocked out” or lose consciousness. This can be for a short time (seconds to minutes) or for a much longer time (days to weeks). Some people who have a mild TBI do not lose consciousness at all. Instead, they may feel dazed, confused, or “out of it” for a period of time.

III. How does injury to the brain happen?

Injury to the brain can happen in many different ways. There are two main types of traumatic brain injury (TBI): Closed TBI or Open TBI.

◊ Closed TBI happens when the brain is hurt without anything (like a knife, a bullet, or other object) going through the skull. There are many ways that the brain can be injured in a closed TBI.

✦ Bruising: When the head is hit, the brain can shake around inside the skull. Think of the brain being like jello in a bowl. If you shake the bowl quickly and then stop it, the jello bounces around against the inside of the bowl. Just like the jello, the brain can bounce and hit against the inside of the skull. When this happens, the brain can get a bruise.

✦ Tearing or stretching of nerve cells: When the brain is shaken inside the
skull, other injuries can happen. The brain is made of thousands of nerve cells. Each nerve cell has long and thin fibers. These fibers are very small and cannot be seen by the human eye. Some of these nerve fibers can be stretched or broken when the brain is shaken. If many of these fibers are damaged, the injury can sometimes be seen with special tests, like a CT scan or MRI scan. A CT scan or MRI scan gives the doctor a picture of the brain.

- **Bleeding:** The brain has many blood vessels in it. These are called arteries and veins. If the head is hit hard, the blood vessels can tear and bleed. Bleeding will show up on tests, like a CT scan or MRI scan. If there is only a little bleeding, it will usually stop on its own. The blood vessels will heal, just like any cut on your body heals. If the bleeding is really bad, the doctors recommend treatment, like surgery, to remove the blood.

- **Swelling:** Sometimes extra fluid will build up near the hurt part of the brain. This causes swelling. Think of what happens when you hit your arm on something. You may see bruising and swelling in the injured area. This is because the body sends extra fluid to the hurt body part. This is to protect it and help with healing. This same thing can happen to the hurt part of the brain.

- **Open TBI** happens when something goes through the skull and hurts the brain. Things like a gunshot wound to the head, a stab wound, or a severe skull fracture can cause an open TBI.

  - In an open TBI, most of the damage happens to the part of the brain that was cut or bruised by the object going into the skull.
  
  - Bruising, bleeding, or swelling can hurt other parts of the brain too.
“If I only had a brain,” sang the scarecrow in The Wizard of Oz. Your brain controls many of your abilities and emotions. The brain controls abilities such as walking, seeing, remembering, and talking. Emotions such as being happy, sad, or upset are also controlled by the brain. The brain has many parts that make up many systems. Different systems control different abilities and emotions. For example, some systems may be important for joy, while others control breathing. Your brain allows you to do many things that are often taken for granted in our lives.

Excerpt from The Wizard of Oz song “If I only had a brain…”

If I only had a brain...

Oh, I would tell you why
The ocean's near the shore
I could think of things I never thunk before
And then I'd sit and think some more

I would not be just a nuffin’
My head all full of stuffin’
My heart all full of pain
I would dance and be merry
Life would be a ding-a-derry
If I only had a brain

V. How serious was my injury?

Every brain injury is different. How bad the injury is can be related to many different things. These things include how much force was involved, how hard the head was struck, how heavy the object was that struck the head, and how fast the head or object was moving at the time of injury.

The medical team tries to find out how bad the injury has been. Knowing how bad the injury is helps with planning treatment. After an injury, the medical team looks at several things:

◊ One thing that the medical team looks at is called **loss of consciousness**. Sometimes after a brain injury, you might get “knocked out” or lose consciousness. The longer that you are “out,” the worse your injury.

◊ Although a person with a mild TBI may be “knocked out,” it is usually brief. Most healthcare professionals would agree that for a TBI to be considered “mild,” loss of consciousness must be 30 minutes or less. However, some people who have a mild TBI do not lose consciousness at all.

◊ When an injury is severe, a person may be in coma. A coma is similar to being “knocked out” but lasts longer. Persons in a coma may not be aware of their surroundings. They may not be able to respond to pain, voices, or light. When a person wakes up from a coma, they usually cannot recognize or speak to others right away. Remember that this experience is different from that experienced by a person with a mild injury.

◊ An injury can also be judged by looking at what is called **post-traumatic amnesia**. People may be temporarily confused after a TBI. They may not know where they are for minutes, hours, or even days. During this time, people may be
unable to make new memories. They may not remember this period of time later. This may be why you do not remember the events right after your injury. This period of time is called “post-traumatic amnesia.” In general, the longer the person is confused and not remembering information, the worse the injury. Generally, post-traumatic amnesia is considered to mean a mild injury if it lasts less than 24 hours. In addition, there is another type of amnesia that may occur due to a TBI. It causes people to be unable to remember the events right before their injury. This is called retrograde amnesia.

◊ The Glasgow Coma Scale (Teasdale & Jennett, 1974) or “GCS” is a tool that measures how bad an injury has been. It is often used in hospitals. It is a way to measure how a person responds to their environment. The GCS looks at three things: eye opening (do you open your eyes when you want to?), motor responses (do you move when asked?), and verbal responses (can you tell the doctors where you are?). The GCS score can range from 3 to 15. Higher GCS score means less severe injuries. People with scores between 13 and 15 are considered to have a “mild” TBI.

♦ If you are taken to the hospital by ambulance, the medical team usually completes this scale right after your injury. Also, it is completed when you go to the emergency room. If you are in the hospital after your injury, the GCS will usually be conducted several times to measure how you are doing.

Based on information obtained from these measures and from results of medical testing, like a CT scan or MRI of the head, the injury is classified as one of the following:

♦ **Uncomplicated Mild**
♦ **Complicated Mild**
♦ **Moderate**
♦ **Severe**
Mild TBI

A person with a mild TBI will have a loss of consciousness for 30 minutes or less. GCS scores at the time of injury range from 13 to 15. This means that the person can talk, can follow commands, and can open their eyes when asked. Another name for a mild traumatic brain injury is a “concussion.”

Sometimes, the GCS score can be lower at first. This low score may be due to things other than the brain injury. If medication, alcohol, or drugs are used before or after the injury, the GCS score can be lowered. However, if the person quickly begins scoring in the “mild” range after the effects of the medications or alcohol have worn off, the injury would be considered “mild.” Again, post-traumatic amnesia that lasts less than 24 hours is considered to mean a mild injury.

◊ UNCOMPLICATED MILD TBI:

An injury is called “uncomplicated” if the person has a mild TBI and there are NO problems seen on CT scan or MRI of the brain.

◊ COMPLICATED MILD TBI:

An injury is called “complicated” if the person has a mild TBI and there are problems seen on a CT scan or MRI of the brain. Problems such as bruising of the brain or a collection of blood in the brain may be seen with a CT scan or MRI. When this occurs, the injury is called a “complicated” mild TBI.

Moderate-to-Severe TBI

GCS scores at the time of injury are lower than in mild TBI. Someone with this level of injury may or may not be able to open their eyes, move on their own, talk, or respond to things or people around them. People with this severe of an injury
may have had loss of consciousness anywhere from 30 minutes to as long as several days or weeks. They may have post-traumatic amnesia or not remember new information for many days or weeks after they had their TBI. Also, they may not remember days or even weeks that occurred before they had their TBI, which is called retrograde amnesia. These patients will usually take longer to recover from their TBI than patients with a mild TBI. In some cases, some symptoms may be permanent. Treatment at a rehabilitation hospital is usually recommended and can help recovery.
If you are reading this manual, you have had what doctors would call a **mild traumatic brain injury**. If a CT scan or MRI of your head showed some problems, your injury would be called a “**complicated**” mild TBI. If no problems were seen on the CT scan or MRI, your injury would be called an “**uncomplicated**” mild TBI.

If you have had a mild TBI, you may not remember the events right before or after the accident. You may have **physical** problems. These can be things like headaches, vomiting, dizziness, ringing in the ears, blurred vision, and loss of taste or smell. You may have problems with your **thinking** abilities. These can be things like trouble paying attention, concentrating, and remembering things. You may also see changes in your **emotions or behaviors**. You might find that you are sadder, more worried, or get angry more quickly.
It’s just a bump can’t you see.

I did not know it is still considered a brain injury.

Will I be ok? I still get dizzy sometimes, is that all right?

I thought it was because of my diet.

It happened two months ago.

Am I just recovering too slow?

I have been having trouble trying to concentrate?

And come to think about it, I am a little easier to irritate.

I hope this does dissipate,

I don’t know how much more of this I can take,

Oh, I see it is not that bad and I will be ok,

It could be worse but I am here today,

Thank you for helping me see,

That what I have is still a mild traumatic brain injury.
After a brain injury, life does change. When I had my accident I was reported dead on TV, spent three weeks in a coma, was told I would never walk or talk again and that I would always be under twenty-four hour supervision. Well, thank God they were wrong.

Headaches have become something I have come to know all too well. Some are dull and others are grinding. Sometimes headaches can ruin a person’s whole day. There are medications that can help but sometimes it may be because you are dehydrated or something else. Your doctor is the best person to ask about this.

My thought process was slowed down and I used to refer to myself as being “simple-minded.” Everything was making sense in my head but I just couldn’t get the words to come out right or my body to move how I wanted it to move. It takes time and a lot of work to better your recovery but you have to keep on keeping on.

Sometimes I think back about some of the ways I felt and acted. It was a totally different me. My world was turned upside down, flipped around and set into a constant spin. I could not tell the difference between what was real and what was not real. I was scared, confused about whether I was going to get better, angry that I hurt my friends and family, hurt both physically and mentally, and happy to be alive all at the same time. I was not being lazy and it was not that I did not want to get better; I was scared and out of sorts. If people look at it this way instead of thinking that the survivor is just being stubborn, things would be a lot different.

The way I see recovery is that the doctors, therapists or your loved ones can all show and tell you how to do things, but only you and God can make it happen. This really has been an eye-opening experience for me. I try to return a scraping of my blessing by trying to help others not go through what I did. Have a great day and never give up on trying!
VI. What problems may I have after a mild TBI? What can I do?

◊ Many people have problems in the days and weeks after a mild TBI. Some of these problems or “symptoms” can be: forgetting things, having headaches, getting easily upset, having outbursts, or feeling tired.

◊ After having a mild TBI, some people have only one symptom; some people might have a few or many symptoms; and some people might not have any symptoms at all.

◊ Sometimes people may not notice symptoms right away. They can take days or weeks to appear. Sometimes people do not notice these problems until they try to go back to work, school, or their normal housework. Everyone is different.

◊ It is important to know that these symptoms are NORMAL after a mild TBI. These symptoms are part of the normal recovery process.

◊ These symptoms tend to get better over time. Usually, you will not need any special kinds of medical treatment to get better.

This manual describes some of the most common symptoms that people have after a mild TBI. It also describes what you can do to help these symptoms. These symptoms can be divided into three types:

♦ Physical problems (those that have to do with your body)
♦ Thinking/cognitive problems
♦ Emotional/behavioral problems
Common Problems

by Jason Ferguson

Some of the problems that occur after brain injury are very common but do not necessarily affect all. One of the most common is a headache. For me, I had some at first (of course) and then I did not have them for a long time. I thought to myself “Ha! I got past that one,” but I still have them. Sometimes they are mild and at other times they are terrible.

Fatigue is something that usually gets all of us. This is very common because your body is trying to heal. It takes a lot of time and rest for this to happen. Just because you are tired and sleep a lot does not mean that you are being lazy or that something is wrong. When I first was released from the hospital, I would take two or three long naps a day. My sleep was all off. I could not just hop back on a schedule and stay up all day. Listen to your body, it knows when to shut down.

Another common problem is poor attention and concentration. Simple tasks such as reading a short story can be a difficult task. At first, I could not get past the first sentence of a paragraph because I would get distracted by something else in the room. If there was a TV on in another room or if the cat walked by, I would lose concentration and be off on another rabbit trail. It is still hard for me to try and hold a conversation sometimes with other things going on around me. It is better now, but still there. We all get distracted but after a TBI it may become harder to focus on just one thing when there are numerous other things going on around you. These are just a couple of common issues that happen sometimes. Not everyone will experience the same problems or to the same severity. But, hang in there because they do get better.
Headaches

You may notice headaches after your injury. These are called post-concussive or post-traumatic headaches. The pain you feel may be constant, or may come and go over time. Pain can vary from mild to severe. Headaches are a common problem after a mild TBI. They often go away after a few weeks. Sometimes, though, headaches can be a more long-lasting problem.

Two types of headaches can happen after a brain injury: tension headaches and vascular headaches.

- **Tension headaches**: These headaches are the most common. They happen when you are under stress. They may also happen when the muscles in your neck, shoulders, or jaw are tight. When this happens, pain can move to your head. Tension headaches feel like a dull, steady pain. These types of headaches can last for a long time, but they do not have to be a long-lasting problem. Relaxing helps to get rid of tension headaches.

- **Vascular headaches**: These kinds of headaches are sometimes called migraine headaches. They happen because of problems with the blood vessels around your brain. These kinds of headaches often include throbbing pain. This pain can be on one side or both sides of your head. You may also have other problems, like feeling sick to your stomach. Many people find that bright lights and loud noises make a vascular headache feel worse. Migraine or vascular headaches may last only a short time or may last for many hours.
What can I do?

✓ **Discuss your headaches with your doctor.** This may help if there is a cause for the headaches that can be treated with medication. If you are taking medications, be sure to take them as prescribed.

✓ **Look for triggers** or situations in your everyday life that may lead to headaches. Sometimes stress can cause headaches.

✓ **Try some form of relaxation exercise.** This can include things like: taking several slow, regular, deep breaths; tensing and relaxing your muscles; or imagining yourself in a special place that you find relaxing (for example, a beach). Some ways to help you relax are included in the back of this manual in Part A on page 53.

✓ **Massage your head and neck.** It may help to massage where it is sore or put a warm towel or pad on your head and neck.

✓ **Pace yourself** – Do not try to do too much at one time. You may need to take regular rest breaks.

✓ **Limit or avoid loud places.** Loud noises can cause headaches, fatigue, and irritability. If you notice changes in your mood or begin to have headaches, make a note of your feelings and decide if you should continue going to loud places. If you do plan to go to noisy events, you may want to limit the amount of time you spend there.

**Fatigue/Feeling Tired**

The most noticeable problem that you may have after your injury is fatigue. Everyone feels tired or fatigued sometimes. After a mild TBI, it is normal to feel more tired than usual. When you are tired, you cannot do things as well. You are more likely to be
stressed, and may notice more problems such as headaches, dizziness, poor concentration, and irritability.

Problems with fatigue will likely get better over time. You will need more sleep than you did before so that your body and brain can heal. When you do not get the extra sleep you need, your body and mind may feel very tired. You may not have the same amount of energy as you did before your injury.

What can I do?

✓ **Get enough rest** at night.

✓ **Give yourself extra time** to rest between jobs or activities.

✓ **Schedule fewer and shorter activities at first. Then slowly increase activity** levels as you gain strength and energy.

✓ **Schedule regular rest breaks** or daytime naps if you need them.

✓ **Slow down and pace yourself**: If your symptoms are getting worse, you may be pushing yourself too hard.

✓ **Talk with your physician** to see whether treatment is needed if you are having trouble with sleeping at night.

**Dizziness**

Some people may feel dizzy after a TBI. An injury to the head can change how the inner ear works. Problems with the inner ear or its connections to the brain can cause dizziness. You may also notice a loss of balance, nausea, ringing in the ears, or headaches.
Problems with dizziness are common after a mild TBI. In most patients, these problems usually go away in 3-6 months or less. If you are having problems with dizziness, it is best to discuss this with your doctor.

What can I do?

✔ **Talk to your doctor** if these symptoms are unbearable or last for longer than a few months. You may need to be referred to an ear, nose, and throat doctor for testing.

✔ **Specialized physical therapy** for these problems may be helpful.

**Blurred or double vision**

Sometimes people have changes in their vision after a brain injury. Sometimes your vision may be blurred or you may see double. You may notice that your eyes get tired more easily. You need to rest them more. These problems usually go away within 3-6 months. If they last longer, you may need to be treated by a doctor.

What can I do?

✔ **Talk with your doctor.** Sometimes you may need to be referred to a doctor who specializes in visual problems after brain injury. Sometimes the changes in your vision will require changing the prescription for glasses. Often, you will be told to wait for a few months. This is because visual problems tend to improve over the first 6 months after injury.

✔ **Pacing yourself and taking rest breaks** may help reduce this problem. Many people find that the blurriness increases with fatigue.
Sensitivity to noise and/or light

You may notice that bright lights or loud noises bother you. This may happen more if you are also having headaches. Being more bothered by light and noise is normal after a brain injury. Paying too much attention to this can make things worse. Planning ahead can help you reduce how much light and noise you are around. Thinking less about these symptoms will also seem to make them go away quicker. This will also make the symptoms interfere less with your day-to-day activities. Sensitivity to noise and light should go away over a few months after your injury.

What can I do?

✓ **Limit yourself to smaller gatherings and events** at first. As you feel better, slowly build up to attending large social events (like loud parties, carnivals, sports events, etc.).

✓ **Limit the time you spend at events**. If you have to attend an event with lots of noise and light, you may want to limit your time at the event. Try to find a quiet area or room to go to at the event.

✓ **Shift your attention to other things**. Focus on a hobby or a conversation to take your mind off the problem. You may find that the problems may get better or go away.
After a mild TBI, many people complain that they cannot think as well as they did before. There are several different types of problems that you may notice with your thinking. The different kinds of thinking problems are listed below. There are also several ideas you can try to deal with these problems.

**Poor attention/concentration**

Problems with concentration are common after a mild TBI. **Concentration** is your ability to pay attention to things so that you can remember them later. After a mild TBI, you may find that you have a hard time paying attention to things. You may be distracted easily. If you are getting distracted, it may take you more time to do things. If you do not pay careful attention to something, you may have more problems remembering the information later.

Concentration and attention problems are normal after a mild TBI. Having these problems does not mean that you are “going crazy.” Nor does it mean that something terrible is wrong with you. For most people, problems with attention get better over time. There are many things that you can do to help attention and concentration problems get better.

**What can I do?**

- **Be sure to get enough sleep at night.** *Take regular rest breaks during the day.* One of the main causes of poor concentration is fatigue or tiredness. When it becomes hard to concentrate, take a short break and relax. Between 15 – 30 minutes should be enough time for a break, but you can adjust these times to fit your needs.

- **Gradually increase your activities.** You may need to shorten your
workday or daily routine temporarily. If you are a student, this may mean reducing the number of classes you are taking. If you try to force yourself to follow your regular schedule before you are ready, you can make the problem worse. As you feel better, gradually go back to your normal routine.

✓ **Try to reduce the distractions around you.** Turn the radio down or off in your work setting. Try to work where it is quiet. If you can, close the office door or move to a quieter area of your workplace.

✓ **Try to do only one thing at a time.** Typing on your computer while you are talking on the phone, or reading while a co-worker is talking to you are examples of doing two things at the same time. It may be hard for you to concentrate on more than one thing at a time. Finish the phone call, and then return to your computer task. Listen to your co-worker and then return to reading. By focusing on only one thing at a time, you will make fewer errors and remember more information.

✓ **Keep things organized.** Keep your home/office/workplace free of clutter. You might be more easily distracted by things like magazines, other work tasks, etc. Try to keep your work area organized. This can help you pay better attention to the task.

✓ **Ask people to slow down in conversation** if you are having trouble keeping up with the pace.

**Memory problems**

Many different things can cause memory problems after a mild TBI. Sometimes memory problems occur because a part of the brain that is important for storing new memories has been bruised. This part of the brain, called the temporal lobe, is an area that may be injured in a brain injury. These bruises on your brain usually get better over time.
If memory problems are due to bruising of the brain, your memory will most likely improve as your brain heals. Most of the memory problems that people have after a mild TBI are not because of bruising. After a mild TBI, **memory problems are usually due to problems with attention and concentration.** If you cannot concentrate on something, it will not get stored in your memory.

You will probably be able to concentrate and remember things better when you get enough rest. Concentration and memory are also better when you pace yourself in your day-to-day activities. If you believe that you are forgetful and are having problems with your memory, it may be a sign that you are pushing yourself too hard. **Pacing yourself, getting rest, and gradually increasing your activities may reduce memory problems.**

**Remember that nobody has a perfect memory!** Keep in mind that you probably had trouble remembering some things before your accident too. When we forget things, it may be easy to blame it on the mild TBI. Remember, you may have had times when you forgot the same type of information **before** your mild TBI. For example, most people without a brain injury often forget things like phone numbers, people’s names, and where they parked their car.

**Paying too much attention to these memory problems can make them seem worse.** If you become upset every time you are forgetful, you may begin feeling anxious or worried. Worry and anxiety can make it harder for you to concentrate and to remember information. Most problems with memory will get better over the first few months after your injury. There are many things that you can do to limit the impact of memory problems on your daily life.

**What can I do?**

**Use some of the following ITEMS to help you remember information:**

- **Calendars** – Keep a calendar in your home to remind yourself and others of appointments and important events (school play, family party, and birthdays).
✓ **“To Do” lists** – Keep a list of important things to do for each day. Post this list of important reminders in a location where you will see it often (for example, inside the front door, on the refrigerator, in your daily planner, or on the bathroom mirror).

✓ **Pillboxes** – Use special pillboxes from the drugstore that sort your medicines and vitamins by day or time of day. This will help you remember when to take them. It will also help you keep track of whether you have taken your medications or not. Be sure to take your medicine as prescribed.

✓ **Alarms** – Use alarms to remind you when you need to do something important. For example, you can set an alarm to remind you to take your medicine, pick up your children, or take something out of the oven. You can use an alarm clock, a wristwatch alarm, or kitchen timer.

✓ **Notebooks/day planners** – Use a notebook or daily planner to keep track of routines for home, work, or school. These notebooks come in all shapes and sizes. You can even use an electronic organizer or handheld computer. Whichever type of planner you use can be organized to fit your needs. Here’s a list of things that people can keep track of in their memory notebooks:

- Calendar for appointments and important dates
- “To Do” list
- Journal
- Telephone numbers, addresses, birthdays
Try the following STRATEGIES to help you remember information:

- **Stay focused** - When you are working on something important, do only one thing at a time. Try not to let people or other things interrupt you from something you are working on. If someone needs you, let that person know that you need to finish what you are working on first.

- **Keep important things in the same place** - Keep important things in one place and always in the same place. For example, keep all the things you need when you leave the house on a table next to your door.

- **Get enough rest** - After a brain injury, you may need more sleep than you used to, especially early in your recovery. If you try to sleep the same amount (or less) than you did before, you may feel tired all day. Feeling tired can cause problems with your attention and memory. It can make memory problems that you have seem even worse.

- **Pace yourself / Keep your stress level down** - Do not jump back into things (like home chores, work, etc.) too quickly. It is important to take things slowly so that you give yourself time to heal. Jumping back into things too soon may make your memory and attention problems seem worse. This may make you feel stressed or unhappy.

**Organization and problem solving difficulty**

Problem solving is a part of everyday life. After a mild TBI, some people have trouble solving problems they come across everyday. You may have trouble getting organized when you are stressed. You may find that it is harder to make decisions.

As was discussed before, problems with concentration and attention are also common after a mild TBI. This can make solving problems and organizing your life more difficult.
Fatigue can also make it harder to focus on problems or demanding situations. After a mild TBI, you may find that it is hard to get started on a task. Or you may have trouble following through with things and “getting the job done.”

Having some difficulty with problem solving is a normal symptom after a mild TBI. Like the other symptoms you have read about, this tends to get better over time. Listed below are some ways to help your problem solving skills.

**What can I do?**

- **Think about things before you act.** Take your time to think through what you need to do before acting. Planning ahead can improve your overall ability to get things done.

- **Limit the number of problems** that you are trying to solve at one time. Figure out what problem is the most important. Tackle that one first. It may be helpful to list problems you have to deal with on paper to help you get organized.

- **Set small goals** that are easy to reach. Avoid taking on too many tasks at once. Setting reasonable goals will leave you feeling less tired and more satisfied.

- **Break tasks into smaller pieces.** Use a “To Do” list to break down a task into parts. Check off each task as you finish it. This will help you keep organized and will reduce problems with forgetfulness.

- **Take breaks when tired.** When you get tired, it will be harder to think through problems and come up with ways to solve them. After a mild TBI, you are likely to become tired more often. You will think more clearly if you are not tired.

- **Ask for feedback** from someone you trust.
After a mild brain injury, it is common to face a number of everyday problems. These may include changes in the way you think and feel. The injury may have caused changes in your work and family roles. For example, you may have to take some time off work or start a new job. You may have to let friends and family help with things that you used to do alone. Changes like these may cause you to feel stressed, upset, and frustrated. Not everyone has these reactions, but these feelings are common following a mild TBI. Such feelings are normal and are expected when you face any big changes or problems in your life. However, they may be worse after a mild TBI.

Having a mild brain injury can change the way you feel and react to the world. You may notice that you react to situations differently. It may seem harder to control your emotions. For some people, changes in feelings and behaviors can happen because of injury to the part of your brain that helps you to control behaviors and emotions. These types of changes are most noticeable early on after a mild TBI. They tend to get better slowly with time. Other changes in feelings and behaviors can be due to how you react to the changes in your life following an injury.

The next few sections will help you to understand the changes in feelings and behaviors that can happen after an injury. Also included are ways to help you deal with these feelings.

**Stress**

Stress is the body’s normal reaction to difficult situations in our lives. These difficult situations can range from losing a job to not being able to pay your bills. Having an
An accident that results in a mild TBI is one type of stressor. Other changes that may happen after having an injury can also be stressful. Having to take time off from work, needing to go to doctor’s appointments, and so forth may be stressful.

When we are faced with problems or dangerous situations, our bodies try to help us deal with those problems. Physically, our bodies react by increasing our heart rate and blood pressure. Our blood vessels get smaller. When you are stressed, you may notice that your hands become sweaty or your skin feels cold. You may feel very anxious and worried. This is our body’s way of getting ready for quick action. Our bodies do this so that we are able to do something right away (fight) or escape from something bad (flight).

However, there are many situations from which we cannot escape. For example, when a loved one is sick or you are having problems at work, there may not be a way to change this situation right away. When stress continues for a long time, it can be a big problem. As long as you think there are problems in your life, your body remains stressed and aroused. This constant state of arousal can lead to problems with your health and happiness. It can also make it more difficult to recover from your injury.

There are several things you can do to help reduce stress. The first step, however, is being able to notice the signs of stress.

<table>
<thead>
<tr>
<th>Signs of stress:</th>
</tr>
</thead>
<tbody>
<tr>
<td>◇ Feeling tired all the time</td>
</tr>
<tr>
<td>◇ Trouble sleeping</td>
</tr>
<tr>
<td>◇ Felling overwhelmed, even with small tasks</td>
</tr>
<tr>
<td>◇ Difficulty concentrating</td>
</tr>
<tr>
<td>◇ Tension headaches</td>
</tr>
<tr>
<td>◇ Stomach aches and other bodily aches</td>
</tr>
<tr>
<td>◇ Muscle tension (sore back, shoulders)</td>
</tr>
<tr>
<td>◇ Weight gain/loss</td>
</tr>
</tbody>
</table>
**MYTH:** “So what if I drink alcohol! It won’t affect me after my brain injury.”

**FACT:** Alcohol can have an effect on a person after a brain injury. Alcohol can affect the recovery process. It can also make any problems you can have with balance, memory, and speech seem worse. In addition, drinking alcohol increases the chance of having another brain injury. It is important to remember that alcohol includes beer, wine, wine coolers, and liquors. Alcohol should never be taken with medications, especially anti-depressants and anti-seizure medications.

**MYTH:** “Persons with brain injury have a hard time remembering past events.”

**FACT:** People with brain injury usually have pretty good recall of information from their own past. Rarely, someone with brain injury will have difficulty with remembering such information. Most memory problems have to do with memory of day-to-day events. Also, it is common for persons with brain injury to have a period of time around the injury that they may not remember.

**MYTH:** “I had a brain injury once, I won’t have another one.”

**FACT:** After having a brain injury, you are more likely to have another. This risk for additional injuries goes up with the number of injuries a person experiences. That is, someone with 3 injuries is at a greater risk for another brain injury than is someone with 2 injuries. People have a harder time recovering from a second or third injury than they did after the first mild TBI.
Community Resources

Houston—Galveston Metropolitan Area
What can I do?

- **Relaxation** – When your body and mind are completely relaxed, it is hard to feel anxious and stressed at the same time. Progressive muscle relaxation is a technique in which you tense and then relax all the major muscle groups in your body. You can start with your feet and work up to your head (or the other way around). The idea is that your body cannot feel tense and relaxed at the same time. Practicing how to relax can help your body feel less stressed. This is a skill and takes practice to learn. If you'd like more information, relaxation exercises are included on page 53 of this manual.

- **Exercise** – Exercise can help your body run more efficiently. It can also boost your immune system. When your body is strong, it can fight off stress better.

- **Changing ways of thinking** – How we think about things can affect how we feel. Sometimes changing the way you think about things can help you feel better. For example, if you think negative thoughts during a bad situation, these thoughts may increase your stress. They may make you feel angry or sad. Ways to try and change negative thinking are included on page 59.

- **Imagery** – When you are stressed, it can sometimes help to put your mind on other things. This can help you to relax your mind and body. One way to do this is to use your imagination to visualize images that are calm and relaxing. These images may be real places or may be imaginary places that you create in your mind. The more real you can make your image, the more that thinking about it can help you relax. See method #4 found in Part A on page 57 of this manual for more information on using your imagination to reduce stress.

- **Stay healthy** – Make sure you get good sleep and have a balanced diet.
Sadness is a natural reaction to a difficult situation. All of us feel sad at some point in our lives. It is natural to feel sadness after a mild TBI, especially if the mild TBI caused major changes in your life, job, or family. Some people can also feel sad after a mild TBI because of direct injury to the brain. While your brain is healing, you may have a hard time controlling your emotions. You may feel sadder than you usually would in the same situation. You may feel like you cry more easily. You may also have a hard time getting started on things.

Depression is different from normal sadness, because you may find it harder to “snap out of it.” You may not enjoy the things that used to help you feel better. Depression can be described as a feeling of sadness that does not go away. It is important to know and recognize the signs of depression. Depression can get in the way of your recovery following a mild TBI. The good news is that if depression has become a problem for you after your injury, there are several treatments available that can help.

**Signs of depression:**

<table>
<thead>
<tr>
<th>Depressed or sad mood.</th>
</tr>
</thead>
<tbody>
<tr>
<td>You may feel like you are sad or down. Sometimes people feel irritated or cranky rather than sad. This feeling lasts most of the day, nearly every day, for several days or weeks in a row.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Loss of interest in activities that used to make you happy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>This might look like you do not care anymore. If you are depressed, you do not enjoy activities that used to make you happy. You may lose interest in your hobbies.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Significant weight loss or gain without trying OR significant decrease or increase in appetite.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression may cause you to want to eat more. Or, you might find that you are not very hungry at all.</td>
</tr>
</tbody>
</table>
If you are experiencing several of the signs of depression listed above, talk with your doctor or a therapist. They can help you get treatment. Here are several ways that you can help reduce symptoms of depression:

<table>
<thead>
<tr>
<th>Signs of depression (cont.):</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sleeping difficulties.</strong></td>
</tr>
<tr>
<td>Some people who are depressed may have insomnia. This means that you may have a hard time going to sleep. You may wake up during the night and have a hard time falling back to sleep. Or, you might sleep too much and still feel sleepy all the time. You may also feel like you need to take frequent naps.</td>
</tr>
<tr>
<td><strong>Changes in activity level.</strong></td>
</tr>
<tr>
<td>If you are depressed, you might be slowed down in your movements and speech. Or you may be restless or agitated. You might be doing things like pacing, having difficulty sitting still, or pulling at your clothes or hands.</td>
</tr>
<tr>
<td><strong>Fatigue or loss of energy.</strong></td>
</tr>
<tr>
<td>Feelings of tiredness and fatigue are quite common. Even small tasks, such as getting dressed, may seem to take more energy than they used to.</td>
</tr>
<tr>
<td><strong>Feelings of worthlessness or guilt.</strong></td>
</tr>
<tr>
<td>When depressed, you might feel like you have no value. You might feel guilty and focus on minor mistakes from your past. Depressed people sometimes blame themselves for things that are beyond their control.</td>
</tr>
<tr>
<td><strong>Difficulty in thinking or concentrating.</strong></td>
</tr>
<tr>
<td>This might look and feel like you are having trouble paying attention or that you are having memory problems. These are not actually &quot;memory problems.&quot; It's just that your mind is not focusing on things as well as it should.</td>
</tr>
<tr>
<td><strong>Frequent thoughts of death.</strong></td>
</tr>
<tr>
<td>If depression gets really bad, you may find yourself thinking a lot about your own death. You might be thinking that the world would be better off if you were dead. You might even start thinking of hurting yourself or killing yourself. This can be a big problem if you cannot get rid of these thoughts or start to think about acting on them.</td>
</tr>
</tbody>
</table>
What can I do?:

- **Increase your activities** – If you are depressed, you may feel like you do not want to do anything. However, it is very important that you take part in activities that make you feel better. When you do something that is fun or if you accomplish something, you will usually feel better. If something that you do helps you feel a little bit better, then do it again. Doing nothing is likely to make you feel worse.

- **Try not to spend time alone** – Make an effort to be with other people. You may not feel like being around others, but you will likely feel better with the support of friends or family. When you spend time alone, you are likely to feel worse.

- **Increase exercise** – Exercise can help your mood. It can also increase your energy level and help you feel less tired.

- **Change your ways of thinking** – Our thoughts are strongly related to our feelings. The things that we say to ourselves can make us feel sad or down. Or they can make us feel better about ourselves. Learning to change our thinking can help to improve a depressed mood. Go to page 59 of this manual for some ideas about how to change your thinking.

- **Psychotherapy or counseling** – Psychotherapy involves talking with a trained professional about things. You may talk with a therapist about symptoms, problems, and understanding yourself better. It may help you understand what you are going through. Therapists can help you plan ways to become more active. They may also help you learn to change the way you think about things. Changing the way you see things can often make you feel better.

- **Medications** – You should talk to your doctor if your depression gets worse. You should talk to your doctor if depression causes problems with your
family or your work. There are many medications that may help you feel more like yourself.

**Anxiety**

Anxiety is a feeling of being afraid or nervous. We become afraid or nervous when we are in a threatening or dangerous situation. If you have ever been nervous or worried before an important test or a job interview, you have a good idea of what anxiety feels like.

Feeling some anxiety in difficult situations is normal. Anxiety can even help us to prepare for action. When anxiety helps us to stay alert and safe, it is good. But sometimes, anxiety can be intense and not go away easily. This type of anxiety may cause problems with work, family, and friendships.

There are several reasons why you might have anxiety after your injury. You may worry about your symptoms. You may worry about problems you are having at work or school. Anxiety will be less of a problem if you understand that your symptoms are a common part of the recovery process.

**Signs of anxiety:**

- **Thoughts that you are in danger or that something is wrong.** When you are feeling anxious, you may think in ways that aren’t accurate. For example, you may believe that you are in more danger than you really are. You may feel like you can’t handle situations and need to run away from them. You may also feel that there is no one to help you when you need it.

- **Tense muscles**

- **Feelings of restlessness.** You feel like you cannot relax.

- **Feelings that you cannot breathe or that you are short of breath.**

  - **Lightheaded or dizzy feelings**
  - **Racing heart**
  - **Butterflies in your stomach**
  - **Trouble sleeping**
If you are experiencing symptoms like these since your injury, there are several things that you can do to help anxiety become less of a problem.

**What can I do?**

- **Change your ways of thinking** – Like with depression, thoughts that we have can make us worried. This may lead to anxiety. If you are feeling anxious, you may be thinking things that are making you feel that way. For example, you may think to yourself, “I’m never going to get better.” This will probably make you feel bad. Changing the way you think about a situation may help you feel less anxious. See page 59 for more information about changing thought patterns.

- **Distraction** – Sometimes you can help your anxiety by just distracting yourself. Getting involved in other things can help take your mind off your worries.

- **Relaxation Exercises and Guided Imagery** - See page 53 for more information on ways to help you relax.

- **Psychotherapy** – If your anxiety is bad enough, talking with a therapist can help. This is especially true if you are having panic attacks with your anxiety.

- **Medication** – Talking with your doctor may be helpful if your anxiety is not going away. Sometimes medications can help you manage anxiety.
Anger/Irritability

Everyone gets angry or irritable once in a while. Often you may be angry for a good reason. Anger and irritability can become a problem though. They can get in the way of your ability to get along with other people in your life. Sometimes people may notice that they are more easily irritated or angry after a mild TBI. You may feel as if you have a “shorter fuse.” One of the most common causes of irritability can be fatigue. You are much more likely to lose your temper when you are tired or overworked.

Sometimes people become more irritable after a mild TBI because of the injury to the brain. Other times, people become irritable because of the stress that a mild TBI can cause. Irritability is one of the more commonly reported problems following a mild TBI.

Some amount of frustration and anger can help you get things done. Too much anger or long-lasting irritability and anger can have damaging effects. It can cause problems with your health. It can also cause problems in your relationships with others. Learning ways to manage your frustration and anger can help your recovery.

What can I do?

- **Recognize early signs** – Our body gives us signs that we are angry. These include a racing heart, flushed or hot face, sweating, etc. It is important to notice when you are getting angry before it gets out of control.

- **Use relaxation techniques** to help calm you down. When you realize you are getting angry or if you are already angry, try to relax. Several techniques you can try are described on page 53.

- **Take a time-out** – If you are feeling angry, sometimes it is necessary to take a time-out. This means leaving the situation that is making you angry for some period of time. Time-outs can give you a chance to calm down.
Remember that you can handle a problem better if you are calm.

- **Change your way of thinking** – Often we get angry not at a situation, but because of how we think about the situation. Sometimes our thoughts can make us angrier than what actually happened. You have the ability to manage how you think about things. For example, if your doctor is late for an appointment, you might think to yourself “this guy doesn’t care about me...he probably just wants to go play golf.” If you think about the situation that way, you are likely to feel irritated, angry, or resentful. However, if in the same situation you think to yourself, “the doctor might be dealing with an emergency right now,” you are less likely to feel upset. Some ideas about ways to manage your thinking are on page 59.

- **Use self-talk** – A way to help change your thinking and to manage your anger is to use “self-talk.” If you find yourself getting angry or irritated, you can say things to yourself to help you calm down. For example, when you feel yourself tensing up, you could say to yourself, “Take a deep breath and relax.” Or, if you are talking to an angry person, you could say to yourself, “Blowing up only gives them what they want. I will stay cool.”
You may have gotten a little better over the first few weeks after your injury. In fact, you see the quickest recovery in the first six months after a TBI. Most patients with mild TBI will feel close to “normal” after about three months. However, some symptoms may last longer than three months. This may be especially true if your CT scan or MRI showed some type of injury to your brain. If you still have problems after six months, they will most likely continue to get better within the year after your injury.

It is important to remember that not everyone gets better at the same rate. Every injury is different. Recovery from the injury can be different, too. Recovery can be slower in people who are older. Recovery can also be slower if you have had one or more brain injuries in the past.

Symptoms are usually worse in the beginning. Sometimes you may not notice symptoms until you try to go back to your normal activities, like returning to work or school. Your symptoms will tend to get better over time. Recovery will be faster if you get enough rest. Gradually going back to your normal activities will also help. People who gradually go back to their normal routine often take less time to recover than do those who try to return immediately.
Keep in mind these tips for helping your recovery:

◊ **Expect to get better slowly.** Do not try to push yourself too much in the beginning. Over the first few months, slowly increase your activities. Increase your activities when you become comfortable with handling more things.

◊ **Get the rest that you need to heal.** Do not overdo it! Be sure to get a good night’s sleep. Remember that you may need more sleep and more rest breaks during your recovery than you normally would.

◊ **Pace yourself.** Set small, reasonable goals for yourself. Schedule regular rest breaks. Try to stay active, but be sure to set aside time for resting.

◊ **Be patient.** Be patient with yourself, as well as with your family and friends. Take steps to help yourself relax and stay calm. Avoid situations that are likely to increase your irritability (like noisy crowds) during the early part of your recovery.

◊ **Remind yourself that the symptoms you experience are a NORMAL part of recovery.** Thinking about and worrying about your symptoms can make them seem worse. Paying too much attention to a problem makes you notice it more.

After a mild TBI, it is normal to have some of the symptoms that were described in this manual. These symptoms are likely to get better in time on their own. This manual gives you lots of tools to help deal with these problems in the meantime.
All of the things that have been listed are great for a successful recovery. Each person brings something different to the table and does things in different ways. But the basics are the same.

Remember:

1. Do not rush things. This is not an overnight process of getting better.
2. Your body will let you know when it is time to rest. It is healing right now and you have to let it do its job.
3. It is so much better to pace yourself instead of rushing things. Sometimes rushing things can lead to injury rather than recovery.
4. Patience is something we all have to work on. Before my accident, I was laid back. After, it was a different story. I would go from all right to mad in about two seconds because somebody else was not following the rules. When I accepted that I couldn’t control other people or what they do, and I can only take responsibility for myself, it made life a lot better on so many levels.
5. There are a lot of symptoms you will go through that others may not have experienced because every brain injury is unique; this is part of your recovery. Worrying will not help anything. Sometimes people won’t even really have a problem, they are just worried too much and convince themselves that something is wrong. Before a self-diagnosis is given, have your doctor find out what the real reason for the problem is.

Mild or severe, it is still a Traumatic Brain Injury.
Different people have different ways of coping with whatever life throws their way. Most people can tell other people how or what to do. But when it comes to actually having to deal with it ourselves, then it is a whole different story. For me, writing is a coping strategy. When I could not talk or communicate very well, I learned to hunt and peck on the computer. Writing was a way for me to communicate and express myself in a positive manner. I still have a problem sometimes with thinking quickly in a conversation. People may not understand me so things get twisted up. When I learned to accept that I could not control other people and I could only control my actions, then the difficulties of me worrying about what other people did or what I thought they should or should not do was lifted off of my shoulders. I am also fortunate to have my wife to talk to. The best thing is to have someone that will sit there and just simply listen to you. Even now, I still put my thoughts on paper so that the inflection of my voice does not distract from the point I am trying to get across. It is difficult for us all to go through this and none of us want to hear what we need to do. I do know that DRUGS AND ALCOHOL are not a coping strategy, they make you feel better for a short time but when they wear off the problems are still there. My outlet is writing poetry; maybe it will work for you!
VIII. When should I seek medical help?

Be sure to carefully follow ALL your doctor’s instructions. In general, your symptoms should tend to get better over time. If any of your symptoms get worse or do not go away over time, talk to your doctor.

The symptoms that were discussed in this manual are common following a mild TBI. They are considered part of the normal recovery pattern. You may experience none of these symptoms, some of these symptoms, or all of these symptoms following your injury.

However, if you experience ANY of the following symptoms after your injury, it is recommended that your family take you to the hospital emergency room right away:

⚠️ You cannot wake up.

⚠️ You have one pupil (the black part of your eye) larger than the other.

⚠️ You have a seizure or a convulsion.

⚠️ You have problems with repeated vomiting.

⚠️ You have increasing problems with confusion or restlessness.

⚠️ You have very severe headaches that do not go away.

⚠️ You develop weakness or numbness in your body.

⚠️ You develop slurring of your speech.
IX. Common Misconceptions

**MYTH:** “There is no need to wear a seatbelt if I am just driving around the corner.”
**FACT:** Accidents occur more often near home. That is because you spend most of your time near your home. Seatbelts should be worn at all times when traveling in a vehicle.

**MYTH:** “It is safer to be thrown clear from my vehicle than to be trapped.”
**FACT:** It is safer to be trapped inside a wreck. Your chance of being killed increases greatly if you are thrown out of the vehicle.

**MYTH:** “I did not hit my head. It was just whiplash to the neck, so I cannot have a brain injury.”
**FACT:** It is true that not everyone with whiplash has a brain injury. However, whiplash injuries can cause a brain injury even if there is no blow to the head. The force from the vehicle accident can cause the brain to move inside the skull. When the brain twists and/or hits the inside of the skull, this may injure the brain.

**MYTH:** “I was not knocked out, so I do not have a brain injury.”
**FACT:** A head injury can cause brain injury even if you are not knocked out. Sometimes, a person will experience a period of being confused or dazed. Even with a more severe injury, like a gunshot wound that goes through the brain, some individuals may not lose consciousness. Every TBI is unique.

**MYTH:** “I anger easily and sometimes feel depressed and irritated. It’s not because of my brain injury; I just have a lot on my mind.”
**FACT:** It is common for people with brain injuries to be easily angered and to suffer from depression. Brain injury can cause changes in mood. Additionally, changes in family and work roles can lead to mood changes.
X. Where can I go to get help?

After a mild TBI, you may need to take some time off from work, and may have temporary financial stresses. You may also need outside assistance, such as medical care, counseling, and services to help you get to work. The following list of community resources provides information on local, state, and national services that may be able to help. For some specific information about how to apply for a Harris County Health District Gold Card, please see page 64 of this manual.

**Note from Jason:** I know, and you will shortly find out that there are not too many resources and services that exist solely for people with TBI. But, there are some. They are not always easy to find. In fact, sometimes it really takes your initiative and motivation to find them. Sometimes we have to improvise and make things work the best we can for the situation. Where there is a will, there is a way and in this situation you will have to do some of the legwork. Here are a few resources in the Houston area that may be beneficial to you. I hope this information will serve you well. This road can sometimes be very lonely. This road can be very hard. But always keep in mind, “You are not alone.”

**Resources**

<table>
<thead>
<tr>
<th>Information &amp; General Help:</th>
<th>Phone or Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brain Injury Association (BIA)</strong></td>
<td>(800) 444-6443 (toll-free)</td>
</tr>
<tr>
<td>Provides education, support and information for persons with TBI and their families</td>
<td><a href="http://www.biausa.org">www.biausa.org</a></td>
</tr>
<tr>
<td><strong>Brain Injury Association of Texas (BIATX)</strong></td>
<td>(512) 326-1212</td>
</tr>
<tr>
<td>Non-profit public service organization to help those with brain injury and their families</td>
<td>(800) 392-0040 (toll-free)</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.biatx.org">www.biatx.org</a></td>
</tr>
</tbody>
</table>
## Information & General Help:

| **Mental Health Association of Greater Houston** | (713) 522-5161  
(713) 523-8963  
www.mhahouston.org |
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<tbody>
<tr>
<td>Provides mental health services information/ referrals and provides a listing of non-profit mental health services for Harris County called The Guide</td>
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</tbody>
</table>

| **Centers for Disease Control and Prevention (CDC)** | (800) 232-4636 (toll-free)  
www.cdc.gov/ncipc/tbi/TBI.htm |
<table>
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<tr>
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<tbody>
<tr>
<td>Provides information, publications, and resources regarding traumatic brain injury</td>
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</table>

| **Houston Center for Independent Living** | (713) 974-4621  
www.coalitionforbarrierfreeliving.com |
<table>
<thead>
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<tbody>
<tr>
<td>Community and resource center organized by and for persons with disabilities</td>
<td></td>
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</table>

| **Disability Services of the Southwest** | (866) 301-0931 (toll-free)  
www.dsswtx.org |
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<tr>
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<tbody>
<tr>
<td>Provides many services through home and community-based programs for persons with disabilities to promote independent living</td>
<td></td>
</tr>
</tbody>
</table>

| **Advocacy, Inc.** | (713) 974-7691  
(800) 880-0821 (toll-free)  
www.advocacyinc.org |
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<tbody>
<tr>
<td>Federally-funded and authorized protection and advocacy-system that provides services for Texans with disabilities</td>
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## Medical Care:

| **Harris County Hospital District—Gold Card** | (713) 566-6691  
www.hchdonline.com |
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<tbody>
<tr>
<td>Provides financial assistance for medical services for Harris County residents</td>
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| **University of Texas Medical Branch (Galveston)** | (409) 772-2222  
(800) 917-8906 (toll-free)  
www.utmbhealthcare.org |
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| **Veteran’s Administration Hospital** | (713) 791-1414  
(800) 553-2278 (toll-free)  
www.houston.med.va.gov |
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<tbody>
<tr>
<td>Non-profit public service organization to help veterans with brain injury and their families</td>
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<tr>
<td><strong>Dental Care:</strong></td>
<td><strong>Phone or Website</strong></td>
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<tr>
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</tr>
<tr>
<td><strong>University of Texas Dental School (Student Clinic)</strong>&lt;br&gt;Provides discounted comprehensive and emergency dental services performed by dental students supervised by the faculty</td>
<td>(713) 500-4000&lt;br&gt;www.db.uth.tmc.edu</td>
</tr>
<tr>
<td><strong>Harris County Hospital District Dental Clinic</strong></td>
<td>(713) 757-0572&lt;br&gt;(713) 526-4243 (appointments)</td>
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</tbody>
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<thead>
<tr>
<th><strong>Vision Care:</strong></th>
<th><strong>Phone or Website</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>University Eye Institute of the University of Houston</strong></td>
<td>(713) 743-2020&lt;br&gt;www.opt.uh.edu/uei</td>
</tr>
<tr>
<td><strong>Lighthouse of Houston</strong>&lt;br&gt;Provides a variety of educational programs, community services, and outpatient rehabilitation for the blind and visually impaired</td>
<td>(713) 527-9561&lt;br&gt;www.houstonlighthouse.org</td>
</tr>
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</table>

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<thead>
<tr>
<th><strong>Emotional, Psychological, &amp; Substance Abuse</strong></th>
<th><strong>Phone or Website</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental Health &amp; Mental Retardation Authority (MHMRA)</strong>&lt;br&gt;Provides many mental health services</td>
<td>(713) 970-7000&lt;br&gt;(866) 970-4770 (toll-free)&lt;br&gt;www.mhmraharris.org</td>
</tr>
<tr>
<td><strong>MHMRA Neuropsychiatric Center</strong>&lt;br&gt;Crisis emergency center that is available 24 hours a day, 7 days a week</td>
<td>(713) 970-7070</td>
</tr>
<tr>
<td><strong>Family Services of Greater Houston</strong>&lt;br&gt;Non-profit community service organization that provides many health and human services for families</td>
<td>(713) 861-4849&lt;br&gt;www.familyservices.org</td>
</tr>
<tr>
<td>Emotional, Psychological, &amp; Substance Abuse</td>
<td>Phone or Website</td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td><strong>Houston Area Women’s Center</strong></td>
<td>Domestic Violence: (713) 528-2121 Sexual Assault: (713) 528-7273 <a href="http://www.hawc.org">www.hawc.org</a></td>
</tr>
<tr>
<td>Provides services for domestic and sexual violence survivors and their families</td>
<td></td>
</tr>
<tr>
<td><strong>Harris County Psychiatric Centers</strong></td>
<td>(713) 741-5000 <a href="http://hcpc.uth.tmc.edu">http://hcpc.uth.tmc.edu</a></td>
</tr>
<tr>
<td>Provides a comprehensive program of psychiatric and psychosocial services</td>
<td></td>
</tr>
<tr>
<td><strong>Council on Alcohol &amp; Drugs Houston</strong></td>
<td>(713) 942-4100 <a href="http://www.council-houston.org">www.council-houston.org</a></td>
</tr>
<tr>
<td>Provides prevention, intervention, outpatient treatment, after-care, education and outreach services regarding alcohol or drug dependency</td>
<td></td>
</tr>
<tr>
<td><strong>Christian Family Counseling</strong></td>
<td>(713) 681-9598</td>
</tr>
<tr>
<td>Provides counseling for family and relationship issues</td>
<td></td>
</tr>
<tr>
<td><strong>Catholic Charities of the Archdiocese of Galveston– Houston</strong></td>
<td>(713) 526-4611 <a href="http://www.catholiccharities.org">www.catholiccharities.org</a></td>
</tr>
<tr>
<td>Non-profit social and health service organization providing 16 different community programs</td>
<td></td>
</tr>
<tr>
<td><strong>University of Texas Department of Psychiatry Outpatient Clinic</strong></td>
<td>(713) 500-2525</td>
</tr>
<tr>
<td>Provides comprehensive outpatient mental health services</td>
<td></td>
</tr>
<tr>
<td><strong>University of Houston-Clear Lake Psychological Services</strong></td>
<td>(281) 283-3330</td>
</tr>
<tr>
<td>Provides individual, couple, family, and group therapies</td>
<td></td>
</tr>
<tr>
<td>Emotional, Psychological, &amp; Substance Abuse:</td>
<td>Phone or Website</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td><strong>University of Houston Psychological Research and Services Center (PRSC)</strong>&lt;br&gt;Provides low cost services to community by offering assessments and treatment for various disorders</td>
<td>(713) 743-8600&lt;br&gt;www.uh.edu/prsc</td>
</tr>
<tr>
<td><strong>Chicano Family Center</strong>&lt;br&gt;Provides social services to families in need</td>
<td>(713) 923-2316</td>
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<table>
<thead>
<tr>
<th>Education &amp; Employment:</th>
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<tbody>
<tr>
<td><strong>Department of Assistive &amp; Rehabilitative Services (DARS)</strong>&lt;br&gt;Provides a variety of services for Texans with disabilities and families with children who have developmental delays</td>
<td>(713) 735-3470&lt;br&gt;(800) 628-5115 (toll-free)&lt;br&gt;www.dars.state.tx.us</td>
</tr>
<tr>
<td><strong>Social Security Work Incentives</strong></td>
<td>(800) 772-1213 (toll-free)&lt;br&gt;www.ssa.gov</td>
</tr>
<tr>
<td><strong>Texas Work Force Commission</strong>&lt;br&gt;Provides workforce development services to employers and jobseekers of Texas</td>
<td>(800) 832-2829&lt;br&gt;www.twc.state.tx.us</td>
</tr>
<tr>
<td><strong>The Worksource</strong>&lt;br&gt;Provides comprehensive human resource for businesses and residents of the Houston-Galveston Gulf Coast region</td>
<td>Job Assistance&lt;br&gt;(888) 469-5627 (toll-free)&lt;br&gt;www.theworksource.org</td>
</tr>
<tr>
<td><strong>Texas Education Agency (TEA)</strong>&lt;br&gt;Provides leadership, guidance, and resources to help schools meet the educational needs of all students</td>
<td>(512) 463-9734&lt;br&gt;(800) 252-9668 (toll-free)&lt;br&gt;www.tea.state.tx.us</td>
</tr>
<tr>
<td>Education &amp; Employment:</td>
<td>Phone or Website</td>
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</tr>
<tr>
<td><strong>MHMRA Vocational Services</strong></td>
<td>(713) 970-7000</td>
</tr>
<tr>
<td>Provides services to promote employment related skills</td>
<td><a href="http://www.mhmraharris.org">www.mhmraharris.org</a></td>
</tr>
<tr>
<td><strong>Career &amp; Recovery Resources</strong></td>
<td>(713) 754-7000</td>
</tr>
<tr>
<td>Non-profit United Way agency providing employment and counseling services</td>
<td><a href="http://www.careerandrecovery.org">www.careerandrecovery.org</a></td>
</tr>
<tr>
<td><strong>University of Houston Center for Students with Disabilities</strong></td>
<td>(713) 743-5400</td>
</tr>
<tr>
<td>Provides accommodations and support services to students with any temporary or permanent health impairment, physical limitation, or learning disability</td>
<td><a href="http://www.uh.edu/csd">www.uh.edu/csd</a></td>
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<tr>
<th>Financial:</th>
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<tbody>
<tr>
<td><strong>Social Security Administration (SSI &amp; SSDI)</strong></td>
<td>(800) 772-1213 (toll-free)</td>
</tr>
<tr>
<td>Pays retirement, disability, and survivors benefit to workers and their families</td>
<td><a href="http://www.ssa.gov">www.ssa.gov</a></td>
</tr>
<tr>
<td><strong>Texas Medicaid Program</strong></td>
<td>(800) 252-8263 (toll-free)</td>
</tr>
<tr>
<td>Federal-state program to pay medical bills for low-income persons</td>
<td><a href="http://www.hhsc.state.tx.us">www.hhsc.state.tx.us</a></td>
</tr>
<tr>
<td><strong>Medicare General Information Hotline</strong></td>
<td>(800) 633-4227 (toll-free)</td>
</tr>
<tr>
<td>Health insurance program for people 65 or older, certain persons with disability under 65, and those with permanent kidney failure</td>
<td><a href="http://www.medicare.gov">www.medicare.gov</a></td>
</tr>
<tr>
<td><strong>Medicare Eligibility</strong></td>
<td>(800) 772-1213 (toll-free)</td>
</tr>
<tr>
<td><strong>Crime Victims’ Compensation</strong></td>
<td>(512) 936-1200</td>
</tr>
<tr>
<td>Program that reimburses out-of-pocket medical and counseling expenses to victims of violent crimes and their families</td>
<td>(800) 983-9933 (toll-free)</td>
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<td></td>
<td><a href="http://www.oag.state.tx.us">www.oag.state.tx.us</a></td>
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### Financial:

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<thead>
<tr>
<th><strong>Texas Workers’ Compensation Commission</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td>Financial program to assist employees who have work-related injuries, diseases, or illnesses</td>
<td>(713) 924-2200 (within 610)</td>
</tr>
<tr>
<td></td>
<td>(281) 260-3035 (outside 610)</td>
</tr>
<tr>
<td></td>
<td>(800) 252-7031 (toll-free)</td>
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<tr>
<td></td>
<td><a href="http://www.tdi.state.tx.us/wc/indexwc.html">www.tdi.state.tx.us/wc/indexwc.html</a></td>
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<tr>
<th><strong>Meals on Wheels</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td>Provides meal services to those in need</td>
<td>(713) 794-9001</td>
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<td><a href="http://www.mowaa.org">www.mowaa.org</a></td>
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<tr>
<th><strong>Food Stamps</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td>Program that allows low-income families to buy nutritious food</td>
<td>(713) 767-2000</td>
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<tr>
<td></td>
<td>(800) 252-8263 (toll-free)</td>
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<tr>
<th><strong>Houston Food Bank</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td>Collects and distributes food donations and provides nutrition education, outreach, and job training</td>
<td>(713) 223-3700</td>
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<tr>
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<td><a href="http://www.houstonfoodbank.org">www.houstonfoodbank.org</a></td>
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<tr>
<th><strong>Emergency Aid Coalition</strong></th>
<th><strong>Phone or Website</strong></th>
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<tbody>
<tr>
<td>Provides many services to help meet basic human needs of individuals, such as clothes, food, and school supplies</td>
<td>(713) 528-3663 (FOOD)</td>
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<td><a href="http://www.eachouston.org">www.eachouston.org</a></td>
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<tr>
<th><strong>Catholic Charities of the Archdiocese of Galveston-Houston</strong></th>
<th><strong>Phone or Website</strong></th>
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<td>(713) 526-4611</td>
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<tr>
<th><strong>Sheltering Arms Comprehensive Energy Assistance Program (CEAP)</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td></td>
<td>(713) 956-7456</td>
</tr>
<tr>
<td></td>
<td>9 A.M.—12 P.M. Tuesday and Thursday only!</td>
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### Housing:

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<tr>
<th><strong>Houston Area Urban League</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td></td>
<td>(713) 393-8700</td>
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<td></td>
<td><a href="http://www.haul.org">www.haul.org</a></td>
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<tr>
<th><strong>Housing &amp; Urban Development (homes)</strong></th>
<th><strong>Phone or Website</strong></th>
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<tr>
<td></td>
<td>(800) 569-4287 (toll-free)</td>
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<tr>
<td>Housing:</td>
<td>Phone or Website</td>
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</table>
| Housing Choice Voucher Program (formerly known as Section 8) | (713) 260-0500  
www.housingforhouston.com |

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<tr>
<th>Shelters:</th>
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| SEARCH                                      | (713) 739-7752  
www.searchproject.org |
| Coalition for the Homeless                  | (713) 739-7514  
www.homelesshouston.org |
| Star of Hope                                 | (713) 748-0700  
www.sohmission.org |
| Star of Hope (Women and Family Emergency Center) | (713) 222-2220 |
| Star of Hope (Morris Men’s Development Center) | (713) 226-5400 |
| Houston Area Women’s Center                 | (713) 528-6798  
www.hawc.org |
| New Horizon Family Center (Formerly known as the Bay Area Women’s Center) | (281) 424-3300  
(800) 824-4807 (toll-free) |

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<tr>
<th>Legal:</th>
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<tbody>
<tr>
<td>Equal Opportunity Employment Commission (ADA)</td>
<td>(800) 669-4000 (toll-free)</td>
</tr>
<tr>
<td>Adult or Child Protective Services</td>
<td>(800) 252-5400 (toll-free)</td>
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<tr>
<th>Crisis:</th>
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</table>
| CRISIS HOTLINE                              | (713) HOTLINE (468-5463)  
(800) SUICIDE (784-2433)  
www.crisishotline.org |
### Assistive Technology:

**Texas Technology Access Program**  
Promoting independence for people with disabilities through access to technology  
(512) 332-0740  
(800)828-7839  
http://techaccess.edb.utexas.edu

### Attendant Care:

**Sheltering Arms**  
Provides skilled nursing and therapies in the comfort of your home with services that are available 24 hrs/7 days per week  
(713) 685-6577  
www.shelteringarms.org

**Texas Department of Aging and Disability Services (Texas DADS)**  
Proves services for seniors and widows  
(713) 692-1635

### Driving:

**Strowmatt Rehabilitation Services**  
Provides driver evaluations and training services to persons with medical conditions that may affect their driving  
(713) 722-0667  
www.driverrehabservices.com

### Transportation:

**Public Transit (METRO) - Half Fare for the Disabled**  
(713) 635-4000  
www.ridemetro.org

**Paratransit System (METROLift & Freedom Pass)**  
(713) 225-0119

**Department of Assistive and Rehabilitative Services**  
(713) 862-5294

**Medicaid Transportation for Medical Appointments**  
(877) 633-8747

**American Red Cross of Greater Houston (Local & Long Distance)**  
(713) 526-8300  
(866) 526-8300 (toll-free)
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<tr>
<th>Leisure &amp; Recreation:</th>
<th>Phone or Website</th>
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<tbody>
<tr>
<td>Metropolitan Multiservice Center</td>
<td>(713) 284-1973</td>
</tr>
<tr>
<td>TIRR Sports</td>
<td>(713) 799-5000</td>
</tr>
<tr>
<td>RRTC Creative Expression Center</td>
<td>(713) 630-0526</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.tbicommunity.org">www.tbicommunity.org</a></td>
</tr>
<tr>
<td>SKYDIVE Houston</td>
<td>(800) 586-7688</td>
</tr>
<tr>
<td>SKYDIVE Spaceland</td>
<td>(281) 369-3337</td>
</tr>
<tr>
<td>SIRE Therapy Program (Spring, TX)</td>
<td>(281) 353-6160</td>
</tr>
<tr>
<td>Therapeutic horseback riding, hippotherapy, vaulting, and carriage driving</td>
<td><a href="http://www.sire-htec.org">www.sire-htec.org</a></td>
</tr>
<tr>
<td>Flying Free Equitherapy (Santa Fe, TX)</td>
<td>(409) 925-1942</td>
</tr>
<tr>
<td></td>
<td><a href="http://www.flyingfree.org">www.flyingfree.org</a></td>
</tr>
<tr>
<td>Leap of Faith Equine-assisted Riding Center</td>
<td>(936) 648-4606</td>
</tr>
<tr>
<td>Houston Tennis Association</td>
<td>(713) 973-7636</td>
</tr>
<tr>
<td>Houston Parks and Recreation</td>
<td>(832) 567-4832</td>
</tr>
<tr>
<td>Texas International Shootout (Basketball)</td>
<td>(281) 487-1755</td>
</tr>
<tr>
<td>Adult Basketball</td>
<td>(281) 487-1755 (Tuesdays)</td>
</tr>
<tr>
<td>Turning Point Gulf-Coast Chapter</td>
<td>(409) 939-4827</td>
</tr>
<tr>
<td>Provides free services to learn how to water ski, kayak, fish, and jet ski</td>
<td><a href="http://www.turningpointnation.org/gulf_coast.html">www.turningpointnation.org/gulf_coast.html</a></td>
</tr>
<tr>
<td>Saint Street Swim</td>
<td>(713) 626-7946</td>
</tr>
</tbody>
</table>
PART A: Ways to help you relax.

There are lots of different ways that can help you to relax. Learning some method of helping you to relax can reduce your stress level, help with headaches, and help with managing anxiety and anger. Some ways to help you relax are things that you already know about. These can include things like:

- Exercise
- Listening to music
- Stretching
- Reading
- Massage
- Yoga
- Martial arts
- Meditation
- AND MANY MORE!!

Those kinds of activities can help you in managing your stress and in relaxing. In this section, however, we are going to give you information on some other simple tools that can help you relax. These relaxation methods can be practiced alone, and don’t require a lot of outside help.

Each method is a way that can help reduce tension and stress, while helping you to feel calm and relaxed. Some approaches have to do more with ways of thinking, while others are more physical. All of these methods help you to focus your attention, clear your mind of distractions, and to relax. Different people find different ways of relaxing to be most helpful to them. You may want to try several different ways of relaxing to find out what works best for you.
We are going to tell you about a few ways that can help you relax. Our goal is not for you to become an “expert” at any one approach. Instead, this is a chance to learn about different ways to help you get relaxed. Feel free to try all of the different ways to relax. Everybody can have different ways that they use to help get them relaxed. If you find something that works for you, you may want to practice it and learn more about it.

◊ The first thing you need is a quiet place where you can practice. Try to find a place that will be free from interruption, if you can.

◊ Then, get into a comfortable position. Try sitting in a soft, comfortable chair. Place your hands in your lap and rest your feet flat on the floor. Settle into a position that is comfortable.

**Method #1: Isometric Squeeze Relaxation**

This approach started in the USA. There are many different types of this method. However, all of them have to do with simply tightening up or squeezing major muscle groups, and then letting go.

**Let’s try it:**

♦ While keeping the rest of your body loose and relaxed, gently squeeze your shoulders up and together, as if you were shrugging. Tilt your head back, so your shoulder, neck, and back muscles all squeeze together.

♦ Now, make a nice tight squeeze with these muscles, as if you were squeezing the stress out. Hold the squeeze for several seconds.

♦ Then let go. Let your shoulders hang loose, your arms hang down, and let your tension go away for about 30 seconds.

♦ If you want, try squeezing and letting go a few more times.
How did that feel? Many people find this approach feels very good. If it hurts, you may have tried too hard. Imagine how you would feel if you squeezed all of your muscles - from your fingers, to your face, to your toes - in the same way. It can be very relaxing. You may even feel like you’ve had a nice massage.

If this method seems to be helpful for you, you may want to try squeezing a different muscle group in your body the same way. Each time you should hold the squeeze for several seconds. Then let go and think about tension leaving your body. You may want to practice this kind of relaxation method for a few minutes everyday.

**Method #2: Yoga Stretching**

This is an ancient method from the East, which has gotten very popular in the West. Yoga stretching is almost the opposite of isometric squeeze relaxation. Instead of squeezing and letting go, you try to stretch and unstretch your muscles. In yoga stretching, you do this in a slow, smooth, and gentle way.

**Let’s try it:**

- For this practice exercise, we will focus on the neck and shoulders.

- Let both arms hang to your sides and gently bow your head down. Without making too much effort, let gravity pull the heavy weight of your head down farther and farther towards your chest. Let gravity pull the heavy weight of your arms down towards the floor.

- Notice how your neck and shoulder muscles slowly stretch as the weight of your head and arms pull farther and farther down. Let the muscles stretch farther and farther. Stretch out the feelings of tension.

- Take your time, until you feel a good complete stretch. Then, gently and easily raise your head and return to your original upright position. Stay upright for the next 30 seconds. Then, you may try this stretch again.

How did that feel? Did you notice any difference between the isometric squeeze relaxation and yoga stretching? Which seemed easier? Which was more active? Was one more relaxing to you than the other?
If this method seems to be helpful for you, you may want to try practicing this kind of relaxation method for a few minutes everyday. You may want to learn more about yoga and about the different stretches that you can do to help relax.

**Method #3: Deep Breathing**

This is from both the East and the West. It is an important part of all relaxation exercises. This breathing exercise focuses on helping you breathe in a way that is easy and relaxed. You will learn to pay attention to breathing in a way that is slow, even, and full. Deep breathing can be restful and give you energy at the same time.

**Let’s try it:**

We’ll try two types, one that is active, and one that is quiet.

◊ **Active:** First, slowly bow down and breathe out, and then sit up and reach up while breathing in.

- Let your arms hang limply to each side. Take a deep breath, filling your chest and abdomen. Then slowly and easily let the air out through your nose and slowly, smoothly, and gently bow over in your chair. Let gravity pull your chest and head toward your knees, squeezing out all the air as you bow farther and farther. Do this as smoothly and gently as possible.

- Then, when you are ready to inhale, slowly, smoothly and gently sit up while raising your arms higher and higher in front of you. Reach up to the sky and stretch as you take a good complete breath.

- Then, when you are ready, again slowly, smoothly and gently lower your arms and bow over while breathing out. Then, inhale and gently sit up, raising your arms.

- Keep doing this at your own pace. Do this for about a minute.

◊ **Quiet:** Our second breathing exercise is much more quiet. All you need to do is pay attention to how you are breathing. Often this is a very good way of calming down and helping to relax.
How are you breathing at this moment? Notice the air as it flows easily through your nose, filling your lungs with refreshing energy. There is nothing for you to do but observe the quiet flow of air.

When you breathe out, gently open your lips, and let the air flow out. Think of it as if you were gently blowing on a candle flame just enough to make it flicker.

Continue breathing this way, easily and effortlessly in through your nose and easily out through your lips as you let go. Try this approach for about a minute.

How did you feel when doing deep breathing? Did you notice any differences between the active and the passive type? If you found that deep breathing helped you to relax, you may want to practice this a few minutes every day.

**Method #4: Visualization**

In this approach, you can reduce stress by using your imagination. Everyone visualizes. When you daydream or when you think about the past, you are using your imagination. When you use visualization to help you relax, you focus on an image that helps your body relax and that helps you ignore stress.

**Let’s try it:**

- Sit or lie down in a quiet place. Close your eyes.
- Scan your body for tension. Release any muscle tension you notice.
- Imagine a special place. Think of a place that you find relaxing. For some people this might be a forest, for others the beach, for others a mountaintop, and for others a quiet room.
- Use all of your senses in thinking about this special place. Use your sense of sight, hearing, smell, taste, and touch. For example, if you are imagining a beach scene, you might think about seeing the waves crashing into the shore, seeing seagulls flying above you, seeing the water meet the sky in the horizon, and so forth. You might imagine hearing the roar of the water as the waves come in, the call of the birds, the sounds of the breeze, or the laughter of children. You might smell the salty sea air or the scent of sunscreen lotion on your skin. You might taste the salt on your skin or the sweetness of an ice
cream cone. You might feel the warmth of the sun on your skin, the powdery sand under your feet, or the fluttering of your hair in the breeze. The more you can imagine, the easier it can be to relax.

- Once you have imagined the place in as much detail as you can, tell yourself some practiced phrases to help you let go of tension. For example, you might say things to yourself like:
  - “I am letting go of the tension.”
  - “I am calm and relaxed.”
  - “I feel peaceful.”
  - “I can let go of stress whenever I choose.”
  Etc.

How did that feel? Does your body feel different from how it felt before you started? Do you feel any change in your stress level? If this method was helpful to you, you may want to try practicing this several times a day. Many people find it easiest to practice in the morning or just before bedtime. When you are practicing, each time an unrelated thought comes to mind, take note of it and let it go. You can tell yourself that your goal is to focus on relaxing during this special time.

The types of relaxation and stress management methods that are presented here are just some of the many ways that people have used to relax. You may want to try each of these methods and practice them several times. Everyone has different ways that can best help them to relax. If you want more information about these methods or about other ways to relax, you may want to try the following:

- check with your local bookstore for books on relaxation.
- talk with your medical doctor or psychologist.
- look on the Internet.
Part B. Ways to change your thinking.

How you think about problems has a big effect on how you feel and how you cope. Whenever you have a feeling, there is a thought that is connected to it. This thought helps determine your feeling.

For example, imagine that you are at a party and “Jim” joins your group. You are introduced to Jim, and begin to talk with him. You notice that Jim does not look at you when talking and keeps looking over at another person in your group. There are different thoughts that you could have in this situation. Each thought can lead you to having a different feeling.

- If you were to think, “Jim thinks he is better than me. He’s rude,” you would probably feel irritated or angry.
- If you were to think, “Jim finds me boring. Nobody seems to like me,” you would probably feel sad or lonely.
- If you were to think, “Jim seems really shy and uncomfortable. I’ll try to make him feel welcome,” you would probably feel kind or caring.
- If you were to think, “Jim may be preoccupied with something. Maybe he is trying to figure out if he knows that person from somewhere,” you would probably feel neutral.

How you feel about a situation can affect how you act in that situation. If you think Jim finds you boring, you might become quiet and self-conscious. You might even feel like leaving the party. However, since you don’t really know why Jim was acting that way, you cannot be sure that whether feeling or acting a certain way is the correct response. For example, if you thought that Jim was being rude, you would likely feel angry. You might even decide to “tell him off.” But that kind of feeling or action wouldn’t be a good response if Jim were actually feeling shy or uncomfortable.

Each time we have a thought about a situation, the thought we have influences our feelings. These thoughts that we have can also influence how we act in situations.

The good news is that we can learn to change the way we think about things. This can lead to changing how we feel and how we act.
Steps to help you change the way you think:

1. One of the first steps to changing our thinking is to notice what we are thinking when we have a negative emotion. You can do this by writing down what you are thinking to yourself on a piece of paper. Write down what the situation is, what you are thinking or saying to yourself, and how you feel. You can call this your “Thought Journal.” [See the example below.]

<table>
<thead>
<tr>
<th>Date</th>
<th>Situation</th>
<th>Thought</th>
<th>Feeling</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/20/2008</td>
<td>At my doctor’s office. She was 30 minutes late for my appointment.</td>
<td>She doesn’t care about me. She just stacks her schedule so she can make more money.</td>
<td>Angry, Resentful</td>
</tr>
<tr>
<td>02/21/2008</td>
<td>Working late at the office.</td>
<td>I’m never going to get this done. People will think I’m a failure.</td>
<td>Anxious, upset</td>
</tr>
</tbody>
</table>

2. Another step to helping you change the way you think (and how you feel) is to learn to recognize ways that you “twist” your thinking. These “twisted” ways of thinking (called thought distortions) are all pretty common. The following table describes some of the many ways in which our thinking can become distorted.
## DISTORTED THOUGHTS

<table>
<thead>
<tr>
<th>THOUGHTS</th>
<th>EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overgeneralizing:</strong></td>
<td>A person who just lost his/her job might think to him/herself, “I’ll never be successful in any job ever again.”</td>
</tr>
<tr>
<td>If it’s true in one situation, then it’s true in all situations.</td>
<td></td>
</tr>
<tr>
<td><strong>Selective Thinking:</strong></td>
<td>A person makes one mistake on something and thinks, “I messed up that whole project,” even though the rest of the project is fine.</td>
</tr>
<tr>
<td>Paying too much attention to a failure and then ignoring other important things about ourselves.</td>
<td></td>
</tr>
<tr>
<td><strong>Excessive Responsibility OR Blaming</strong></td>
<td>“My friend canceled lunch. I must have done something to upset her.”</td>
</tr>
<tr>
<td>When we take responsibility for everything, particularly all the bad things that happen to us...OR...When we tend to blame others for our situation rather than looking at our own part in the problem.</td>
<td>“My fellow workers got me fired, and they’re all laughing at me behind my back.”</td>
</tr>
<tr>
<td><strong>Black and White Thinking</strong></td>
<td>“If I can’t go back to work as a foreman, then I won’t go back to work at all.”</td>
</tr>
<tr>
<td>Thinking of everything as one extreme or the other (black or white, good or bad, all or nothing).</td>
<td>“If he doesn’t call me back, then he doesn’t like me.”</td>
</tr>
<tr>
<td><strong>Jumping to Conclusions</strong></td>
<td>“That guy over there must be thinking that I’m a real idiot.”</td>
</tr>
<tr>
<td><strong>Mind reading:</strong></td>
<td>“I’m really going to make a fool of myself when I talk to her.”</td>
</tr>
<tr>
<td>You think that others are feeling negatively about you.</td>
<td></td>
</tr>
<tr>
<td><strong>Fortune telling:</strong></td>
<td>“I forgot to call my friend back and now she is going to be really angry with me.”</td>
</tr>
<tr>
<td>You predict things will turn out badly.</td>
<td>“My boss didn’t really mean that I did a good job. He was just trying to be polite.”</td>
</tr>
<tr>
<td><strong>Exaggeration OR Minimizing</strong></td>
<td></td>
</tr>
<tr>
<td>When you think something is more important than it really is...OR...When you minimize or play down things that are important.</td>
<td></td>
</tr>
</tbody>
</table>
You can add another column to your “Thought Journal.” Use this column to label your thought with the kind of ways your thought might be distorted. [See below for example.]

<table>
<thead>
<tr>
<th>Date</th>
<th>Situation</th>
<th>Thought</th>
<th>Distortion</th>
<th>Feeling</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/15/2008</td>
<td>Waiting for job interview</td>
<td>I’ll probably mess this up. I’ll go blank and have nothing to say.</td>
<td>Fortune-telling</td>
<td>Anxious</td>
</tr>
</tbody>
</table>

3. The following ideas may help you to examine whether your thinking is accurate. Re-examining how you are thinking about things may help you to change how you think about your situation. Changing how you think about a situation can result in changing how you feel about it. One of the first steps is being able to identify what you are thinking. The next step can be to evaluate your thinking to see if your thoughts about a situation might be distorted.

Next, you might want to try some of the following tools to help you evaluate how you think about situations:

**Evaluate the Evidence:**

After you write down your negative thought, you should take a look at what evidence there is to support this thought. That is, take a look at the facts. Sometimes when we feel bad, we tend to believe that things are bad without really looking at the evidence to support our thoughts. Think about what facts support your thought AND think about what evidence does not support your thought. By looking at BOTH the evidence that supports your thought and the evidence that does not support your thought, you might be able to take a more realistic look at your situation.

For example, if you are working late on an assignment that has a deadline, you might think to yourself “I will never be able to finish this. If I don’t get this done, people will think I’m a failure.”

Evidence that supports this thought:

1. I’m really tired and I still have several things to get done.
2. If I don’t get this finished, my boss will be mad at me.
3. People in my workplace tend to gossip quite a bit.
Evidence that DOES NOT support this thought:

1. I usually get my projects done. If I set up a plan, I’ll probably get this done too, even if I’m tired.

2. If I don’t get this finished, my boss may be disappointed. But, I have rarely been behind in my work before. She is usually happy with my work and I do a good job. Just because I am behind on one project, she will not think of me as a “failure.”

3. People in my workplace generally like me. I’ve helped out other people when they’ve been behind on a project. It is likely that others may be sympathetic and may offer to help me out.

Check out whether you are using a “Double-Standard.”

When you are critical of yourself, try to think about how you would look at the same situation if it had happened to your close friend. People are often much harder on themselves than they would be on other people. If you make a mistake, you might be hard on yourself and have thoughts like “I’m such an idiot. I can’t do anything right.” But, if your friend makes the same mistake, you would very likely NOT have those same thoughts. You would probably be supportive of your friend.

When you are self-critical, take some time to think about how you would react if the same situation happened to your friend. Imagine saying to your friend the same message that you are telling yourself. Imagine saying to a friend, for example, “You are an idiot. You can’t do anything right.” It may be difficult imagining actually saying this to someone you care about. That’s because the message is harsh, unrealistic, and won’t be helpful at all!

Then, why would you treat yourself in that manner? If the message is harsh and unrealistic, it probably won’t help you do better either!! Try to treat everyone, including you, with one standard that is both helpful and realistic. When you have a negative, self-critical thought about a situation, try to ask yourself what you would say to a friend in the same situation. Then, try to tell the same thing to yourself. Use the same standard for yourself as you do for others!

These are just a few tools to help you change your thinking. There are many more!!! If you find these tools to be helpful, you might want to look for other ideas or talk with a counselor about some other methods that may help.

PART C:

How do I apply for a Gold Card?

What is a Gold Card?

A Gold Card from the Harris County Hospital District (HCHD) provides financial assistance for your health care needs. You can use this card to obtain services through the Harris County Hospitals and Community Health Centers. Financial assistance from the HCHD is available only to residents of Harris County. If you are not a resident of Harris County, check with your county’s health department to find similar financial assistance programs.

What do I need to show to get a Gold Card?

There are several things that you must provide to show that you are eligible for the HCHD Gold Card. On the next page is a list of the information you must provide. If you make sure to have all of the items on this list ready, your Gold Card application should go smoothly. If you are having problems finding or providing any of the mentioned items, call the nearest eligibility center or the Harris County Hospital District’s Gold Card Hotline at (713) 566-6691. They can let you know about other documents or proofs you may submit to meet the requirements.
1. **Identification:** You must present a valid driver’s license or State of Texas I.D. card.

   **Possible proof:** Student ID with picture, employee job badge with picture, passport with picture, U.S. Immigration documents with picture, credit card with picture, ID issued by foreign consulates, marriage license, birth certificates, Social Security card, U.S. naturalization, citizenship or other federal documents, hospital or birth records, adoption papers or records, voter’s registration card, or wage stubs.

2. **County Residency:** To show that you reside in Harris County, you must provide two proofs: one dated within the past 60 days and the other dated up to one year ago.

   **Possible proof:** Utility bills; lease agreement; school records for minor children; mortgage coupon; rental verification form; Department of Motor Vehicles record; credit card statement; property tax statement; automobile insurance documents; automobile registration; printout from IRS of current tax year filing; certification documents or benefits checks from the Social Security Administration or Texas Workforce Commission; certification documents from Food Stamps, Medicaid or Medicare; letter from recognized social services agency; mail addressed to you or your spouse; statement from child care provider; current voter’s registration card; Texas driver’s license; ID card issued by the Department of public safety; domicile verification form completed by a reliable third person, post office records; city or criss-cross directory; telephone directory; or church records.

3. **Household income:** Show proof of household income during the past 30 days.

4. **Family Dependents (if applicable):** To establish that you are a parent or guardian, you must bring a **birth certificate OR guardianship document** for each dependent in your household.

5. **Insurance Coverage:** Bring health insurance cards or plan information if you currently have healthcare insurance.

6. **I.N.S. Status:** Non-U.S. citizens should provide Immigration and Naturalization Service documents. Certain types of visas are not eligible for Gold Card financial assistance.

7. **Resources:** If you have Medicare coverage and want to apply for a discount on services and fees not covered by Medicare, you must provide proof of your resources and liabilities by filling out a HCHD Medicare Asset Determination form.

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**Note:** If you have received medical services from the Harris County Hospital District and want financial assistance with your medical bills, you must apply within **30 days** of your discharge.
Registering for a Gold Card is one of the best things you can do for yourself and your family.

To register for a Gold Card, you can call the hotline number listed below. You can schedule an interview with a Gold Card representative. There are several eligibility centers located throughout Harris County. Schedule your interview at the location nearest you.

Harris County Hospital District’s Gold Card Hotline
(713) 566-6691

Once you receive your Gold Card, you will be assigned to the Community Health Center closest to your home. This is where you and your family will receive your primary health care.

Harris County Hospital District Eligibility Centers

<table>
<thead>
<tr>
<th>Southwest Eligibility Center</th>
<th>East Mount Houston Eligibility Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>6654 Hornwood</td>
<td>11737B Eastex Freeway</td>
</tr>
<tr>
<td>Houston, TX 77074</td>
<td>Houston, TX 77039</td>
</tr>
<tr>
<td>(713) 995-3500</td>
<td>(281) 372-3100</td>
</tr>
<tr>
<td>8 a.m. – 4:30 p.m.</td>
<td>8 a.m. – 4:30 p.m.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>South Loop Eligibility Center</th>
<th>Strawberry Eligibility Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>5959 Long Drive</td>
<td>927 Shaw Rd.</td>
</tr>
<tr>
<td>Houston, TX 77087</td>
<td>Pasadena, TX 77506</td>
</tr>
<tr>
<td>(713) 643-3691</td>
<td>(713) 740-8180</td>
</tr>
<tr>
<td>8 a.m. – 4:30 p.m.</td>
<td>7:30 a.m. – 4:30 p.m.</td>
</tr>
</tbody>
</table>

Check out their website at:

http://www.hchdonline.com

Click the link “Patient Information” and then click “Financial Assistance.”
As I look in the mirror, I see the results of my actions. To many, the scars are apparent and to others, they’re not there. I touch my scars lightly, remembering the story behind them. Thoughts run through my mind and my pulse beats a little faster. My heart is full but not heavy. I am alive.

I roll down the window of my truck as the dawn of a new day greets me. I feel God’s warmth with every sunray. The soft wind blows gently, enhancing the cool morning. A bird flies by and sings his song of joy for a new day, as the sky is streaked with pink and light blue. I am well.

Another reminder of how blessed I am to see another day. I am so thankful that God has more for me to do. December 17, 2008 marks the sixth birthday of my new life. There are so many people who I would like to give a special thank you on this day. First and foremost I thank God above for all the blessings He has given and all of the blessings He continues to give. I thank Susannah, my best friend and my beautiful wife for all of her support. I am thankful for the men’s bible study and everyone there. And I am thankful for everyone I have met and continue to meet.

To think of how much I took for granted makes me want to cry but I don’t because I know He wants me to rejoice and be happy. The happiness is in abundance, more than is shown to the outside world. Lurking, but seen by few. I love Jesus, I love life, I am loved and I have much to give. I try to give back a scraping of the blessing that has been given to me. I am still recovering and will be for the rest of my life.

I have learned, no matter what I have or don’t have I can still do God’s work. Sometimes a simple smile or kind word will change someone’s day.
This is something I wrote for the sixth birthday of my new life.
I wanted to share with you to never give up.

Each day we see is a blessing and never give up Hope!
Keep on living!!
I HAVE A WHAT?!
A Guide for Coping with Mild TBI

Rehabilitation Research and Training Center (RRTC) on Community Integration of Persons with Traumatic Brain Injury at TIRR Memorial Hermann
2323 S. Shepherd Dr., Ste. 907
Houston, Texas 77019
(713) 630-0515
(713) 630-0529 (Fax)
www.tbicommunity.org

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