CALL FOR NOMINATIONS:
Seven Prestigious ACRM Awards

Would you like to see one of your colleagues recognized for their contributions, improving the lives of individuals with a disability? Now is your chance to make that happen.

ACRM honors members in a variety of ways. This year, two awards include the opportunity for the award winner to present a lecture during the 2013 Annual Conference, Progress in Rehabilitation Research, in Orlando, Florida.

The John Stanley Coulter Lecturer Award honors John Stanley Coulter, MD, in celebration of his many contributions to rehabilitation. A past president of ACRM (1925), he also served as treasurer and editor of the Archives of Physical Medicine and Rehabilitation. The recipient of this award will be someone with a long history of contributions to rehabilitation research.

The Deborah L. Wilkerson Early Career Award recognizes an ACRM early career member who is within five years of completion of their training. This award winner is making a significant contribution to rehabilitation research, and has been the senior author on research papers. This award is named for Deborah L. Wilkerson, who said this of her experience as an ACRM member: “The personal and professional reward for me has been enormous, and I hope we can attract more young researchers into this opportunity.”

Other awards recognize service to ACRM and the cause of rehabilitation. The Edward Lowman Award is given to a member whose career reflects an energetic promotion of the spirit of interdisciplinary rehabilitation. The Distinguished Member Award is given to members who have made significant contributions to rehabilitation research or have had a long career in the field. See NOMINATIONS continued on page 11
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The new ACRM Early Career Networking Group is wasting no time getting organized and planning exciting programming and career development opportunities in support of ACRM early career professionals.

Meet our new chair-elect: **Megan Damcott, PhD** is a postdoctoral fellow in a joint program between Kessler Foundation Research Center and University of Medicine and Dentistry of New Jersey (UMDNJ). She received her doctoral degree in biomedical engineering from New Jersey Institute of Technology (NJIT) and UMDNJ in August 2011. Dr. Damcott's training is in rehabilitation engineering and biomechanics, with her primary research interest focused on interventions stimulating bone and muscle health in non-ambulatory populations.

Meet our new secretary: **Chari I. Hirshson, PhD** recently completed a neuropsychology research postdoctoral fellowship in the Department of Rehabilitation Medicine at Mount Sinai School of Medicine in New York, NY. She received her PhD in clinical psychology from Ferkauf Graduate School, Yeshiva University and Albert Einstein School of Medicine in Bronx, NY. Dr. Hirshson has been a principal investigator on a number of studies under the umbrella of the New York TBI Model System, the Injury Control Research Center at Mount Sinai, the Rehabilitation Research and Training Center on TBI Interventions, and the Research and Training Center on the Community Integration of Individuals with TBI at Mount Sinai. She is a member of the American Congress of Rehabilitation Medicine and the Brain Injury Interdisciplinary Special Interest Group. She has presented widely on TBI-related topics and neuropsychology.

The Early Career Development Course Task Force met on 11 February to begin developing this fantastic course for the 90th Annual ACRM Conference. This dynamic pre-conference course is an attendee favorite specifically designed to support early career professionals interested in expanding their networking opportunities and receiving guidance for career development and advancement. There is still time for you to get involved. Contact the task force chair, Dr. Pru D’Amato at P.PlummerDAmato@neu.edu for additional information.

Other exciting task forces now forming include the Communications Task Force and the Early Career Physicians Task Force. The Communications Task Force finds and disseminates important announcements relevant to promoting careers in the rehabilitation field, including information on grant writing, publications, job interviews, promotion and tenure, and much more.

The Early Career Physicians Task Force aims to help early career physicians improve their skills in developing and carrying out research ideas, and implementing evidence-based medicine in their practice. They also plan to disseminate information about grant options for physicians, as well as announcements for fellowship and other educational opportunities, both locally and internationally. Contact Dawn Neumann at dmneuman@iupui.edu to learn more and get involved.

**Please Welcome Chelsea T. Shufelt, PsyD**

I was born and raised in Connecticut. My studies in the field of psychology have allowed me the opportunity to live in South Carolina, Washington DC, Ohio, and Atlanta, Georgia. I completed a two-year APPCN neuropsychology fellowship at Shepherd Center and was fortunate to be offered a position! I am very thankful to have the opportunity to work as a clinical neuropsychologist at Shepherd Center, within the acquired brain injury program at Shepherd Pathways. Current clinical interests include how behavioral, emotional, and cognitive factors influence individual and family adjustment to injury. I work from a holistic and biopsychosocial framework and greatly value a multi-disciplinary approach to rehabilitation interventions.

I am honored to have been granted the opportunity to serve as the editor of Rehabilitation Outlook. Please submit articles and content ideas directly to: Chelsea_Shufelt@Shepherd.org

**What’s New with the Early Career Networking Group?**

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Introducing the WFNR Neuropsychological Rehabilitation Special Interest Group

By Jim Malec, PhD, Robyn Tate, PhD, and Barbara Wilson, PhD

The WFNR Neuropsychological Rehabilitation Special Interest Group (NR-SIG) is an international group devoted to expanding knowledge of neuropsychology relevant to rehabilitation for individuals with acquired brain injury. “Neuropsychological rehabilitation” research is defined by the group in its broadest terms and includes studies ranging from measurement and assessment techniques to behavioral and pharmaceutical interventions to family and social dynamics in brain injury.

The major activity of the NR-SIG is organizing the two—day annual conference — always held in an exotic location! Attended by 150-200 professionals representing a wide range of rehabilitation disciplines from around the world, this meeting offers a truly international perspective on the leading edge of brain injury rehabilitation research. The scientific program frequently includes presentation of clinical models and research in order to understand and improve function at both the individual and social levels.

Presentations typically include a combination of new advances in areas such as, instrument development, cutting-edge methodologies pertinent to neurorehabilitation (e.g., statistics for single-subject designs, developing prediction equations, item-response theory), presentation of rare cases, and application of new technologies (including internet-based therapies and brain-computer interfaces).

Papers are presented in a single venue, without breakout sessions, in three formats: traditional platform, poster presentations, as well as datablitz presentations in which presenters have five minutes at the podium to review the major points of a displayed poster. All conference abstracts are published in Brain Impairment.

The NR-SIG held its initial symposium in 2004 at Uluru (Ayres Rock), Australia. During the meeting, a formation in the shape of a brain was spotted at Uluru and subsequently became the NR-SIG’s logo (see picture). This first meeting was held following the mid-year International Neuropsychological Society Conference in Brisbane, Australia. The NR-SIG continues to meet annually following mid-year International Neuropsychological Symposium Conferences.

Subsequent NR-SIG meetings were held in Galway, Ireland; Liechtenstein; San Sebastian, Spain; Iguacu Falls, Brazil; Tallinn, Estonia; Krakow, Poland; Rotorua, New Zealand; and Bergen Norway. The 2013 meeting will be held in Maastricht, Netherlands on 8 – 9 July (http://mers.vpweb.com.au/10th-SIG-Conf.html). All are welcome.

Currently Barbara Wilson, PhD (UK) is convenor of the NR-SIG; Robyn Tate, PhD (Australia) is secretary; and ACRM member, James Malec, PhD (US) is treasurer. These individuals and four other members-at-large form the Executive Committee and manage the organization and the annual meeting with the assistance of a local meeting chair and a professional meeting organizer, Margaret Eagers.

Where in the World is Jenny Richard?

Watch for Jenny Richard, Director of Member Services, and the ACRM exhibit booth at your next professional conference. It’s a great way to introduce a colleague to ACRM and win exciting prizes. Ask Rose Donnelly. She visited the ACRM booth at the International Stroke Conference in Honolulu, HI and won the drawing for an Apple Gift Card.

Another lucky winner will receive a copy of the Cognitive Rehabilitation Manual: Translating Evidence-Based Recommendations into Practice when Jenny heads to the 8th Annual Brain Injury Rehabilitation Conference in Carlsbad, CA, 22 – 23 March. Stop by and say “hello!”
Postdoctoral Fellow Opportunities

The University of Texas Medical Branch at Galveston has postdoctoral positions available for qualified persons interested in disability and rehabilitation research. Opportunities are available in the following research areas: Aging and geriatric rehabilitation, Clinical and community rehabilitation, Population-based health services rehabilitation, and the Muscle biology of rehabilitation. The successful candidate will develop a plan with an experienced mentor, receive training in the desired research area, write scientific papers, assist with grant development, present papers at national meetings, and assist with progress and scientific technical reports.

Qualifications include a doctoral degree and training in a discipline related to rehabilitation, disability or recovery. The position is supported by a grant from the National Institute on Disability and Rehabilitation Research (grant# H133P110012). Application and requirements can be found at http://rehabsciences.utmb.edu/postdoctoral.asp. Application form, CV and three letters of reference should be emailed to B. Cammann at rehab.info@utmb.edu or by mail to UTMB Rehabilitation Sciences, 301 University Blvd., Galveston, TX 77555-1137.

The University of Texas Medical Branch at Galveston is an equal opportunity, affirmative action institution which proudly values diversity. Candidates of all backgrounds are encouraged to apply.

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MEET THE ACRM BOARD

Part of a continuing series highlighting ACRM Board Members

CINDY HARRISON-FELIX, PHD
Assistant Director
Research Department
Craig Hospital, Englewood, CO, USA
Assistant Clinical Professor
Department of Physical Medicine and Rehabilitation
University of Colorado, Denver, CO, USA
CHarrison-Felix@CraigHospital.org

Dr. Harrison-Felix is assistant director of research at Craig Hospital in Englewood, CO; project director for the Traumatic Brain Injury Model Systems National Data and Statistical Center; and co-project director for the Rocky Mountain Regional Brain Injury System. She is also assistant clinical professor in the Department of Physical Medicine and Rehabilitation at the University of Colorado, in Denver. Since her educational background focused on epidemiology and clinical science, her expertise became designing and conducting rehabilitation research studies. Dr. Harrison-Felix’s primary focus is on TBI, including observational and clinical studies, and also managing and analyzing large databases. She was first attracted to ACRM as a conference attendee and presenter in 1985 and after many years of participation, joined ACRM in 2000. She is also an active member of the Brain Injury Interdisciplinary Special Interest Group (BI-ISIG). ACRM is her primary professional organization, she explained, because as a rehabilitation researcher, ACRM fits well with her career. This is Dr. Harrison-Felix’s second year as ACRM Board of Governors Secretary responsible for the bylaws, and the ACRM Policies and Procedures Manual. She also chairs the Bylaws, Policies and Procedures Committee.
Join Colleagues and Task Force Members at the 2013 ACRM Mid-Year Meeting

By Lance E. Trexler, PhD, HSPP, BI-ISIG Chair

The 2013 ACRM Mid-Year Meeting promises to be one of the most well-attended and engaging meetings ever! It will include meetings of all Brain Injury Interdisciplinary Special Interest Group (BI-ISIG) task forces, task force chairs, and the Executive Committee, as well as a special update on advocacy progress on Capitol Hill.

In addition to BI-ISIG groups, several others will participate in the Mid-Year Meeting this year, including the International Networking Group and its task forces, the Early Career Networking Group, the Chair Council and the SCI-ISIG.

The ACRM BI-ISIG mission is to promote and advance the knowledge and practices of rehabilitation specialists and other professionals concerned with the rehabilitative management of persons with brain injury and their families. The group currently comprises over 400 members and provides opportunities for networking with other professionals engaged in brain injury rehabilitation, identifying and promoting research priorities, and working with leaders in the field of rehabilitation research.

As a unique opportunity, the BI-ISIG offers membership in one or more of its task forces that address specific areas in BI rehabilitation research and practice. We currently have eight active task forces including, Cognitive Rehabilitation, Community-Based Treatment, Disorders of Consciousness, Girls and Women with ABI, Long-Term Issues, Mild TBI, Pediatric and Adolescent, and Prognosis after TBI.

The ACRM Mid-Year Meeting will be held Friday and Saturday, 26 – 27 April at the Hilton Baltimore in Baltimore, Maryland. It is an informal “working” meeting that allows task forces to share progress and plans made since the last meeting and to meet as a group to conduct work that may be difficult to accomplish via teleconference.

Once again this year, the BI-ISIG will sponsor two days of evidence-based cognitive rehabilitation training on Wednesday, 24 April and Thursday, 25 April preceding the Mid-Year Meeting. Please visit http://www.acrm.org/meetings/cognitive-rehab-training for details. The ACRM Cognitive Rehabilitation Manual has sold nearly 600 copies to rehabilitation professionals from the United States, Canada, Europe, and several Pacific Rim countries. To date, workshops have been conducted in San Francisco, Nashville, and Vancouver and all received very favorable reviews from participants. Future workshops are being scheduled in Los Angeles and Stockholm.

We will also introduce participants of the Cognitive Rehabilitation Training to the BI-ISIG and the Spinal Cord Injury Interdisciplinary Special Interest Group (SCI-ISIG) in order to promote awareness of ACRM among potential constituents.

The ACRM Mid-Year Meeting agenda (see page 7) is designed to allow most participants to fly in on a Friday morning and leave mid-to-late-afternoon on Saturday to minimize hotel costs. Some task forces that require substantial face-to-face time will arrive Thursday evening and work a 4-hour block of time on Friday morning in addition to Friday afternoon and/or Saturday. We have scheduled the days and times of task force meetings to allow members to attend at least their top two task force meetings of choice.

Please join the hundreds of dedicated rehabilitation professionals at the ACRM Mid-Year Meeting and be a part of our progress. We look forward to seeing everyone in Baltimore!

Register:
www.ACRM.org/mid-year
Mid-Year Meeting Agenda

FRIDAY, 26 APRIL
7:00 AM – 6:00 PM
 Registration
7:30 AM – 9:00 AM
 Cognitive Rehabilitation Manual Committee
8:00 AM – 9:30 AM
 International Networking Group Business Meeting
8:00 AM – 10:00 AM
 BI-ISIG Mild TBI Task Force
9:30 AM – 12:00 PM
 International Networking Group Conference Planning TF
9:30 AM – 12:00 PM
 International Networking Group Marketing Task Force
9:30 AM – 12:00 PM
 International Networking Group Research Organization TF
9:30 AM – 12:00 PM
 BI-ISIG Prognosis Task Force
10:00 AM – 11:00 AM
 BI-ISIG Executive Committee Prep Meeting
11:00 AM – 12:00 PM
 BI-ISIG Community-Based Treatment TF
12:00 PM – 1:00 PM
 Update from Capitol Hill: ACRM Lobbyists, Bobby Silverstein and Peter Thomas Powers of Pyles, Sutter & Verville, PC
1:00 PM – 2:00 PM
 BI-ISIG Business Meeting
1:00 PM – 5:00 PM
 BI-ISIG Disorders of Consciousness Task Force
2:00 PM – 4:00 PM
 BI-ISIG Girls & Women with ABI Task Force
3:00 PM – 5:00 PM
 BI-ISIG Cognitive Rehabilitation Task Force
3:00 PM – 5:00 PM
 Early Career Networking Group
5:00 PM – 7:00 PM
 Chair Council Meeting

SATURDAY, 27 APRIL
7:00 AM – 12:00 PM
 Registration
7:30 AM – 9:00 AM
 BI-ISIG Mild TBI Task Force
8:00 AM – 10:00 AM
 BI-ISIG Cognitive Rehabilitation Task Force
8:00 AM – 12:00 PM
 SCI-ISIG Business Meeting
10:00 AM – 12:00 PM
 BI-ISIG Girls & Women with TBI Task Force
10:00 AM – 12:00 PM
 BI-ISIG Disorders of Consciousness TF
10:00 AM – 12:00 PM
 BI-ISIG Long-Term Issues Task Force
10:00 AM – 12:00 PM
 BI-ISIG Pediatric & Adolescent Task Force
12:00 PM – 1:30 PM
 BI-ISIG EC & TF Chairs Annual Workplan

REGISTER: www.ACRM.org/mid-year

“At the ACRM MID-YEAR MEETING, this is where the real WORK happens, and you get to meet and work with the leaders in the field.” — ACRM President Tamara Bushnik, PhD
UPDATE FROM THE SECRETARY:
Changes to the ACRM Bylaws and the ACRM Policies and Procedures Manual

By Cindy Harrison-Felix, PhD

As secretary of ACRM, I am also the chair of the ACRM Bylaws, Policies and Procedures Committee, which is responsible for the ACRM Bylaws and the ACRM Policies and Procedures Manual.

In this role, the committee is responsible for updating the Bylaws with any changes approved by the ACRM Board of Governors (BOG) and notifying the ACRM membership of these changes.

Recently the board approved a change to the ACRM Bylaws as follows (the changed language is indicated in **red**):

“The President, President-Elect, Immediate Past President, Treasurer and Secretary shall serve for two year terms.”

“The Secretary and Treasurer shall be elected by the Voting members in alternate years for and serve concurrent two-year terms.”

In October of 2012 the ACRM BOG approved the first official version of the ACRM Policies and Procedures Manual. This Manual contains everything you ever wanted to know about how ACRM functions as an organization. The Manual will be updated quarterly and approved by the ACRM BOG annually.

The Table of Contents from the Manual is on the next page so you can see the wealth of information that is contained in this document, and will know where to go if you have a question about a particular aspect of ACRM. Since the approval of the Manual, the following items have been approved by the BOG and will be updated in the next version of the Manual:

- The Early Career Committee is now the Early Career Networking Group

- The Consumer Relations Committee became part of the Communications Committee

- The name of Chairs Committee has been changed to the Chairs Council

- The Chair of the Chairs Council is now the President-Elect

- The Fiscal Year for ACRM is now January to December

If you have questions about the ACRM Bylaws or the Manual, please do not hesitate to contact me, Cindy Harrison-Felix, PhD, Secretary ACRM at CHarrison-Felix@CraigHospital.org.

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INSTRUCTIONS to VIEW the ACRM Policy & Procedures Manual

ACRM members may access or download the Manual by following these instructions:

- Go to the www.ACRM.org
- Click on “Member Login” top right
- Log in by entering your primary email address and your password
- Click on “Online Store”
- Click on “ACRM Policy & Procedure Manual”
- Click on “Add to Cart”
- Click on “Proceed to Checkout”
- Click on “Submit Order”
- Click on “View my Purchases”
- Click on “My downloadable Products”
- Click on ACRM Policy & Procedure Manual and choose to open or save it.
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RESTON, Virginia – The rehabilitation community has lost a talented and much-beloved colleague. Dr. Robert C. Wagenaar passed away after a brief cardiac-related illness on February 13, 2013. Robert was a well-respected scientist, thoughtful mentor, and a cherished friend to many of his colleagues.

Robert earned his PhD in Human Movement Sciences at Vrije University, Amsterdam. He joined the faculty of Boston University, Sargent College of Health and Rehabilitation Sciences, in 2001, and was appointed chair and professor of the Department of Physical Therapy and Athletic Training in 2005.

Robert and his family recently returned to Holland, where he took on a new role as professor and department chair in Clinical Health Sciences at the University Medical Center in Utrecht.

Robert was a skilled scientist and highly regarded for his work in dynamical systems theory. He studied gait patterns in patients with stroke and Parkinson's disease, and investigated rehabilitation interventions to modify abnormal movement patterns. He was the essence of a translational research scientist, transforming theory to clinical practice in rehabilitation.

Robert was also a devoted educator and mentor to many graduate students, post-doctoral students, and junior colleagues. His mentees have emerged as leaders in their own areas of work. Robert was also a beloved husband to his wife Maud, father to son, Reyn and daughter, Carlijn, and a dear friend and colleague to many.

Robert came to ACRM as a volunteer by way of our, then annual meeting partner ASNR. From 2010 to the present, he served as co-chair of the Program Committee. He was instrumental in dramatically improving the caliber of scientific presentations at the annual meeting.

Long-time colleague and fellow Program Committee co-chair, Virginia Mills, remembers Robert this way, “Robert loved what he did. He had a passion and you could just feel it being with him. Most of all, he was a real gentleman. He was kind and always went out of his way to acknowledge others. I always felt so appreciated by him.”

Most remarkable about Robert was his approachable and engaging demeanor. Colleagues were naturally drawn to his enthusiastic support and respect for good science.

“In all of my interactions with Robert, I never observed a time when he and his company were not positively enjoying the moment,” noted Jon Lindberg, CAE, MBA, ACRM Chief Executive Officer. “Robert was always patient, yet continued to have high expectations for himself, his work, and the professional community.”

Susan Fasoli, fellow ACRM Program Committee member, perhaps summed up best the sentiment shared by many of Robert's colleagues: “He was an excellent scientist, researcher and mentor, who took a genuine interest in both teaching and learning with others. He was a true gentleman, loving father and husband, who enjoyed a good laugh over a cold beer.”

Many people will mourn the loss of Robert. His family will miss him most of all. We hope they will take comfort in the fact that so many friends and colleagues will miss him, too, for the many contributions he made to our lives and work.
NOMINATIONS continued from page 1

honors a member who has provided extraordinary service to ACRM. The Gold Key Award is given to a member or non-member of ACRM, who over the course of his/her career has rendered extraordinary service to rehabilitation research. This award is the highest award given by the ACRM Board of Governors each year.

The newest ACRM award, which will be presented for the first time in 2013, is in memory of Mitchell Rosenthal, PhD. The Mitchell Rosenthal Memorial Award will be given to a member of ACRM who is mid-career, six to 15 years after completion of training. The winner will be one who demonstrates leadership and significant contributions while involved in current brain injury rehabilitation research.

Each year, the Elizabeth and Sidney Licht Award is given to the authors of a paper published in the Archives of Physical Medicine and Rehabilitation that is selected by the ACRM Board of Governors, based on recommendations from the Archives Editorial Board. The chosen paper is recognized for the quality of its scientific writing and its significance to disability research.

Visit the ACRM website at ACRM.org/about/awards for more information about the criteria and nomination requirements for each award. Take a moment to look around you, see the good work being done, and send a nomination of a worthy candidate for an ACRM award to Terri Compos, Community Relations Manager at tcompos@ACRM.org. Nominations are due 1 April 2013. Selections will be made by the ACRM Awards Committee by 1 June 2013.

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