

Center Headquarters

Walter Reed Army Medical Center
Washington, DC

Lead Sites

Walter Reed Army Medical Center
Washington, DC

Naval Medical Center San Diego
San Diego, CA

**Wilford Hall Medical Center/ Brooke
Army Medical Center**
Lackland Air Force Base/
Fort Sam Houston, TX

James A. Haley Veterans Hospital
Tampa, FL

**Minneapolis Veterans Affairs
Medical Center**
Minneapolis, MN

**Veterans Affairs Palo Alto Health
Care System**
Palo Alto, CA

**Hunter McGuire Veterans Affairs
Medical Center**
Richmond, VA

Lakeview Virginia NeuroCare, Inc.
Charlottesville, VA

Satellite Clinics

Fort Bragg, NC
Camp Pendleton, CA

Defense & Veterans Brain Injury Center

**Home of the Defense and Veterans
Head Injury Program (DVHIP)**

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Defense & Veterans Brain Injury Center



***A Congressional Program
for Service Members
and Veterans with
Traumatic Brain Injury
and their Families***

Defense and Veterans Brain Injury Center— Providing Care for Soldiers and Veterans with Traumatic Brain Injury

America's armed forces in Iraq and Afghanistan have sustained numerous attacks from weapons such as rocket-propelled grenades, improvised explosive devices and land mines. Soldiers suffering injuries from these devices require specialized care from providers experienced in treating traumatic brain injury (TBI). Since 1992, the Defense and Veterans Brain Injury Center (DVBIC) has provided leading edge care, conducted clinical research and offered education programs on TBI to active duty service members and veterans.



Sixty-four percent of soldiers recently wounded in action in Operation Iraqi Freedom sustained blast injuries, according to the Office of the Surgeon General of the Army. Such injuries are a major area of focus for DVBIC, which operates at seven military and VA sites and one civilian treatment site. Headquartered at

Walter Reed Army Medical Center—the site that receives more casualties from theaters of operations than any other military treatment facility—DVBIC is at the forefront of efforts to screen and treat soldiers for TBI.

Unlike penetrating head injuries, closed head injuries --- such as those that often result from blasts --- may not be diagnosed immediately. At Walter Reed, DVBIC's expert clinical staff review daily incoming casualty reports and identify patients who have sustained injuries caused by blasts, falls or motor vehicle crashes. From January 2003 to January 2005, DVBIC staff evaluated and treated 437 TBI patients from the conflicts in Iraq and Afghanistan.



One of the Center's primary objectives is to utilize results from the clinical research it conducts to develop evidence-based standards of care. DVBIC staff have also developed a screening process that has proven invaluable in identifying individuals who sustain mild traumatic brain injury in association with other injuries initially the focus of medical attention.



Although recovery from mild brain injuries (concussions) is generally uncomplicated and complete, some individuals continue to experience cognitive or mood difficulties. These injured soldiers require specialized care from providers skilled in treating TBI. The treatment provided by DVBIC staff focuses on returning patients to the highest level of function possible. Rehabilitation and education are key elements in treating TBI.

DVBIC is leading the initiative to provide evidence-based guidelines for assessment and follow-up care after blast-related TBI within the military environment. By continuing to carry out expanded clinical interventions aimed at identifying and treating TBI, DVBIC is contributing to all our nation's efforts to ensure maximum military readiness.