



Continuing Education Questionnaire

Write Your Name:

Once this form is completed, please submit to institute@neurorestorative.com

“Pediatric TBI: An Introduction”

1. Children with TBI may experience deficits as compared to their age matched peers in the areas of:
 - A. Communication**
 - B. Attention**
 - C. Judgment**
 - D. Behavior**
 - E. All Of The Above**
2. The Clinician has a role in educating the following team members about TBI and the sequelae of TBI
 - A. Teachers**
 - B. Parents**
 - C. The Student**
 - D. Coaches**
 - E. All Of The Above**
3. A child’s TBI signs and symptoms will resolve within
 - A. Two months**
 - B. Six months**
 - C. One year**
 - D. Two years**
 - E. Unknown**
4. Problems arising from brain injury sustained at a young age may emerge:
 - A. Immediately**
 - B. Within 2 months**
 - C. Within 6 months**
 - D. Within 2 years**
 - E. As the child is expected to reach various developmental milestones**
5. “Growing into the injury” refers to:
 - A. A child’s growing brain creating new neuropathways**
 - B. The tendency for deficits to be revealed as a child matures and is expected to become more independent**
 - C. A tendency of parents and providers to be vigilant for signs/symptoms of the injury**
 - D. Tendency for sedentary life style as the child ages, placing the child at risk for obesity**
 - E. Referring to behavioral dyscontrol**



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6. A standardized, well normed and validated language evaluation tool, as recommended by Turkstra et al's 2005 Practice Guidelines for Persons with Traumatic Brain Injury is:

- A. Peabody Picture Vocabulary Test
- B. Clinical Evaluation of Language Fundamentals (CELF-4)
- C. Test of Language Competence – Extended (TLC-E)
- D. Goldman Fristoe Test of Articulation
- E. A language sample

7. Second impact syndrome refers to:

- A. Hematoma / bruising in the area of the cerebrum where trauma has occurred
- B. the catastrophic increase in ICP in athletes with prior concussion with relatively mild second impact
- C. The impact on families following the initial medical stages of their child's recovery from brain injury
- D. The practice of returning a child to sport as soon as pupils are of equal size
- E. A coup-contra coup injury

8. Rubin and Rose-Krasnor found that children with brain injury produced few _____ involving peer-group entry.

- A. Salutations
- B. Age appropriate speech patterns
- C. Correct emotional state labels
- D. Solutions to hypothetical situations
- E. Correct social scripts

9. Ylvisaker et al. (2005) report that behavioral interventions have a reasonably strong evidence base in their application to individuals with TBI, and should be considered by clinicians, but not used in isolation as few studies indicate resulting improvements that transferred to personally meaningful, functional contexts, or that were maintained over time. Other effective social interaction program intervention(s) include:

- A. Modeling
- B. Role-playing
- C. Structured feedback
- D. Behavioral rehearsal
- E. All of the above

10. Current findings suggest that _____ are often persistent after childhood brain injury

- A. Poor social outcomes
- B. Reduced math skills
- C. Need for diet modification
- D. Failing grades
- E. Poor color perception