

**Case Study: Mary Anne**  
**Progress in the years after a severe anoxic brain injury**

This 30 year-old, mother of two children and former medical secretary was admitted to the Neurologic Rehabilitation Institute (NRI) program in May of 2009. Mary Anne had an anoxic brain injury as a result of ventricular fibrillation in November 2004. Following her injury, Mary Anne had significant problems with short-term memory; auditory processing; problem solving; insight; confusion; orientation; organization and attention.

Additionally, she had neurobehavioral problems which included: aggression; hypersexuality; obsessive and ritualized behaviors; elopement attempts; verbal outbursts; impulsivity and severe mood swings. Since her initial injury Mary Anne had experienced: incontinence; seizures; hypothyroidism; hypertension; hypokalemia; episodes of choking and weight loss.

Prior to her admission to the NRI program Mary Anne was in a locked psychiatric hospital due to severe aggression and impulsive and risky behaviors, such as attempting to jump out of a moving automobile. She was unable to care for herself and her children resulting in her parents assuming her guardianship and the parenting responsibilities for her children then 6 and 8.



In the NRI program, Mary Anne's rehabilitation addressed her medical, cognitive and behavioral problems. Her rehabilitation focused on: regaining skills related to activities of daily living; improving her cognitive functions; reducing the frequency and severity of aggressive physical and behavioral outbursts; reducing her inappropriate sexual behaviors and promoting pro-social, cooperative activities with peers and learning about how she could better self-manage the deficits related to her brain injury to support her return to home and parenting.

In October 2010, Mary Anne progressed into the Transitional Living Center program where she lived with six other peers in a large, 6- bedroom, ranch style home located approximately two miles from the hospital campus. In the TLC program, Mary Anne participated in improving her independent living skills and reducing her reliance on staff for constant cues and direction. Her hospital-based rehabilitation program continued on a Monday to Friday schedule and became more focused on functional skills and pre-vocational training to support her planned return home to live with her children and parents.

Mary Anne's return home was celebrated in March 2011. Her family was involved in extensive planning, education and trial visits home in the months prior to her discharge...

Mary Anne was referred to a vocational training program near her home where she could be in a supported work setting for 30 hours a week. Additional services for her health needs were established with a home health agency and an outpatient therapist was secured to help Mary Anne with personal adjustment issues. Since her discharge home Mary Anne's family has kept us up-to-date on her progress. They report that people who haven't seen her since her injury "can't believe it's the same person." Mary Anne has re-established her relationship with her children and has rejoined her family and community. Her progress in the NRI program is a testament to the real changes which can be made years after brain injury.

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