



# NEUROPRAXIS

## 2021 OUTCOMES REPORT

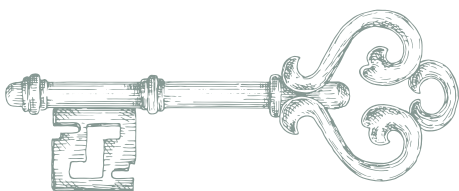
### WHY NEUROPRAXIS?

Every person's brain injury recovery journey is unique, and not everyone progresses at the same rate. It's possible that those people who had not achieved a good recovery at the sixth-month mark, may achieve it after a year, or even five years later.

The clinicians and medical staff at Neuropraxis understand that no two brain injuries are the same and not everyone heals at the same rate. That's why there is such a need for a continuum of high-quality, post-acute care and rehabilitation for people with brain injuries in a home and community setting.



### OUR PROGRAM HELPS UNCOVER THE DEFICITS THAT ARE LOCKED AWAY



Neuropraxis is an individualized brain injury rehabilitation program with cutting-edge treatment approaches through occupational therapy, speech therapy, physical therapy, and life skills training in the best setting possible, the real world.

# EXCEPTIONAL OUTCOMES FOR WORKPLACE INJURY



TBI workplace injuries have a life-altering impact on everyone involved, from the injured worker and their families to their employers and community. The Neuropraxis philosophy on this is "a rising tide lifts all boats."

Working toward the best possible outcome not only improves the lives of the worker, but everyone supporting him or her.

## **FUNCTIONAL OUTCOMES:**

- (1) *THE NEED FOR ASSISTANCE*
- (2) *EMPLOYMENT OR PRODUCTIVITY*
- (3) *SOCIAL RELATIONSHIPS*

LOWER MEDICAL COSTS  
RETURN TO WORK



NEUROPRAXIS

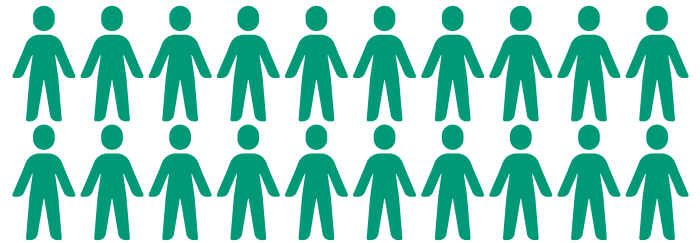
A range of factors can reflect on psychosocial outcomes like employment status, social functioning, activities of daily living, financial status, cognitive impairment and emotional disorders.

Neuropraxis can vastly improve a participant's memory and anxiety, while decreasing pain and fatigue. These achievements help with independence, social relationships, and most importantly going back to work and being a functional whole individual.

According to a survey conducted by Neuropraxis on patients who had completed the home and community re-integration program, 20 out of 20 reported vast improvements in the areas of: anxiety, fatigue and sensitivity to mild symptoms.

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*ANXIETY IMPROVED IN  
20 OUT OF 20  
PARTICIPANTS*



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*FATIGUE DECREASED IN  
20 OUT OF 20  
PARTICIPANTS*



### About Participants:

- Average Age at Injury: 46
- 96% Male
- Average Length of Stay: 5 Months

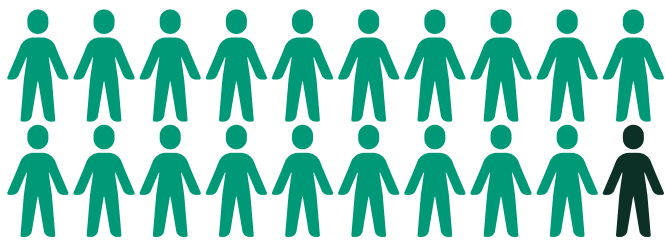
BETTER LIFE



According to the same survey, 19 out of 20 reported substantial improvements with memory, pain & headaches, impaired self-awareness and social contact with friends.

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MEMORY IMPROVED  
IN 19 OUT OF 20  
PARTICIPANTS



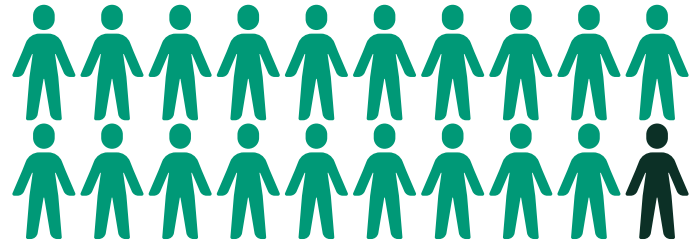
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PAIN & HEADACHES  
DECREASED IN  
19 OUT OF 20  
PARTICIPANTS



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IMPAIRED SELF-  
AWARENESS  
IMPROVED IN  
19 OUT OF 20  
PARTICIPANTS



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SOCIAL CONTACT WITH  
FRIENDS INCREASED IN  
19 OUT OF 20  
PARTICIPANTS

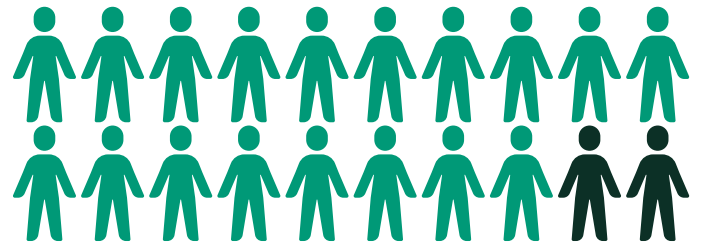




Additionally, 18 out of 20 reported substantial improvements with attention & concentration, and depression.

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ATTENTION &  
CONCENTRATION  
IMPROVED IN 18  
OUT OF 20  
PARTICIPANTS



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DEPRESSION  
DECREASED IN  
18 OUT OF 20  
PARTICIPANTS

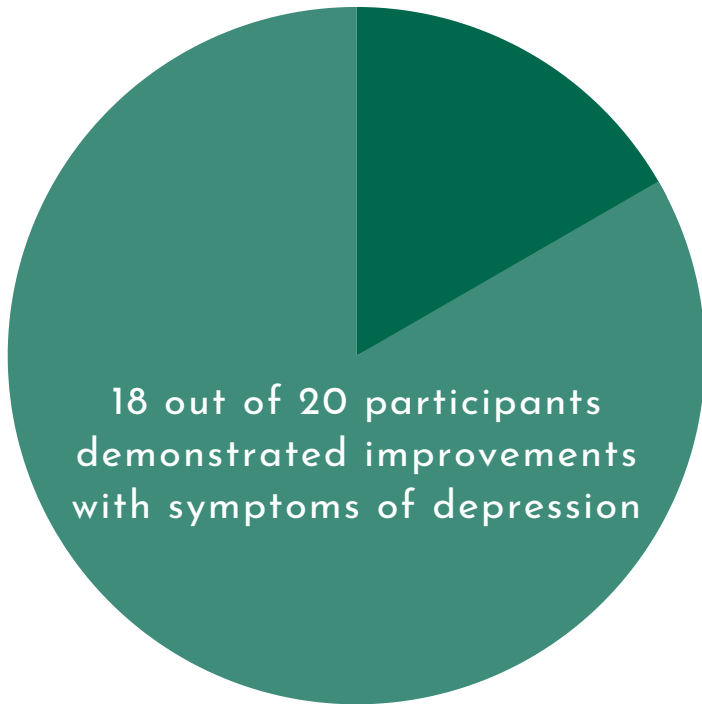


## SYMPTOMS OF ANXIETY IMPROVED SIGNIFICANTLY

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According to a survey conducted by Neuropraxis on patients who had completed the home and community re-integration program, 20 out of 20 reported that they had a vast improvement in anxiety.

20 out of 20 participants  
demonstrated improvements  
with symptoms of anxiety



18 out of 20 participants  
demonstrated improvements  
with symptoms of depression

SYMPTOMS OF  
DEPRESSION IMPROVED  
IN 18 OUT OF 20  
PARTICIPANTS

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# OUTCOMES METHODOLOGY

The evaluation used for the Outcomes Report is the Mayo-Portland Inventory, which is used to evaluate an individual with a traumatic brain injury. The MPAI is administered after an individual is out of the hospital. This tool is helpful for clinical evaluation during rehabilitation.



## MAYO-PORTLAND INVENTORY

The MPAI evaluates the most frequent problem areas that individuals can experience after hospitalization for brain injury. These are ability, adjustment and participation, and include categories for body movements, thinking skills, emotions, behavior and social skills.



### EMOTIONAL CHANGES INCLUDE:

- DEPRESSION
- ANXIETY
- MOOD SWINGS
- IRRITABILITY
- LACK OF EMPATHY FOR OTHERS
- ANGER

### BEHAVIORAL CHANGES INCLUDE:

- DIFFICULTY WITH SELF-CONTROL
- LACK OF AWARENESS OF ABILITIES
- RISKY BEHAVIOR
- DIFFICULTY IN SOCIAL SITUATIONS
- VERBAL OR PHYSICAL OUTBURSTS
- INSOMNIA



# ABOUT NEUROPRAXIS

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Neuropraxis is bridging the gap in the continuum of brain injury rehabilitation by providing individualized outcome-oriented programs and evidence-based practices that are geared toward preventing long-term risks, such as re-hospitalization, further complications, and skill regression, that often occur after other extensive and costly brain injury rehabilitation programs.



## WHY NEUROPRAXIS?

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At Neuropraxis, we are driven by a profound commitment to helping each individual reintegrate back into their community and actively pursue independence and well-being.

Effective rehabilitation is more than healing through therapy - it's about rebuilding lives.



## OUR MISSION

To provide an outcome-oriented home and community brain injury program through an integrated, individualized, and evidence-based treatment approach, which maximizes independence, rebuilds lives, and supports an enhanced quality of life.

*"We cannot repeat what we have always done and expect a different outcome."*

Christine Weaver, MAS, OTR/L,  
CLCP, CBIS, C/NDT Founder/CEO

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