MEMORANDUM FOR MCHE-ZDM-N  
ATTN: LISA H. LU

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

1. Your paper, entitled *The Influence of Medical Evaluation Board Status on Symptom Reporting Among Service Members with Traumatic Brain Injury* presented at/published to 2017 Military Health System Research Symposium (MHSRS); *Date/Location To Be Determined* in accordance with MDW 41-108, has been approved and assigned local file #17181.

2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.

3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are a 59 MDW staff member, we can forward your request for funds to the designated Wing POC at the Chief Scientist’s Office, Ms. Alice Houy, office phone: 210-292-8029; email address: alice.houy.civ@mail.mil.

4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

[Signature]

LINDA STEEL-GOODWIN, Col, USAF, BSC  
Director, Clinical Investigations & Research Support

*Warrior Medics — Mission Ready — Patient Focused*
PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS

INSTRUCTIONS

USE ONLY THE MOST CURRENT 59 MDW FORM 3039 LOCATED ON AF E-PUBLISHING

1. The author must complete page two of this form:
   a. In Section 2, add the funding source for your study (e.g., 59 MDW CRD Graduate Health Sciences Education (GHSE) (SGS QM); SGS R&D; Tri-Service Nursing Research Program (TSNRP); Defense Medical Research & Development Program (DMRP); NIH; Congressionally Directed Medical Research Program (CDMRP); Grants; etc.)
   b. In Section 2, there may be funding available for journal costs, if your department is not paying for figures, tables, or photographs for your publication.
      Please state "YES" or "NO" in Section 2 of the form, if you need publication funding support.

2. Print your name, rank/range, sign and date the form in the author's signature box or use an electronic signature.

3. Attach a copy of the 59 MDW IRB or IACUC approval letter for the research related study. If this is a technical publication/presentation, state the type (e.g., case report, QA/QI study, program evaluation study, informational report/briefing, etc.) in the "Protocol Title" box.

4. Attach a copy of your abstract, paper, poster and other supporting documentation.

5. Save and forward, via email, the processing form and all supporting documentation to your unit commander, program director or immediate supervisor for review/approval.

6. On page 2, have either your unit commander, program director or immediate supervisor:
   a. Print their name, rank/range, title; sign and date the form in the approving authority's signature block or use an electronic signature.

7. Submit your completed form and all supporting documentation to the CRD for processing (59crdpubspres@us.af.mil). This should be accomplished no later than 30 days before final clearance is required to publish/present your materials. If you have any questions or concerns, please contact the 59 CRD/Publications and Presentations Section at 292-7141 for assistance.

8. The 59 CRD/Publications and Presentations Section will route the request form to clinical investigations, 502 ISGU JAC (Ethics Review) and Public Affairs (59 MDW/PA) for review and then forward you a final letter of approval or disapproval.

9. Once your manuscript, poster or presentation has been approved for a one-time public release, you may proceed with your publication or presentation submission activities, as stated on this form. Note: For each new release of medical research or technical information as a publication/presentation, a new 59 MDW Form 3039 must be submitted for review and approval.

10. If your manuscript is accepted for scientific publication, please contact the 59 CRD/Publications and Presentations Section at 292-7141. This information is reported to the 59 MDW/GC. All medical research or technical information publications/presentations must be reported to the Defense Technical Information Center (DTIC). See 59 MDWI 41-108, Presentation and Publication of Medical and Technical Papers, for additional information.

11. The Joint Ethics Regulation (JER) DoD 5500.07-R, Standards of Conduct, provides standards of ethical conduct for all DoD personnel and their interactions with other non-DoD entities, organizations, societies, conferences, etc. Part of the Form 3039 review and approval process includes a legal ethics review to address any potential conflicts related to DoD personnel participating in non-DoD sponsored conferences, professional meetings, publication/presentation disclosures to domestic and foreign audiences, DoD personnel accepting non-DoD contributions, awards, honoraria, gifts, etc. The specific circumstances for your presentation will determine whether a legal ethics review is necessary. If you (as the author) or your supervisor check "NO" in block 17 of the Form 3039, your research or technical documents will not be forwarded to the 502 ISGU JAC legal office for an ethics review. To assist you in making this decision about whether to request a legal review, the following examples are provided as a guideline:

   For presentations before professional societies and like organizations, the 59 MDW Public Affairs Office (PAO) will provide the needed review to ensure proper disclaimers are included and the subject matter of the presentation does not create any cause for DoD concern.

   If the sponsor of a conference or meeting is a DoD entity, an ethics review of your presentation is not required, since the DoD entity is responsible to obtain all approvals for the event.

   If the sponsor of a conference or meeting is a non-DoD entity or an entity seeking to do business with the government, then your presentation should have an ethics review.

   If your travel is being paid for (in whole or in part) by a non-Federal entity (someone other than the government), a legal ethics review is needed. These requests for legal review should come through the 59 MDW Gifts and Grants Office to 502 ISGU JAC.

   If you are receiving an honorarium or payment for speaking, a legal ethics review is required.

   If you (as the author) or your supervisor check "YES" in block 17 of the Form 3039, your research or technical documents will be forwarded simultaneously to the 502 ISGU JAC legal office and PAO for review to help reduce turn-around time. If you have any questions regarding legal reviews, please contact the legal office at (210) 671-1785/3365, DSN 473.

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement:
"The views expressed are those of the [author(s)] [presenter(s)] and do not reflect the official views or policy of the Department of Defense or its Components"

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving humans:
"The voluntary, fully informed consent of the subjects used in this research was obtained as required by 3 CFR 219 and DODI 3216.02 AFI 40-402."

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving animals, as required by AFMAN 40-401_IP:
"The experiments reported herein were conducted according to the principles set forth in the National Institute of Health Publication No. 80-23, Guide for the Care and Use of Laboratory Animals and the Animal Welfare Act of 1966, as amended."
The influence of medical evaluation board status on symptom reporting among service members with traumatic brain injury
Presentation of IRB approved research with appropriate disclaimers. Approved.
Title: The influence of medical evaluation board status on symptom reporting among service members with traumatic brain injury

Tsagaratos, J.E., Lu, L.H., Cooper, D.B., Reid, M.W., and Kennedy, J.E. Defense and Veterans Brain Injury Center (DVBIC) Department of Neurology (MCHE-ZDM-N), San Antonio Military Medical Center JBSA Fort Sam Houston, Texas 78234

Background
A medical evaluation board (MEB) is initiated by command to determine whether a service member (SM) with medical condition(s) is fit or unfit to perform his or her assigned duties. The results of MEB exams are evaluated to return the SM back to duty or to medically separate him or her. Because a MEB could result in a medical discharge from the military, some SM might diminish the severity of their symptoms out of fear of being discharged. Alternatively, SM might be influenced to exaggerate his or her symptoms in order to receive more benefits. We examined whether MEB status of SM with traumatic brain injury (TBI) influenced scores on two measures of inflated symptom reporting: The Neurobehavioral Symptom Inventory (NSI) validity-10 index, which is composed of symptoms infrequently endorsed by patients with mild TBI, and the Mild Brain Injury Atypical Symptoms scale (MBIAS), which is composed of neurologically improbable symptoms following mild TBI.

Methods
As part of standard operating procedure at the Brooke Army Medical Center, SM who self-reported TBI were interviewed, and those who consented were administered questionnaires. A sample of 212 SMs’ data was analyzed, 149 participants were not in the MEB process and 63 were. 88% of the population were male (n = 190). Out of those who were not going through a MEB, 86% were diagnosed with a mild TBI (N = 128), 10% with a moderate/severe TBI (N = 15). Of those going through a MEB, 87% were diagnosed with a mild TBI (N = 55), 8% with a moderate/severe TBI. The average age of the population was 35 years old (SD = 8.3) and the average number of deployments was 2.3 (SD = 1.7). We examined distribution of participants by MEB status and two measures of potential bias in symptom reporting. Participants with a NSI validity-10 score > 22 and MBIAS > 7 were classified as possibly inflated symptom reporters.

Result
On the NSI validity-10, out of the sample that was undergoing a MEB, 51 out of 63 (81%) received scores above 22, and out of the 149 subjects who were not going through a MEB, 85 (57%) received scores above 22 ($\chi^2(1) = 11.00, p = .001$). On the MBIAS, out of the sample that was undergoing a MEB, 20 out of 62 (32%) received a score above 7, and out of the sample not going through a MEB, 25 out of 148 (17%) scored > 7 ($\chi^2(1) = 6.13, p = .01$).

Conclusion
Those in the MEB process were more likely to have NSI-validity 10 and MBIAS scores above cutoff than those not in the MEB process. This could reflect that those in the MEB process were more likely to exaggerate their symptoms, or that they have more symptoms that contributed to them being in the MEB process. Clinical interviews that rely on open-ended questions and assessment of the potential for over-reporting using instruments with better psychometric
properties are necessary in this population to distinguish probable inflated reporting from false positives.

"The views expressed are those of the authors/presenters and do not reflect the officials views or policy of the Department of Defense or its Components."

"The voluntary, fully informed consent of the subjects used in this research was obtained as required by 32 CFR 219 and DODI 3216.02_AFI 40-401."