

the general law enforcement culture for the currently working officer; managing the therapeutic alliance with concerns unique to this population, such as officers' desire to carry their police-issued weapon during clinical appointments; precipitants and characteristics of work-related exhaustion; and the evolution of an officer's career in law enforcement toward retirement. The part on "Common Presenting Problems" includes mental health concerns that commonly arise in clinical practice, such as substance use, depression and suicide, and anxiety and stress management. The chapters need not be read in order; each chapter provides sufficient information and background to stand alone.

The strength of this book is its use of descriptive vignettes and concrete treatment strategies. Many chapters have clinical examples that illustrate difficulties or questions that police officers have presented in clinical encounters. The vignettes allow the reader to understand how certain problems would present in clinical practice and, in some case, how certain stressors relate to others. In several examples, the authors provide a case-formulation type of assessment with the vignette, which may be helpful to therapists working with this patient population. The formulations are likely to be particularly helpful to new clinicians looking for guidance in conceptualizing patients through their many experiences. Throughout the book, there are several instances where the authors follow up with concrete steps for the clinician, such as lines of questioning, use of specific screening tools, or specific modes of therapy aimed at targeting the problems presented in the vignettes.

Readers of this book should understand its limitations. Geared toward clinical practice, it does not discuss procedural and legal aspects of police officers who become involved with mental health care, except in passing. For example, no guidance is offered as to how to conduct a fitness-for-duty evaluation, risks of serving in a dual role should a treating provider be in the position of offering an opinion about return to work or fitness for duty or how to assist patients in undergoing independent fitness-for-duty assessments. Similarly, the authors discuss officers' stress after critical incidents, but do not comment on the administrative or legal procedures that an officer may face after an incident, such as an officer-involved shooting.

Given the unique role that police officers have in carrying firearms and current public attention on officer-involved shootings, the book devotes surpris-

ingly little discussion to firearm safety. The section devoted to guns and psychiatric hospitalization is approximately one page in length. It is important to recognize that there may be a need for emergent removal of a firearm, such as when an officer is acutely suicidal. There may be other instances in which assessment of an officer's ability to safely maintain a firearm is needed, such as when an officer is prescribed certain medications that affect motor skills, reaction times, or cognition.

It would be a helpful addition for this section to be expanded to include more guidance for clinicians regarding their role in removing access to weapons, how it would be likely to require the officer to take leave from work, any distinctions in limiting access to work-issued weapons versus privately owned weapons, and the employment implications of such actions.

This book meets its goal of educating general mental health clinicians about key responsibilities and stressors that affect law enforcement officers and also about some of the cultural aspects of the profession. Psychiatrists doing clinical work with this population, particularly those new to practice, will find this book useful in thinking through the problems common to law enforcement personnel. Psychiatrists working in the forensic role will find the contents less helpful, although they may find the information about police culture and resources informative.

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Traumatic Brain Injury: Methods for Clinical and Forensic Neuropsychiatric Assessment, 3rd Edition

By Robert P. Granacher, Jr. Boca Raton, FL, CRC Press, 2015. 565 pp. \$169.95.

In this third edition of his essential reference volume, Dr. Granacher provides a comprehensive survey of the current state of neuropsychiatric knowledge and practice in the rapidly growing field of traumatic brain injury (TBI) assessment and treatment. Addressing myriad neuropsychiatric, neuropsychological, and forensic aspects of TBI in both children and

adults, and including nearly 70 pages of references, the book is truly a must-have for any psychiatrist who treats patients with TBI as a regular component of their clinical practice, or who wishes to perform forensic evaluations in any case where known, suspected, or alleged TBI is a primary concern.

The author begins with a very thorough review of TBI epidemiology and the known pathophysiologic mechanisms that can result in short- or long-term impairments after TBI. He then reviews material likely to be familiar to psychiatrists, including descriptions of a wide range of neuropsychiatric syndromes that can be observed after TBI and discussions of how to perform a thorough history, mental status examination, and neurological examination. Psychiatrists will find these chapters the most easily digested, but the level of detail and depth of analysis is exhaustive, and even the most experienced readers will certainly add to their knowledge of TBI assessment.

Tools essential in the workup of the patient with TBI, including neuroimaging, neuropsychological testing, psychiatric rating scales and personality testing, are thoroughly reviewed. Some of this material will be more unfamiliar to most psychiatrists, as very few have training as a neuroradiologist or neuropsychologist. Dr. Granacher makes these subjects accessible and demonstrates that they do not have to remain a “black box” to anyone motivated to gain a working understanding of them. Tables are used throughout the book to summarize key points; these are especially helpful in these sections.

The final section of the book explores the forensic examination, including ethics and legal concepts, venues where a forensic opinion may be sought and the types of questions to be answered, the all-important topics of malingering and exaggeration (which are in fact emphasized throughout the book), and principles of report writing. The case studies in this section allow the reader a window into the work product of the author, a nationally known expert with decades of experience who has performed thousands of TBI evaluations.

The scientific study of TBI has been evolving rapidly over the past few decades, in no small part because of the great leaps in imaging technologies. As is clearly explicated in this book, TBI is common, produces significant medical and economic costs, and can have a devastating personal impact on the injured person and family. Gains in understanding how to help those experiencing TBI-related impairments manage

their symptoms and achieve their highest level of functioning are obviously of critical importance.

Along with the dramatic advances in the field of TBI science, controversies over such contentious topics as chronic traumatic encephalopathy (CTE)¹ and the possible long-term sequelae of mild traumatic brain injury² have been raging. There are even law firms touting their special expertise in mild TBI. This book summarizes the overall state of the field with great clarity and detail. It will be of immense assistance to the reader in sorting known scientific fact from speculation, which may be driven by a particular agenda.

The book has very few, and very minor, shortcomings. One was the lack of color plates in the neuroimaging chapter, which would have made one or two of the images more informative. I also thought the chapter on neuropsychological testing was overwhelming in the number of tests listed and the details provided for all of them, including some that were described as outdated, out-of-print, or not recommended for one reason or another. This chapter could have been pruned a bit without loss of value. It also did not include any visual examples of elements of any tasks, such as pictures from naming or memorization tests, “Stroop” words, or complex figures to copy, or the output one might expect after various types of brain lesions (for example, a drawing of a clock face demonstrating one-sided neglect), which could have helped make the material more accessible to the nonpsychologist.

Dr. Granacher is an immensely gifted writer with a special talent for clear and concise explication. To cite just one simple example, I found the five-page section on the admissibility of scientific evidence (pp 421–6), covering the landmark federal cases in this area, to be as fine a summary of this topic as I have come across in a long while. Many more examples could be given. Any reader who engages with this volume will undoubtedly be rewarded with a wealth of new, practical knowledge.

References

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