

transcranial stimulation are briefly reviewed, the emphasis of the chapter is on cognitive-behavior approaches.

In the introduction to *Hallucinations: The Science of Idiosyncratic Perception*, the authors define a diverse target audience ranging from neurologist to psychotherapist, from students to clinicians and researchers. To some extent, the authors achieve their goal. They balance extensive details within chapters with “Chapter Highlights” that provide a brief concise summary of the key “take home points” from the material presented. While students may get lost in the details, the “take-home-points” will come to their rescue.

A Glimpse into the Mind of Experts

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Neuropsychology in the Courtroom: Expert Analysis of Reports and Testimony. Robert L. Heilbroner (Ed.). 2008. New York: Guilford Press. 273 pp., \$55.00 (HB)

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The Editor notes in the preface of *Neuropsychology in the Courtroom* that this volume is a “useful companion” to the previously edited 2005 text entitled *Forensic Neuropsychology Casebook*. That said, either book can be read independently and does not require familiarity with the other. Whereas the earlier book recounts a case from an evaluator’s perspective, *Neuropsychology in the Courtroom* details each neuropsychologist’s approach when reviewing opposing experts’ evaluations, depositions, and opinions.

The book is comprised of 15 chapters, organized into three sections: I. Case Analysis (7 chapters), II. Forensic Case Analysis from Opposing Perspectives (3 chapters), and, III. Special Topics (5 chapters). Each “Case Analysis” chapter is organized similarly, with an explanation of the author’s professional approach, case description, analysis and critique of an opposing expert’s evaluation, interpretation and/or deposition, and commentary about lessons learned.

Section I begins with a chapter by Jacobus Donders that highlights a common type of case referral for neuropsychologists who do legal work: the claim of neurobehavioral impairment following mild traumatic brain injury (TBI). A particular strength of this chapter is the emphasis on the importance of objectivity, neutrality, professionalism, strong knowledge of the literature, and ultimately, the ability to present your findings in a clear and accessible manner. Issues related to claims of multiple chemical sensitivity (MCS) are discussed in Chapters 2 and 3. Michael McCrea reviews the controversy surrounding this syndrome in Chapter 2, citing literature to illustrate the medical, psychiatric, and cognitive evidence (or lack thereof). The author then describes a case and provides an interesting section that includes his responses to specific questions asked by the

The authors provide an appendix containing a description of many of the measures used in the research cited, some of which are also appropriate to clinical practice. Chapters 6 and 7 would be a difficult read for those unfamiliar with functional neuroanatomy. While the book has something of value to all included in the identified target audience, it will be of particular interest to treating clinicians, those interested in pursuing research in this area, and neuropsychologists dealing with neurological disorders, such as Parkinson’s or dementia, which are associated with an increased risk for hallucinations.

referring attorney. Howard Oaks delineates additional MCS issues in Chapter 3 through the perspective of a consultant to a disability company. The author gives a point-by-point description of an evaluation he was asked to review, and then specific questions raised by the findings and conclusions of the evaluator.

In Chapter 4, Joel Morgan addresses issues related to evaluator “competence,” with emphasis on how best to handle situations when one reviews evaluations or testimony containing gross errors or clear misinterpretations of data or literature. Through two case examples, he highlights the need to stay objective and neutral (e.g., not being swayed by which “side” asks for your services). In pediatric forensic work, the issues of development, particularly regarding executive functioning and the potential of “growing into deficits,” are paramount in decisions about timing of litigation. In Chapter 5, Ida Sue Baron cogently illustrates the complexities of these factors through a case of a child involved in a motor vehicle collision at 18 months of age.

While the case described in Chapter 6 involves an electrical injury, the real substance of Shane Bush’s contribution is the pertinent delineation of key considerations when reviewing the work of other evaluators. As the case evolves into an exchange of written opinions between two experts, the author uses scientific evidence and a straightforward approach to support his conclusions. In the final case analysis, Chapter 7, Kevin Greve offers another case of mild TBI, but describes the case from a legal consultant perspective. Following a description of the evaluation he reviewed, the author provides analysis related to issues surrounding mild TBI, malingering, and chronic pain.

Section II presents a single case, then provides expert analysis from two viewpoints: that of the defense expert

and that of the plaintiff expert. The case involves mild TBI, and the report and neuropsychological tests results are reviewed in Chapter 8. As the plaintiff expert, Wilfred van Gorp, in Chapter 9, specifies unique issues related to being retained by a plaintiff attorney, and provides a detailed analysis of the case, with a description of what he would likely tell the referring attorney. Wiley Mittenberg analyzes the case as the defense expert in Chapter 10, and walks the reader through his conceptualizations and conclusions. This format, with a single case analyzed from “opposing” sides, was particularly effective.

“Special topics” are presented in Section III. In Chapter 11, Erin Bigler relates a case of anoxic injury in which the defense attorney challenged the admissibility of his evaluation based on his use of a flexible battery. The chapter reviews the history of the fixed vs. flexible battery approaches to assessment, discussing the legal implications of the *Daubert* standard. Karen Wills describes unique considerations in conducting independent educational evaluations in Chapter 12, and reviews the various types. Confidentiality, the identification of the “client”, and the provision of results are highlighted. In Chapter 13, David Bush describes the need to evaluate the conceptual frames of each expert when reviewing cases. Through specific examples of both plaintiff and defense expert testimony, he highlights the importance of being aware of biases. Robert Heilbronner’s Chapter 14 offers a unique opportunity for the reader to emulate the role of forensic consultant. The chapter is particularly compelling as it begins with questions to consider, followed by a case review, and then a review of questions he would advise a cross-examining attorney to ask. The final Chapter 15, by Grant Iverson, Brian Brooks, and James Holdnack, addresses the potential for misdiagnosis of cognitive impairment. This chapter explains levels of cognitive impairments, and then provides a succinct discussion of potential biases and logical fallacies in clinical decision-making.

The chapter authors in *Neuropsychology in the Courtroom* include some of the most respected and well-known experts in forensic neuropsychology, and the volume offers a rare look into the thought processes of experienced practitioners as they navigate the forensic arena. Strengths of the book include an index that allows the reader to locate specific topics of interest and discussion of a number of important topics and insights. The provision of actual test data and the consistent use of literature references enhances the book’s effectiveness.

Despite these merits, the volume is lacking in range and there are several notable omissions from the content. Greater coordination among the chapters could have resulted in a more cohesive text. Clearly, the authors chose cases that would emphasize essential topics, such as the scientific evidence regarding particular diagnoses, and the importance of effort testing. While these are “hot topics” often encountered in forensic work, the inclusion of less straightforward cases would have added to the volume’s utility. Additionally, a wider breadth of topics would have been desirable; a majority of chapters were focused on traumatic brain injury and/or sub-optimal effort. Only two chapters were devoted to pediatrics; coverage of common pediatric forensic issues such as lead exposure and birth injuries were notably absent. Finally, it is unclear how special topics were chosen, and it would have been useful to include topics such as life care planning, future prediction, and unclear or “leading” questions.

The editor’s intention, according to the preface, was to present cases covering “a broad array of conditions” from perspectives of “adult and pediatric experts.” Although *Neuropsychology in the Courtroom* is not as comprehensive in breadth as anticipated, this book certainly provides unique and enlightening information that would be invaluable to any neuropsychologist who regularly engages in forensic work.

Traumatic Brain Injury: Efficacy of Rehabilitation and Need for Further Evidence-Based Research

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Rehabilitation for Traumatic Brain Injury, Walter M. High, Jr., Angelle M. Sander, Margaret A. Struchen, and Karen A. Hart (Eds.). 2005. New York: Oxford University Press, 368 pp., \$90.00 (HB)

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The move toward evidenced-based medicine has occurred in recent years in response to rising healthcare costs and efforts by third party payors to control escalation of the costs associated with catastrophic injury. While traumatic brain injury (TBI) has placed a significant demand on the healthcare system, medical and rehabilitative advances have reduced the number of fatalities associated

with neurotrauma. Individual cognitive outcome following injury has been highly variable (Ponsford et al., 2008). *Rehabilitation for Traumatic Brain Injury* is a text that addresses recent changes in medicine and the need to focus on evidenced-based research in order to make rehabilitation decisions for the patient who has experienced a TBI.