

**Written Testimony of Eric Sribnick  
Pediatric Neurosurgeon**

**In Support of an Amendment to HB 96 to Increase Funding for the Ohio Brain Injury Program  
May 13, 2025**

Chairman Romanchuk, Vice Chair Huffman, Ranking Member Liston, and members of the committee, Thank you for reading my thoughts. My name is Eric Sribnick, and I am a pediatric neurosurgeon with a strong interest in neurotrauma. For greater than two decades, my clinical and research focus has been on preventing and treating neurotrauma. I am both a clinician and survivor, having experienced a basilar skull fracture at the age of eighteen. At that time, my outcome could have been vastly different, and every day I thank God that my injury did not result in the severe morbidity and mortality that we see too often in our children's hospitals around the United States and the World.

Trauma knows no socioeconomic or cultural boundaries. The scientific literature informs that trauma and traumatic brain injury occurs in a predictable fashion,<sup>1</sup> responds to prevention efforts,<sup>2</sup> and can be improved with improved care and therapies.<sup>3</sup> Unfortunately, while trauma and traumatic brain injury are common disease processes, they receive less research funding as compared with other disease processes. This discrepancy is even more puzzling when one considers that TBIs tend to occur in the young and can lead to a lifetime of missed opportunity and societal burden.<sup>4</sup>

Especially in the face of decreased federal support, it will be all the more important that Ohio commit resources for research, care, and support to ensure maximal recovery following injury.

Legislation that could be considered include: helmet laws, surcharges applied to relevant offenses (high risk driving or driving while intoxicated), establishment of state funding for research and patient resources, or funding of resources like the Ohio Brain Injury Program. Please invest in survivors. Please support increasing the funding for programs like the Ohio Brain Injury Program.

Thank you for listening to my story and for caring about our families and patients in Ohio. Please do not hesitate to reach out to me personally if I can answer any questions or be of further help.

Respectfully,

Eric

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<sup>1</sup> Eom KS. The Time-Related Trends in the Presenting of Traumatic Head Injury in a Single Institution. Korean J Neurotrauma. 2020 Feb 12;16(1):28-37.

<sup>2</sup> [CDC Grand Rounds: Reducing Severe Traumatic Brain Injury in the United States](#)

<sup>3</sup> Reisner, A., Chern, J. J., Walson, K., Tillman, N., Petrillo-Albarano, T., Sribnick, E. A., Blackwell, L. S., Suskin, Z. D., Kuan, C., & Vats, A. (2018). Introduction of severe traumatic brain injury care protocol is associated with reduction in mortality for pediatric patients: a case study of Children's Healthcare of Atlanta's neurotrauma program. *Journal of Neurosurgery: Pediatrics PED*, 22(2), 165-172.

<sup>4</sup> Dowd B, McKenney M, Boneva D, Elkbuli A. Disparities in National Institute of Health trauma research funding: The search for sufficient funding opportunities. *Medicine (Baltimore)*. 2020 Feb;99(6):e19027.