

Personal Statement

I would be honored to serve on the Board of the Neurocritical Care Society as a Pediatric Neurocritical Care Specialist. I believe my accomplishments and aspirations for the field are in alignment with NCS's vision.

I completed medical school at SUNY Downstate, a pediatric residency at St. Christopher's Hospital for Children and a pediatric critical care fellowship at the University of Pittsburgh. During my fellowship, I was fortunate enough to be mentored by Dr. Patrick M. Kochanek – the global leader in the field of all pediatric neurological research. I published several manuscripts with Dr. Kochanek and spent time in Dr. Claudia Robertson's ICU to better understand neurocritical care. In my first appointment to Children's National, I was awarded a career development grant to study inflammation on brain development. In 2002, I started the first pediatric neurocritical care service to improve the outcome of children with critical neurological conditions, and now dozens of hospitals have followed our lead. I was recruited to the University of Pittsburgh as their inaugural Director of Neurocritical Care and Pediatric Neurotrauma to coordinate the care of multiple services for these children. I served on BTF Guidelines Committee for adults and children, and I authored the guidelines for both populations. I received funding for the ADAPT Trial (NS 081041), an observational cohort study of 1000 children with severe TBI across 51 clinical sites designed to strengthen the pediatric guidelines. In 2017, I was recruited to Children's National to serve as the Division Chief and I led an implementation science trial of pediatric guideline adherence in 16 South American sites. In 2025, I was recruited to UTSW as the Division Chief where I have recruited a Director of Neurocritical Care, started a pediatric neurocritical care fellowship and submitted several large trials regarding children with neurological conditions. Most recently, I was inducted into the Association of American Physicians.

I attended my first NCS meeting in 2003, which I believe was one of the first formal NCS meetings. As one of the only pediatricians attending, I found the meeting very informative and attended most of them for the next decade. In 2008, I founded the Pediatric Neurocritical Care Research Group (PNCRG) and I served in most of their leadership roles including Chair - where I worked closely with the NCS Leadership to incorporate pediatric sessions into the Annual Meeting. And I serve as the Associate Editor for the journal Neurocritical Care where I edit pediatric and artificial intelligence manuscripts for the Society.

I believe that the NCS has an enormous opportunity to more fully integrate the fields of pediatrics, pediatric critical care, pediatric neurology and associated specialties. Neurological conditions are the leading cause of death/disability in children, meaning improvements can positively alter lives for decades for each child. I am anxious to continue to reach out to pediatric

practitioners – of all specialties and within the US and internationally – to incorporate their views into the NCS community to positively affect the care of children moving forward.

Thank you for considering me.

Michael J. Bell, MD
Chief and Endowed Chair, Pediatric Critical Care Medicine
University of Texas Southwestern

Personal Statement

Matthew Kirschen, MD PhD MSCE, FNCS, FAAN

NCS has been my primary professional home since I joined in 2013, and the multidisciplinary community in which I have grown as a clinician, researcher, educator, and leader. I would bring to the Board a deep commitment to NCS, a servant-leader mindset, and a sustained record of advancing pediatric neurocritical care within the Society.

I have worked consistently to integrate pediatric perspectives into NCS programs and products. In 2019, I helped ensure pediatric authors and considerations were incorporated across each ENLS chapter. I contributed to the Brain Death Toolkit and Train-the-Trainer Brain Death Determination Course, and have directed and taught brain death courses nationally and internationally. For the past two years, I have served on the Annual Meeting Committee, helping shape high-quality pediatric sessions while encouraging greater engagement by the pediatric community with the broader scientific and educational program. I served on NCS's Ethics Committee and the Ethics Committee of the Curing Coma Campaign, helping incorporate pediatric considerations into multidisciplinary discussions and scholarly products.

NCS has shaped my development as a researcher and mentor. The NCS Research Training Fellowship supported my development of the Serial Neurologic Assessment in Pediatrics (SNAP) tool which is now used in PICUs nationally and internationally. I publish in and review for *Neurocritical Care*, receiving an Outstanding Reviewer Award in 2023, and mentored trainees through NCS programs and annual meeting posters and presentations. As Chair of the AAN Ethics, Law and Humanities Committee, I lead a multidisciplinary collaboration with NCS to develop joint ethical guidance on normothermic regional perfusion in donation after circulatory death.

My leadership in the Pediatric Neurocritical Care Research Group (PNCRG), including co-leading its Neuromonitoring Working Group and serving as co-chair of its Scientific Review Committee, has reinforced my belief that NCS and PNCRG are strongest in partnership. I have helped develop collaborative symposia, surveys, manuscripts, and educational initiatives, including co-editing a special issue of *Neurocritical Care* focused on pediatric neurocritical care and neuromonitoring.

My greatest strength is building collaborative teams across specialties, professions, institutions, and societies and translating shared goals into durable programs. A related weakness is that my enthusiasm can lead me to take on too many projects personally. I am addressing this by delegating more intentionally, defining roles and timelines early, and creating opportunities for trainees and junior colleagues to lead.

My vision is to move pediatric neurocritical care within NCS from inclusion to integration. I would work to ensure that pediatric perspectives are considered early and consistently in NCS guidelines, consensus statements, educational products, and annual meeting programming. I would strengthen collaboration with PNCRG, develop pediatric-specific guidance where needed, support thoughtful adaptation of adult evidence, and create visible pathways for pediatric trainees and early-career faculty to contribute to NCS.

I believe pediatric neurocritical care has much to contribute to the Society, and that NCS has an essential role to play in shaping the future of pediatric neurocritical care. I would be honored to serve as the pediatric representative on the NCS Board of Directors and help strengthen the Society's role as the professional home for neurocritical care across the lifespan.



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HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

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July 19, 2026

RE: Cover Letter and Personal Statement for NCS Board of Directors,

Dear Members of the NCS Board of Directors,

I am honored to be nominated for the Neurocritical Care Society (NCS) Board of Directors and grateful for the opportunity to be considered for this role.

Neurocritical care has been the focus of my career, and NCS has been my professional home throughout that journey. As a longstanding member, regular attendee of the annual meetings, and involvement in committees and educational initiatives, I have witnessed firsthand the impact of NCS in advancing patient care, education, research, and multidisciplinary collaboration. The mentorship, partnerships, and shared purpose I have found through NCS have shaped my career and strengthened my commitment to the NCS mission.

My leadership philosophy is rooted in collaboration and service. Throughout my career, I have worked to bring together clinicians, scientists, educators, and trainees across disciplines to improve care for children with neurologic critical illness. I believe that listening, building consensus, mentoring others, and creating opportunities for colleagues to succeed are essential qualities of effective leadership.

If elected to the Board of Directors, I would be honored to continue serving NCS by supporting its mission, fostering multidisciplinary engagement, and helping advance the strategic priorities of NCS. I am deeply committed to ensuring that NCS remains an inclusive and innovative professional home for all members dedicated to improving outcomes for adults and children with critical neurologic illness.

Thank you for your consideration. It would be a privilege to serve NCS as a member of the Board of Directors.

Sincerely,

Kerri L. LaRovere, M.D.

Kerri LaRovere, MD, MMSc

Personal Statement

Twenty-four years ago, three members of my family experienced devastating neurologic illnesses in three different intensive care units. What struck me most was not the diseases they faced, but how profoundly their outcomes depended on the expertise available and whether neurocritical care expertise existed. Those experiences shaped my career. I became the first pediatric neurologist to complete an adult Neurocritical Care fellowship because I believed critically ill children deserved the same rigor, multidisciplinary collaboration, research, and innovation transforming adult neurocritical care.

My career has been guided by a simple goal: to advance pediatric neurocritical care (PNCC) while strengthening the multidisciplinary neurocritical care community to improve care of critically ill children. I believe the future of our field depends not on individuals, but on multidisciplinary teams united by clinical excellence, innovation, and a shared commitment to improving the lives of children and their families.

The Neurocritical Care Society has been my professional home. For nearly two decades, it has challenged me, inspired me, and provided opportunities to help shape our field. Through leadership and scholarly collaborations in ENLS, Mentorship Program, Curing Coma Common Data Elements initiative, Teleneurocritical Care Consensus Statement, and as Editor-in-Chief of *Neurocritical Care On Call*, I have advanced education, fostered mentorship, strengthened multidisciplinary collaborations, and translated emerging science into practice that improves patient care.

My greatest professional accomplishment has not been any individual publication or leadership title. It has been helping define the clinical, educational, and collaborative foundations of PNCC by building teams. I have grown one of the nation's largest PNCC consult services, established a PNCC fellowship, developed competency-based Entrustable Professional Activities, advanced multimodal neuromonitoring, contributed to NCS-endorsed consensus statements, and, as Chair of the PNCRG Clinical Practice Committee, fostered multidisciplinary collaborations that translate evidence into practice. I believe our greatest advances occur when collaboration replaces competition and leadership is measured by the success of others.

Like our specialty, I continue to evolve as a leader. As my responsibilities have expanded to now leading the Division of Neurocritical Care at Boston Children's Hospital (BCH), I have strengthened my executive leadership skills through the BCH Emerging Physician Leadership Program and Clinical Leadership in Action. Guided by my PRISM leadership assessment, these experiences continue to shape me into a more thoughtful listener, effective coach, and servant leader because I believe the future of PNCC begins with investing in people.

If elected to the Board of Directors, my vision is to help NCS lead the next era of neurocritical care by strengthening multidisciplinary leadership, accelerating implementation of evidence into practice, advancing pediatric neurorecovery across the continuum of care, and fostering collaboration across institutions, specialties, and national borders. Twenty-four years ago, I learned that outcomes depended on whether neurocritical care existed. Today, my vision is to ensure every critically ill child benefits from the expertise, collaboration, and innovation that define our field. **I would be honored to serve the Neurocritical Care Society that helped**

shape my career by advancing PNCC while strengthening our multidisciplinary community.

NCS Personal Statement – Robertson

I am honored to apply to serve as the first pediatric neurocritical care representative on the NCS Board of Directors. I believe my attributes align well with the mission of the NCS. I have a career-long commitment to the field of pediatric neurocritical care, starting during my pediatric critical care fellowship where I pursued both clinical and scholarly focuses on pediatric traumatic brain injury (TBI) and pediatric neurocritical care. The first pediatric representative will need to engage with NCS leadership and membership, across all disciplines and backgrounds. I feel confident that I have the skills to build meaningful connections between the pediatric neurocritical care field and the NCS, while advancing NCS's mission.

I have been a dedicated member of the NCS for over a decade, attending most annual meetings since 2012, and engaging through committees and programs. I served as the pediatric representative on the Membership Committee for 4 years and helped establish the NCS new member reception. I was active in the Curing Coma Campaign, specifically the CDE working group. As Past Chair of the Pediatric Neurocritical Care Research Group (PNCRG, 2016-2018), I assisted the PNCRG and NCS leadership in establishing the Pediatric Section of NCS. Finally, I have engaged in scholarly work related to the NCS mission, as Co-PI in the GCS Neuro-COVID Pediatric study, which was supported by an NCS INCLINE grant.

Many of my accomplishments align with the Pillars of NCS. For over 25 years, I led translational preclinical work, focused on mitochondrial dysfunction after pediatric TBI, that will shape future research in pediatric neurocritical care. I helped form the translational biology sub-committee of the PNCRG in 2010, serving as its co-chair for 6 years. I have lead landmark clinical studies, co-leading the GCS Neuro-COVID Pediatric study and on the steering committee being site PI for the ADAPT study. I have also had a career-long commitment to education and mentoring. Examples include starting a pediatric neurocritical care fellowship program and serving as the fellowship director for 8 years, teaching and mentoring pediatric residents and pediatric critical care fellows, and active engagement in the Training, Education & Mentoring committee of the National Neurotrauma Society (NNS).

One of my strengths is inter-disciplinary collaboration through local, national and international leadership positions. At Johns Hopkins SOM, I collaborated with numerous neurocritical care professionals to co-found the pediatric neurocritical care program in 2012, which has become one of the top programs nationwide. As President of the NNS and Chair of the PNCRG, I focused on serving the organizations and understanding membership needs through actions such as strategic planning. My past NNS and PNCRG leadership could build new collaborations with NCS.

To summarize, my career shows a dedication to the mission of the NCS. My overarching career goal is to improve outcomes of critically ill children through groundbreaking science, outstanding clinical care and the cultivation of the next generation of leaders. I believe working towards this goal has positioned me to serve as the first pediatric representative on the NCS Board.

NCS Personal Statement - instructions

1. Your contributions to NCS, and how they have helped to achieve [our mission](#) (for example, innovations, guidelines, strategies, new programs, etc.)
2. Your committee participation and leadership that yielded outcomes favorable to the NCS strategic plan and mission.
3. Examples of your multidisciplinary collaborations.
4. Your strengths and weaknesses and how you are working to improve your weaknesses – overcommitment, recently completed many leadership commitments (NNS President/council, PNCC med director, PICU fellow research role) so have availability
5. Your vision for NCS if selected

Mission

The Neurocritical Care Society advances care worldwide by uniting, supporting and empowering those who care for neurocritically ill patients through education, research, collaboration and advocacy.

Vision

To be the global leader uniting multidisciplinary professionals to champion exceptional care for those affected by neurocritical illness.

Pillars

The NCS Board of Directors approved the 2026-2028 Strategic Plan in December 2025, which includes five core pillars of focus with a goal and objective(s) for each pillar. These pillars reflect NCS' continued commitment to advancing the field of neurocritical care and supporting the professionals who care for patients with life-threatening neurologic illness.

Pillar 1: Education

Goal: Deliver modern, relevant and high-impact educational platforms that serve neurocritical care needs worldwide.

- **Objective:** Modernize and streamline the education portfolio.

Pillar 2: Research

Goal: Promote and facilitate modern, relevant and high impact neurocritical care research that serves patients, caregivers and families worldwide.

- **Objective:** Advance neurocritical care research impact.

Pillar 3: Member Engagement & Community Building

Goal: Strengthen the value of NCS to current and prospective members, increase engagement and facilitate community building worldwide.

- **Objective:** Improve and promote NCS value to recruit and retain members.

Pillar 4: Strategic Partnerships & Positioning

Goal: Position NCS as an indispensable collaborator through mission-aligned partnerships that advance neurocritical care worldwide.

- **Objective:** Forge strategic partnerships and collaborations with other professional societies and groups.

Pillar 5: Organizational Excellence

Goal: Align governance, operations and communications to maximize mission-driven impact and support a coordinated, responsive and effective organization.

- **Objective 1:** Improve internal organizational efficiency, execution, communication and transparency.
- **Objective 2:** Improve external transparency and communication across all levels.
- **Objective 3:** Ensure alignment between offerings and strategic outcomes.



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SCHOOL OF MEDICINE

DEPARTMENT OF NEUROSCIENCES
DIVISION OF NEUROLOGY

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Navaz Karanjia, M.D.
Director, Neurocritical Care Division and NeuroICUs
Joan Klein Jacobs Endowed Chair in Neurosciences
Professor of Neurosciences, Anesthesiology, and Neurological Surgery
UC San Diego School of Medicine
200 W. Arbor Drive #8465
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April 1, 2026

Dear Neurocritical Care Society,

I would be honored to serve on the NCS Board of Directors, should I be selected. Please find below my personal statement:

Advancing the field of neurocritical care and NCS have been a passion of mine since completing my NCC fellowship at Johns Hopkins and joining NCS in 2011. In 2011, I founded (and currently direct) the University of California-San Diego's (UCSD's) Neurocritical Care (NCC) Program and NeuroICU's. Through successful creation/implementation of NCC education and clinical workflows, we expanded to 2 neuroICU's at 2 hospitals, with an interdisciplinary team of 7 NCC-board-certified neurointensivists (neurology/anesthesiology trained), 9 APP's, trainees from 10 departments, and over 100 NCC nurses. I also established our UCNS and ACGME-accredited NCC fellowship and helped lead UCSD to TJC Comprehensive Stroke and Comprehensive Spine Certifications.

I have been an enthusiastic contributor to NCS, serving on multiple committees and workgroups including: Advocacy Committee (I helped create NCS' Wikipedia page and patient education pamphlet), Nomination Committee, Quality Metrics Writing Group, and NCCU Standards Writing Group (I am an author on both groups' publications, "Clinical Performance Measures for Neurocritical Care: A Statement for Healthcare Professionals from the Neurocritical Care Society," and "Standards for Neurologic Critical Care Units: A Statement for Healthcare Professionals from The Neurocritical Care Society.") In 2015, I was the founding co-chair of the NCS's Quality Committee (now Quality Section) and have remained active on the section. While leading QC, I collaborated with AAN to beta-test NCC quality measures, represented NCS to CMS giving Grand Rounds and discussing quality measures, increased QC membership, and executed NCS-wide surveys on quality improvement resulting in multiple QC publications. I have attended every NCS Annual Meeting since 2011, been an abstract reviewer for most, organized multiple meeting sessions, been an invited speaker 4 times, received the Presidential Citation Award 4 times, and FNCS in 2024. I am dedicated to cross-organization collaboration, serving on multiple AHA and AAN committees/writing groups, and SCCM's



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Southern California Chapter Board. I also mentored 2 trainees to NCS leadership positions (Ethics and APP Committee Chairs).

My strengths include: my passionate belief in universal access to quality neuroemergency and neurocritical care, my ability to inspire others' interest in NCC, experience in NCC administration, education, and research as the founder/director of a NeuroICU program, dedication to NCS and multidisciplinary collaboration, and ability to create cost-effective initiatives at all levels that are well-received and show real-world benefit. My weaknesses include inexperience with national-scale fundraising and budgets, which I am educating myself on by working with UCSD's development team on larger philanthropic campaigns.

My NCS vision includes: continuing to develop NCS's educational products/initiatives for members, general medical personnel and the community, and to expand their use internationally through strategic partnerships i.e. CMS/TJC; promote high-impact NCC research, perhaps with a blueprint for NCC trial design to help members execute high-quality research; increase engagement by offering actionable education and mentorship not just on NCC science but also navigation of real-world challenges like billing/telemedicine; strengthening strategic partnerships, and continuing to improve NCS's organizational excellence via effective communication and transparency.

Please feel free to contact me with any questions.

Sincerely,

Navaz Karanjia, MD, FNCS

Dear NCS Members,

Thank you for considering my candidacy for the NCS Board.

The Neurocritical Care Society has been my professional home since I joined in 2015. Over the past decade, my involvement has grown from committee participation to leadership roles that have allowed me to contribute to the Society's missions of advancing research, education, collaboration, and advocacy. Throughout this journey, NCS has provided opportunities that have shaped my career, and I have sought to give back by helping build programs, partnerships, and infrastructure that strengthen our field and support our members.

A major focus of my service has been advancing research and creating opportunities for others to engage in meaningful scholarly work. After serving in several research-focused roles, I progressed from committee member to Co-Chair of the Research Operations Subcommittee and currently serve as Chair of Neurocritical Care Research Central- NCS's primary research oversight body. In these roles, I helped lead a society-wide research gap analysis that informed new research and mentorship initiatives, particularly for early-career and multidisciplinary investigators. I have also been privileged to serve as Science Track Chair for the 2025 and 2026 Annual Meetings, helping develop scientific programming that reflects the breadth, rigor, and collaborative spirit of our specialty.

My commitment to education has been equally important. Through the Curing Coma Campaign, where I have served on the Executive Committee, Scientific Advisory Committee, and Scientific Steering Committee since 2019, I currently chair the Education Module. Working alongside dedicated colleagues, I helped launch the Curing Coma webinar series and expand educational programming for clinicians, researchers, trainees, patients, and families. These experiences have reinforced my belief that scientific advances achieve their greatest impact when they are effectively shared, translated, and accessible.

I have also contributed to several Society initiatives that promote high-quality patient care and professional development. I authored and led the ENLS Subarachnoid Hemorrhage modules for Versions 5.0 and 6.0 and continue to serve as an ENLS trainer. As a member of the Guidelines Committee, I collaborated on international multidisciplinary neuroprognostication guidelines and recently served as lead author of the acute ischemic stroke neuroprognostication guideline. In addition, I have had the privilege of serving Neurocritical Care Journal as a reviewer, Editorial Board

member, and now an Associate Editor, supporting the dissemination of high-quality science and the development of future academic leaders.

Beyond NCS, I have worked to extend the Society's mission through collaborations with organizations such as the American Academy of Neurology, the Society of Critical Care Medicine, and NIH StrokeNet, as well as through regional educational initiatives, including the NCS-endorsed Mid-Atlantic Neurocritical Care Symposium. Internationally, I have remained committed to expanding neurocritical care education and training opportunities to resource-limited settings in Southeast Asia.

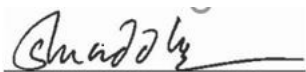
What motivates me most is helping connect people, ideas, and opportunities. I enjoy bringing individuals together around shared goals, identifying areas where the Society can have greater impact, and helping create programs that remain valuable long after any one leader's term has ended. While I have been fortunate to serve in many different roles, these experiences have continuously reminded me that progress in our field is built on collaboration, mentorship, and service.

If elected to the Board, I would focus on supporting NCS as a globally engaged, research and education driven society that continues to invest in multidisciplinary collaboration, early-career development, education, and innovation. Most importantly, I would strive to listen thoughtfully, represent the diverse perspectives of our membership, and help ensure that NCS remains a welcoming and vibrant professional home for future generations of neurocritical care clinicians, educators, and investigators.

Thank you for your consideration and for the opportunity to serve our Society.

Sincerely,

Shraddha Mainali MD

A handwritten signature in cursive script, appearing to read 'Shraddha', followed by a horizontal line.

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Marc Alain Babi, MD, MBA

Board of Directors Cover Letter
Neurocritical Care Society

April 7, 2026

Neurocritical Care Society
Attention: Nominating Committee

Dear Members of the Nominating Committee:

I am honored to submit my application for consideration for the Neurocritical Care Society Board of Directors. Neurocritical care is not only my specialty but has been my professional home that has most profoundly shaped my growth as a clinician, educator, and leader, and I would be privileged to help steward its mission, strategic direction, and long-term impact through Board service.

I currently serve as the Cleveland Clinic Foundation, Florida Market Cerebrovascular Center Director, overseeing all regional programs in neurocritical care, stroke, neurohospitalist medicine, neuro-intervention, and cerebrovascular surgery across a five-hospital system and multiple ambulatory sites. I also serve as Chair of Ethics for Cleveland Clinic Florida and as Regional Director/Physician Lead for the Integrated Hospital Institute. Across these roles, I have focused on building integrated systems of care, advancing quality and safety, strengthening access, supporting team development, and aligning operational strategy with institutional priorities. My career has centered on program-building, multidisciplinary collaboration, ethics, education, and research—work that aligns closely with the values and future direction of NCS. This work has included advancing regional program integration, strengthening clinical infrastructure, and supporting growth and quality improvement across complex health system environments

My commitment to NCS has been sustained, active, and mission-driven. I have served on multiple NCS initiatives, including the ENLS Steering Committee, Ethics Committee, Quality Section Committee, the NCS/UCNS Neurocritical Care Board Certification Committee, the Essentials of Neurocritical Care Subcommittee, the Mentorship Program Committee, and the Trainee Section Committee. I have also contributed as an ENLS trainer, Social Media Ambassador, Board Exam Preparation QBank contributor, abstract reviewer, and presenter at multiple annual meetings. These experiences have given me a deep appreciation for the Society's strategic priorities and the importance of cultivating a strong, inclusive, and truly multidisciplinary professional home for our field.

My executive MBA training at Duke University's Fuqua School of Business has further strengthened the perspective I would bring to Board service. It has deepened my fluency in strategy, finance, operations, organizational leadership, and mission-aligned growth—capabilities increasingly important as professional societies navigate evolving member needs, educational innovation, and long-term sustainability. I believe this combination of frontline physician leadership and formal business training would allow me to contribute meaningfully to governance, strategic planning, and stewardship of the Society's future. I would also bring a broad and multifaceted background shaped by experiences across Duke University Hospital, Cleveland Clinic, Case Western Reserve University, Weill Cornell Medical College, the University of Vermont, and the University of Florida, as well as an international perspective informed by experiences across North America, the Middle East, and Europe. That background has strengthened my ability to build relationships across cultures, lead diverse teams, listen with humility, and approach stewardship with a broad and balanced perspective. It has reinforced for me that durable leadership depends not only on expertise and strategy, but also on trust, adaptability, cultural fluency, and the ability to align people around shared purpose.

I would bring to the Board a servant-leader mindset, strong interpersonal and collaborative skills, and a sincere commitment to listening, building consensus, and helping others succeed. I believe effective Board leadership requires judgment, integrity, strategic discipline, and the ability to translate vision into practical initiatives that create value for members, strengthen the Society, and ultimately improve care for patients and families.

I believe this is the right time in my career to serve at the Board level. I now bring a combination of national society engagement, mature executive leadership experience, formal business training, and broad perspective across clinical, academic, operational, and ethical domains. If selected, I would approach Board service with humility, energy, and responsibility. My vision for NCS is to further strengthen its role as the leading

multidisciplinary home for neurocritical care by advancing leadership development, mentorship, education, quality, ethics, and collaborative innovation across disciplines and practice settings.

Thank you for your consideration.

Sincerely,

Marc Babi M.D

Marc Alain Babi, MD, MBA
Professor, Cleveland Clinic Lerner College of Medicine/Case Western Reserve University
Cleveland Clinic Foundation - Florida Market, Cerebrovascular Center Director
Chair of Ethics | Cleveland Clinic Florida
Cleveland Clinic Foundation/Florida.

Personal Statement: NCS Board of Directors Application

Elizabeth Zink, PhD, APRN-CNS, CCNS, CNRN, FNCS

I am honored to be considered for a position on the Neurocritical Care Society (NCS) Board of Directors. Over a 29-year career in neurocritical care nursing as a bedside nurse, nurse practitioner, clinical nurse specialist, and health services researcher I have remained deeply committed to advancing care for critically ill neurologic patients through local, national and international collaborations. As an NCS member since 2012, an active participant in eight annual meetings and a recent inductee as a Fellow in NCS, I have consistently engaged in initiatives that align with the Society's mission to improve outcomes through multidisciplinary collaboration, education, and innovation.

My contributions to NCS reflect both leadership and service. As Co-Chair and subsequently Chair of the Nursing Section, I worked to re-engage bedside nurses through targeted outreach and educational programming. I assisted in conducting a large-scale needs assessment to guide strategic priorities, directly supporting NCS's goal of increasing clinical engagement. This work was recognized with a President's Citation in 2024. Additionally, I have been a contributor to the Curing Coma Campaign since its inception, and I am serving as a member of the Annual Meeting Planning Committee for a second year.

Multidisciplinary collaboration has been foundational to my career. I led the implementation of an interdisciplinary early mobility program in the neurocritical care unit, resulting in published outcomes and broad dissemination. My work in stroke systems of care from Primary Stroke Center certification to Comprehensive Stroke Center advancement has involved continuous collaboration with physicians, therapists, and nursing teams to adapt to evolving evidence and improve patient outcomes.

My leadership philosophy is grounded in serving leadership: I measure my success as a leader and mentor by the success of my team members. My favorite days as a clinical nurse specialist in the Neurocritical Care Unit are those when I am at the bedside working directly with a nurse and watching them grow in skill and confidence in caring for a complex patient and their family; consulting with physician trainees on research or quality improvement ideas; or collaborating with pharmacists, physical therapists and other members of the multidisciplinary team to improve care.

My strengths include collaboration, attention to detail, and the ability to lead teams toward meaningful, achievable outcomes. Through formal self-assessment, I have identified opportunities to strengthen assertiveness and expand big-picture strategic thinking, and I am actively working to develop these skills through structured feedback and professional development such as recent completion of a Strategic Healthcare Leadership certificate.

If selected, my vision for NCS is to further harness the collective expertise of its members to drive excellence and innovation in neurocritical care. By expanding multidisciplinary engagement and fostering global collaboration, we can accelerate improvements in patient care. I am particularly committed to advancing inclusive, team-based approaches that elevate nursing and interdisciplinary contributions within NCS.

It would be a privilege to serve the Society in this capacity and to contribute to its continued growth and impact.