

Rehab Program

The rehabilitation program utilizes a variety of conferences to communicate your progress with treatment team members during your stay.

Weekly Team Conference: The rehabilitation team members will meet weekly with your physiatrist to discuss your progress, set goals and plan for your discharge. Your social worker will update you and your family on the results of the meeting each week.

Weekly Team Rounds: Each Thursday morning between 7:30 until 9:00 am, the rehabilitation team, your physiatrist and you will meet. During this time, your physiatrist will ask you and your therapists to demonstrate current skills that you have practiced. This will be an opportunity for you to ask your treatment team any questions.

Admit/Discharge Family Conferences: A meeting with you and your family or caregiver will be held within a few days of your admission to discuss the team's evaluation and treatment along with you and your family's goals for discharge. This meeting will be scheduled by your social worker and will include your therapists and nursing staff. Prior to discharge, another meeting will be held to discuss your progress, identify additional equipment needs and set up any extra services such as home health or outpatient services.

Your Rehabilitation Program

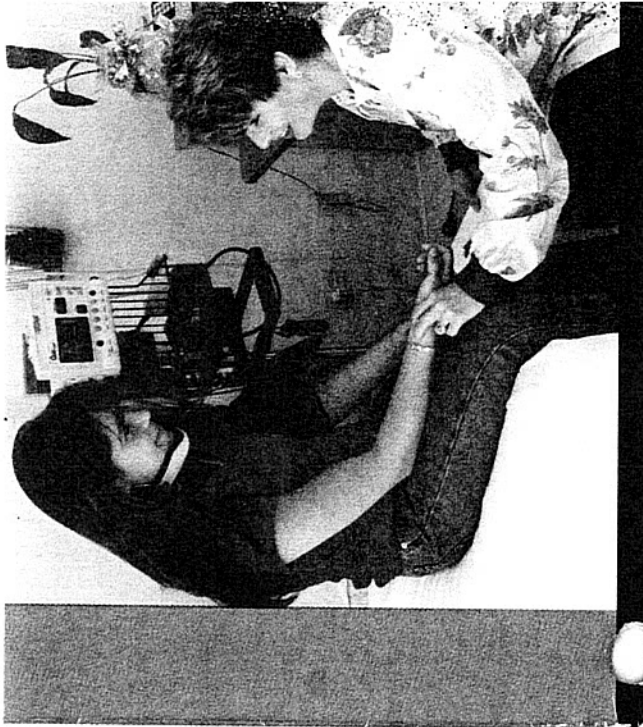
Therapy Schedule

You will have a regular daily therapy schedule Monday through Saturday. Therapy generally occurs between 7 am through 5 pm. You will have approximately **three hours** of therapy each day involving at least two different therapy disciplines depending upon your rehabilitation needs. Sunday therapies will also be provided based on

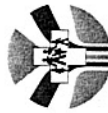
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INPATIENT

Rehabilitation



Turning
new challenges into
new triumphs



Kalisnell Regional Medical Center

Kalisnell Regional Medical Center

the skills that you need to function

The Kalispell Regional Medical Center Rehabilitation Unit creates a

unique treatment program for each patient. This program may address difficulty

with walking, balance, dressing,

home-making tasks, communication,

memory, or taking medications. These

difficulties may be the result of a

stroke, spinal cord injury, amputation,

major trauma, including brain injury,

or other nervous system disorders.

The rehabilitation team includes a

Physiatrist, Rehabilitation Nurses and

Aides, Physical Therapists, Occupational

Therapists, Speech and Language

Pathologists, Recreation Therapists,

Social Services, Clinical Psychologist

and Clinical Dietician.



Rehabilitation is a dynamic

process. We will teach you the

skills that you need to function at

your highest potential. A team of

rehabilitation professionals will work

with you and your family to turn

new challenges into new triumphs.



a dynamic process

Physiatrist:

The Physiatrist/Physician of Physical Medicine leads the rehabilitation team, directs your medical care on the rehabilitation unit and develops your individual treatment plan. The physiatrist may also consult with medical specialists in other fields as well as your primary doctor to meet your medical needs.

Nursing:

The Rehabilitation Unit Registered Nurses and Nurse Aides have special knowledge and skills to deal with the impact that physical and mental changes can have on you and your family. Your nurse will work to prevent complications from these physical and mental changes, instruct and help you practice skills to improve your ability to function. They will encourage you as you adjust to changes in your lifestyle. By working closely with you, your family, and all other members of the rehab team, the nursing staff will help you to gain independence and return to home and community activities.

Physical Therapy:

Physical Therapists or "PTs" evaluate your muscles and how well you are able to move through your environment. This will include walking, moving from one surface to another, balance, coordination and endurance. They will basically look at how well you can function during normal activities. Once you know what you need, an individualized program will be developed to incorporate your personal rehabilitation needs. This therapy plan will help you work toward regaining or maximizing physical abilities such as strength, coordination, flexibility, endurance, moving in bed and walking.

Occupational Therapy:

Occupational Therapists or "OTs" will help you gain the highest level of independence in daily living skills. These skills may include dressing, bathing, toileting, hygiene, and self-feeding. Your OT may also work with you on home and community tasks such as meal preparation, doing your laundry, and grocery shopping. Therapy may also be directed at basic thinking skills, perceptual tasks and upper extremity function. Before you are discharged, your OT will determine what equipment is needed to help you be independent and safe at home.



Speech Pathology:

Speech pathologists evaluate and treat people who are having difficulty with communication, swallowing and/or thinking skills. Initially your speech pathologist may evaluate your speech as well as your memory and other thinking skills including judgement, problem solving, reasoning and attention span. Your speech pathologist will develop an individualized treatment program to address your communication skills such as talking, writing, reading, understanding, memory skills and thought organization needed for daily living tasks. A speech pathologist will also evaluate and treat swallowing problems resulting from strokes, neurological diseases and/or unknown causes. Following evaluation, a diet/treatment program will be designed to prevent medical or nutritional complications.

Recreational Therapy:

Your recreational therapist or "RT" will help you regain the skills you need to participate in the activities that you enjoy. Once your level of functioning is evaluated, your RT will familiarize you with the community resources that will meet your specific recreational needs. Your RT may also instruct you in methods of adapting your leisure skills or introduce new leisure/recreational activities. Recreation therapy may include trips outside the hospital to local shopping centers, sporting and cultural events in the community to help you gain confidence and independence. We often refer to this as "community integration". Group therapy is another important way to develop self-confidence through socialization. Your RT may ask that you participate in planning and completing group activities with other patients in the rehabilitation unit.

Social Services:

Your social worker will meet with you and your family after your admission to the rehabilitation unit. They will ask questions about your living situation, family support, finances, education and job. This evaluation is necessary to assist the team in planning for your discharge home. Your social worker is your advocate on the unit, communicating with the entire team during your rehabilitation stay. The social worker will provide counseling and support to you and your family and help you to plan for a successful discharge home.

Clinical Psychologist:

Medical and physical problems can mean major changes in your life. A psychologist will help you and your family cope with the emotional impact of these problems. Your psychologist may also do special testing to identify mental changes and to make recommendations that promote positive interactions with your care team.

Clinical Dietician:

The dietician is concerned about how and what you eat. Your dietician will complete a nutritional screen, develop a nutritional care plan, monitor your food and fluid intake, and provide education for you and your family. The physician will order a diet for you. Your menu will be determined by your ability to swallow and your food preferences.

Spiritual Care:

The Spiritual Care staff is available upon request to visit, counsel and provide for your spiritual needs. Spiritual Care can be contacted through the hospital operator by dialing 0, or by asking any of the rehab staff.

