Acute Inpatient Rehabilitation After Traumatic Brain Injury (TBI)

Delson recently fell from a ladder while doing roof repairs, resulting in a TBI.

Delson has spent several days in the intensive care unit. He is now in stable condition. Dr. Brown tells him and his wife, Harmony, it's time to start acute inpatient rehabilitation.

Dr. Brown explains that acute inpatient rehabilitation is an intensive form of rehab in which patients receive core therapies in a medical facility, including physical therapy, occupational therapy, and speech therapy. Patients typically receive at least 3 hours of different types of therapy during the day, between 5 and 7 days a week.

Dr. Brown explains that acute inpatient rehabilitation can help with common challenges and changes after TBI, such as:

Thinking challenges...

These include problems with memory, language, concentration, judgment, and problem solving.

Physical changes...

These include loss of strength and problems with balance, coordination, movement, and swallowing.

These include changes in the patient's sense of smell, sight, hearing, and touch.

These include changes in mood, such as feeling depressed, irritable, anxious, or impulsive (acting without thinking).

Your Rehab Team

Dr. Brown explains that Delson will have a rehab team with different types of health care providers. The team will help Delson make progress and will develop a discharge plan for him. The discharge plan will outline the care that Delson needs after rehab.

The rehab team typically includes...

A rehab doctor (or physiatrist or a neurologist (a doctor who focuses on the nervous system. This doctor oversees the patient's treatment.

Psychologists or neuropsychologists. These doctors treat problems with thinking, memory, mood, and behavior.

Physical therapists (PT). PTs help patients with their physical function and ability to move.

I got dressed by myself today!

You are getting more independent.

Occupational therapists (OT). OTs work on patients' activities of daily living to help them become more independent.

Speech-language pathologists (SLP). SLPs treat problems with speech, communication, cognition, and swallowing.

Igloo, ice, ink, pan, pen, pet.

Your communication is getting so much better!

What a nice blend of colors!

Recreation therapists. These types of therapists help patients find activities to improve their health and well-being. Their goal is to help get the patient back into the community.

Social worker. The social worker gives patients and their families information about community resources. The social worker may even help with the patient's discharge plan.

Try these healthy recipes at home.

Nutritionists or dietitians. Dietitians assess a patient's nutritional status. They provide guidance on good nutrition that fits the patient's diet.

Family Support

Family members can...

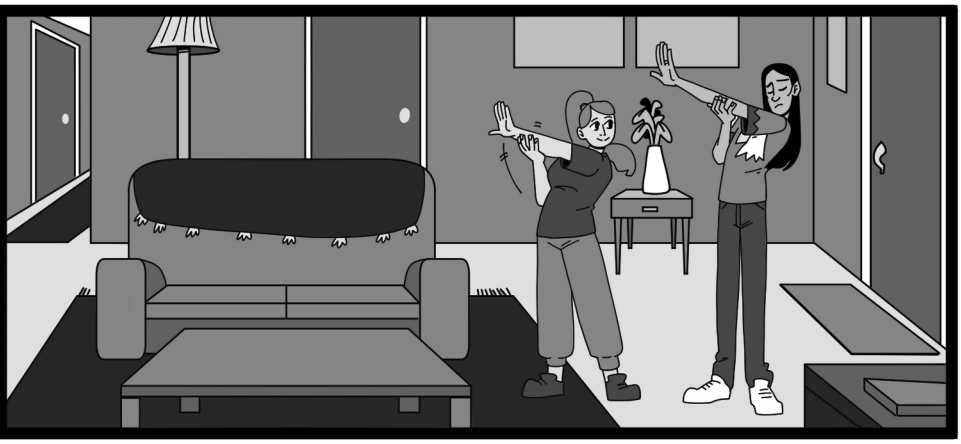
Get to know rehab team members and ask when and how to be part of therapy sessions. Family members can also ask what improvements the patient can expect during rehab.

Ask about the discharge process early and go to family training as discharge gets close. Find out what additional help and supervision the patient may need after discharge.

Discharge

A social worker, care manager, or discharge planner will meet with you to develop a plan as your discharge gets close. Discharge plans fall into four categories:

Home-based rehab services.
This plan is for people who are well enough to be at home but who are not well enough to travel for therapy.



Outpatient services.
This plan is for people who are well enough to be at home and who can travel to an outpatient clinic for therapy.

Residential TBI rehab program.
This plan is for people who are well enough to live in the community but need a supervised and structured environment. Individuals with TBI live on-site in a specialized facility.

Skilled nursing facility.
This plan is for people who are not ready to go home. They need more therapy in a structured environment with nursing care.


Thanks so much, Dr. Brown. We are ready for inpatient rehab!

Source: The content of this infocomic was adapted from the factsheet entitled *Traumatic Brain Injury and Acute Inpatient Rehabilitation* developed by Brian D. Greenwald, MD, in collaboration with the Model Systems Knowledge Translation Center (https://msktc.org).

Disclaimer: This information is not meant to replace the advice of a medical professional. You should consult your health care provider regarding specific medical concerns or treatment. The contents of the infographic were developed under a grant from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR grant number 90DPKT0008). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this infographic do not necessarily represent the policy of NIDILRR, ACL, or HHS, and you should not assume endorsement by the Federal Government.

Traumatic Brain Injury
Resource Bundle
for American Indians