How effective is our Stroke Recovery Program?

Gains are made by patients across all areas of functioning, such as eating, using the restroom, social interactions, and memory. For persons with stroke, the biggest gains were in getting dressed, and walking/using a wheelchair.

Gains are measured with a standardized rehabilitation tool called the Functional Independence Measure (FIM TM) on a scale of 1 (total assistance) to 7 (complete independence).

How satisfied were patients?

<table>
<thead>
<tr>
<th>Satisfaction with MedStar NRH 3 Months after Discharge</th>
<th>1=Very Dissatisfied to 4=Very Satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stroke NRH</td>
<td>3.9</td>
</tr>
<tr>
<td>Stroke Nation</td>
<td>3.8</td>
</tr>
</tbody>
</table>

What if I have more questions?

Talk to your doctor, nurse, therapist, or any other Team Member if you have a question, concern, comment, or complaint. Your MedStar NRH professional team is available to help you. You have a right to ask questions regarding your care!

For more information:

- Call the Patient Action Hotline at 202-877-1411
- Go to MedStarNRH.org

Admissions Office Contact Information:

Phone: 202-877-1152  
Fax: 202-877-1821  
Email: nrhadmissions@medstar.net

Visiting Hours: 9 a.m. - 9 p.m. daily

Welcome to the MedStar NRH Stroke Recovery Program

A CARF-Accredited Specialty Program

Rachna Malhotra, DO Medical Director, Stroke Recovery Program
Lauren Taylor, SLP Co-Director, Stroke Recovery Program
Sandeep Simlote, MD Attending Physician, Stroke Recovery Program

The Stroke Recovery Program at the MedStar National Rehabilitation Hospital provides comprehensive inpatient rehabilitation that begins when the patient is transferred from a referring hospital or facility. The goal in this phase of treatment is to maximize physical and cognitive function, and to optimize medical status and adjustment.

An interdisciplinary assessment is the first step and is conducted during the first few days of the patient’s stay. Focused treatment is provided by an interdisciplinary team that includes medical, diagnostic and nursing care, and a variety of therapies. Together a plan of care is determined, and updated throughout the patient’s stay.

Our ultimate goal is a successful discharge to home with appropriate follow-up care. The discharge plan begins at admission and includes a review of resources, caregiver availability, adjustment concerns, equipment needs and availability of services. The discharge plan is discussed with the patient and family and is based on their individualized needs. Upon discharge, the patient and their primary care provider receive a discharge summary and other helpful information.

You will be working with:
- A Doctor
- Rehabilitation Nurses (RN)
- Physical Therapist (PT)
- Occupational Therapist (OT)
- Speech-Language Pathologist (SLP)
- Social Worker/Case Manager (SW/CM)
- Neuropsychologist
- Other specialized rehabilitation professionals

What is a typical day like?
- You will be busy!
- You will be out of bed and involved in therapies, meals and other activities as much as possible every day.
- In 2017, patients with a stroke received an average of 3 hours of therapy (PT, OT, SLP) a day for a minimum of 5 days per week.
- Most patients participate in group and individual therapy.
- You will receive a schedule each morning.

Where will I have therapy?
- Therapy atrium near your room
- Independence Square
- Victory Garden
- In your room
- In a clinician’s office

A Year in Review
We cared for 652 patients with stroke in 2017. What did our patients look like?

Program Snapshot

You are the most important member of your team!