

# reConnections

2013 JOURNAL FOR WAKEMED REHAB



// PLUS //

WAKEMED'S  
NEW SCI UNIT

JUST FOR KIDS  
REHAB BEDS,  
ENERGIZE!  
& CONCUSSION  
SERVICES

IMPORTANT INFORMATION  
MEDICARE PATIENTS

## OWN IT

A STORY OF UNDAUNTED  
PERSISTENCE  
AFTER STROKE

WakeMed   
Rehab

# reConnections

JOURNAL FOR WAKEMED REHAB

Reconnections is published periodically for referring physicians and case managers as well as patients associated with WakeMed Rehabilitation. Reproduction or use, without permission, of editorial or graphic content in any manner is prohibited. Information in this publication is not a substitute for medical advice or treatment. Please see your doctor if you have any questions about your medical care.

Editor: Rebecca G. Scolio,  
Senior Specialist  
WakeMed Public Relations  
A publication of WakeMed  
Health & Hospitals

President & CEO:  
Donald Gintzig

Executive Director,  
WakeMed Rehabilitation Services:  
Elaine Rohlik

Comments or request for removal  
from the mailing list may be sent  
to WakeMed Public Relations,  
3000 New Bern Avenue,  
Raleigh, NC 27610

## Supporting WakeMed Rehab

The WakeMed Foundation welcomes contributions to benefit the programs and services of WakeMed Rehab. Please call 919-350-7656 or visit [www.wakemed.org](http://www.wakemed.org) for information.

## WakeMed Rehabilitation Locations

### Inpatient Location

#### WakeMed Rehabilitation Hospital

3000 New Bern Avenue  
Raleigh, NC 27610  
919-350-7876

### Outpatient Locations

#### WakeMed Raleigh Campus

#### Outpatient Rehab Program

3000 New Bern Avenue  
Raleigh, NC 27610

#### WakeMed Healthworks

3000 New Bern Avenue  
Raleigh, NC 27610

#### WakeMed Clayton Medical Park

555 Medical Park Place  
Clayton, NC 27520

#### Alexander Family YMCA

1603 Hillsborough Street  
Raleigh, NC 27605

#### Banks D. Kerr Family YMCA

2500 Wakefield Pines Drive  
Raleigh, NC 27614

#### Cary Family YMCA

101 YMCA Drive  
Cary, NC 27513

#### Kraft Family YMCA

8921 Holly Springs Road  
Apex, NC 27539

#### WakeMed Wake Forest Road

#### Outpatient Rehab Center

3701 Wake Forest Road  
Raleigh, NC 27609

#### WakeMed Zebulon/Wendell

#### Outpatient Rehabilitation

535 W. Gannon Avenue  
Zebulon, NC 27597

### Home Health

#### WakeMed Home Health

2920 Highwoods Boulevard  
Raleigh, NC 27604

### Wound Care

3000 New Bern Avenue  
Raleigh, NC 27610  
919-350-4515

## To Make a Referral to WakeMed Rehab

Inpatient: 919-350-7876

Outpatient: 919-350-7000

## Introducing WPP-Physical Therapy

On January 2, 2014, WakeMed North Outpatient Rehabilitation will become WakeMed Physician Practices (WPP) – Physical Therapy. It will be operated by WakeMed's network of affiliated physician practices. Co-pays are the same as for a physician specialist visit – a benefit to patients who must meet high deductibles. In addition, Blue Cross Blue Shield participants no longer need provider referrals. WPP – Physical Therapy is located at 10010 Fall of Neuse Road, Suite 015, in Raleigh. Call 919-350-1508 for information and appointments.



---

## Own It

---

*A Relentless Pursuit of Recovery*



**Bob struggled with his weight until he committed to the right diet and a highly active lifestyle.**

**“Stroke levels the playing field.”**

**B**eth Rudisill, MHA, LCSW, CCM, director, WakeMed Rehabilitation Hospital, made this statement during a recent interview with former patient Bob Butler. It’s a statement that more than hits home for Bob. But, by taking ownership of his recovery, Bob is conquering the effects of his stroke.

At age 59, Bob was an American success story. He was at the peak of his career and in the best health of his life. He had left his position as a chief operating officer of a global technology company to become a successful technology entrepreneur whose start-up ventures have created nearly 500 new top-paying jobs in Cary. Bob was a nationally ranked triathlete, loved to wakeboard at his lake home and is married to an amazing woman. Bob worked with some of the greatest business minds and technology leaders in the world to bring new ideas to the marketplace and has even testified before the US Congress and at the White House.

Much of that changed in May 2012. Bob went to bed and suffered an ischemic stroke in his sleep. Because the time of the stroke could not be determined, he was not a candidate for tissue plasminogen activator (tPA) administration, which can decrease the severity of stroke – the reason it is critical to call 911 at the first sign of a stroke.

Once medically stabilized, Bob found himself in a hospital room unable to talk, swallow or move anything on his right side (he was right-handed). That’s when the proverbial leveling of the playing field became very real.

The short-term brain swelling that accompanies stroke made Bob feel like he was hit by a train. His mind dulled by a concussion-like haze and his right side paralyzed, Bob joined the ranks of the approximately 795,000 Americans who suffer a stroke each year. Not his business connections, financial stature or even his wife, an accomplished physical therapist and former department head of a 200-bed rehabilitation hospital, could restore his stroke-ravaged body and mind. “In a life dominated by successfully overcoming huge odds, for the first time, I knew total despair; I had to scream just as loud as I could and as long as I could,” Bob said.

*continued*

Bob's mental and physical recovery began at WakeMed Rehabilitation Hospital, where he spent six weeks in intensive therapy – speech, physical, occupational, therapeutic recreational and neuropsychological. “My experience at WakeMed was fantastic,” he said. Known in his business



**Bob and his therapists challenge each other to advance his recovery.**

circles for his ability to recruit and retain top talent, Bob became very interested in WakeMed's positive, professional culture. “I interacted with 60 to 70 different doctors, nurses, techs, therapists, administrators and other staff and they all impressed me; every single one of them. I know from almost 30 years in business, you can't do that without the right leadership and corporate culture.”

It was during his time at WakeMed that Bob realized he had an unexpectedly long recovery ahead. And it is important to note that, though Bob's health was excellent just before his stroke, he is no stranger to health issues. He struggled with obesity for many years and eventually conquered it after age 50. “I was obese since I was 10 years old,” explained Bob. “My peak weight was 250, when my goal weight is 170.” During his earlier years, he also had multiple injuries from accidents and had several heart issues including a congenital hole in his heart, atrial fibrillation (requiring three cardioversions) and, yes, open heart surgery for a “widow maker” artery

blockage, all before he was 47. But after he turned 50, he put all that behind him with a new lifestyle focusing on fitness and nutrition.

## Highly Motivated for Full Recovery

It's been approximately one year since Bob suffered his stroke, and, while it's likely his therapy team considers his progress highly inspiring, Bob is more critical of himself. “The goals supported by insurance and the government are being able to perform basic activities for daily living. I want to be ‘like it never even happened’ (with apologies to Servpro™ for using their tag line). I'm at about 60 percent of where I want to be.”

Many stroke patients would be overjoyed to be as far along as Bob one year post stroke. The man who could barely speak, think or move a year ago now actively pursues new business projects with his pre-stroke mental sharpness and energy. He tirelessly researches ways to regain full use of his right hand, arm and leg. He now bicycles 20 miles and swims an hour three times a week on top of rigorous therapy sessions. He has completed his first triathlon since the stroke and even returned to wakeboarding! His experience has taught him some important lessons about himself and what it takes to make the best possible recovery.

## Taking Ownership

“Recovery from open heart surgery was so much easier than my stroke recovery,” a statement from Bob that may surprise readers. After his open heart surgery, Bob returned to work in 10 days. Very few of his coworkers even knew he had heart surgery. He thought his stroke recovery was going to be similar. After all, he was in excellent physical condition. But he couldn't have been more wrong.

“With other major medical conditions, the talent, technology, medicine and your body do most of the work. You mostly just have to get through it. A patient can't help but see this as a ‘fix me’ scenario. With a stroke, after the initial recovery, you only get back what you work for. The medical team can't fix you; they can only help you fix yourself,” said Bob.

“It took me a long time to figure out that I wasn't going to get better right away and my body wasn't



**Bob's wife Karen shares his unwavering focus on a full recovery.**

going to just heal itself. That's when I made the decision to take ownership of my stroke."

Taking ownership of your stroke. Bob considers it the most important driver to achieving optimum recovery. "The real journey begins when you get released from the hospital," he said. "You have to make the choice to look beyond being comfortable in the recliner, set your goals and do the work."

## **Stroke Recovery Is a Marathon – Not a Sprint**

Part of taking ownership for your recovery is recognizing that it can take years, depending on your level of disability. Bob, who sets long- and short-term goals and projections for his business ventures, refers to his stroke recovery as a two- to three-year project. "As long as you keep working, you are going to keep recovering," he said.

You will have your frustrations along the way, but don't give up. Trust that the work you put into your recovery will reward you in the future. "Patience and persistence are everything. It's definitely a two-steps-forward-one-step-back process. Children will start to walk before age 2, but it will be several years

before they have a smooth, natural walk. And they are not dealing with the unique stroke complications of building neuron connections, mitigating tone, addressing muscle atrophy and eliminating undesirable movement compensations," explained Bob.

## **Challenge Your Therapists to Challenge You**

Make it clear to your therapists that you are highly motivated to make the best possible recovery. "How you present yourself within the first 48 hours [of entering a rehabilitation facility or program] is a good indicator of how well you will do," said Bob. "This is really hard to do at the time because your brain is swollen and you feel awful, but do it!" Therapists tailor their services according to the abilities, attitudes and motivation their patients demonstrate. Show them you are up for the challenges they have for you and, in turn, challenge them to reach beyond therapy standards and find new exercises to benefit you. Therapists will love you for it and they will deliver their best for you.

## **Rest, Sleep & Nutrition**

A stroke depletes your physical and mental reserves. When you get tired, you simply have to stop and rest, and a good night's sleep is more important than ever. "Lying awake nights, worrying about your slow recovery will slow your recovery," noted Bob. In other words, you can impede your progress and backslide (i.e., slurred speech returns, physical problems return). "You will need that energy," continued Bob. "I can remember that after a therapy session trying to get the first movement of my thumb I felt as exhausted as I did after a 50-mile triathlon."

Bob learned this lesson, even after a warning from Dr. Patrick O'Brien, medical director, WakeMed Rehabilitation Hospital. "He told me 'Don't go back to work too soon. You'll need those mental reserves.' I didn't listen to him at first, and I paid the price," he said. Bob now makes sure he gets enough rest and sleep. He is also back on his strict fitness diet because he believes recovering from a stroke is like any other athletic training.

*continued*





**Bob has completed several triathlons since his stroke.**

## Schedule Yourself

There are necessary components – exercise, therapy, rest, sleep -- to a successful recovery. Set a schedule that prioritizes these components to fit them into your day. Bob’s exercise and therapy schedule is likely considered rigorous by the average human:

- 1 hour of physical therapy—twice a week
- 1 hour of occupational therapy – twice a week
- 1-hour bike rides – three times a week
- 1-hour swims – three times a week
- 1 hour of fitness training – three times a week
- 1 day of active rest per week
- 1 day of complete rest per week

Bob also emphasizes strategizing important commitments because “physical and mental performance are closely linked during stroke recovery”. On days when he has an important meeting or presentation, he will make it a priority and clear his schedule of other obligations to ensure he performs at an optimum level and doesn’t exhaust his reserves.

Your health care providers can help you create your schedule and change it along the way as you progress. Do not feel that you are being selfish about prioritizing your rehabilitation. Your successful recovery will benefit everyone around you. “Unlike high blood pressure, heart disease, diabetes, etc., you can’t hide a stroke from your career and personal relationships,” said Bob. “Your best move for everyone is to make the maximum investment in your recovery.”

## Knowledge

Bob believes stroke recovery is less about being a Type A personality and more about knowledge – knowledge that anyone can gain about what it is really going to take to get where you need to be. For some stroke patients, the therapies that are currently available can only take you so far. Bob credits his insatiable appetite for knowledge and his therapists’ willingness to think “outside the box” for much of his progress. Bob’s wife, Karen, shares his thirst for knowledge and continuously researches old and new treatments and techniques to help her husband reach peak recovery. Helping Bob has reignited her passion for helping severely affected patients recover, and she has even returned to her career roots as a physical therapist.

Bob’s exceptional progress correlates directly with the significant commitment he has made to his recovery. He continues to own it every day.

---

# Get Fit & Stay Lean!

## *The WakeMed Spinal Cord Injury Fitness Program*

---

**A**n obesity epidemic is sweeping our nation, and people with spinal cord injuries (SCIs) are not exempt. Physical activity plays an important role for all Americans in the “battle of the bulge”, staying heart healthy and preventing disease (i.e. diabetes). For people in wheelchairs, exercise also helps prevent shoulder pain and joint deterioration and build strength and endurance in upper body muscles. Maintaining a healthy weight – a benefit of increased physical activity – decreases shoulder stress (less weight to wheel) and the risk of skin folds and related sores.

“Many people who have SCIs need help from someone who really knows what they’re doing when they exercise,” said Kathy Thompson, MHA, MA/CCC/SLP, director, WakeMed Acute Rehabilitation Services & Wound Care. “Our SCI patients would tell us that they had this need, but there wasn’t the right source out there to provide the service. That’s when we developed the WakeMed Spinal Cord Injury Fitness Program.”

The WakeMed SCI Program is one-of-a-kind for Wake County. SCI Program participants first meet with a physical therapist and/or occupational therapist to create an individualized fitness program. A fitness specialist then works with the participant as needed. The participant’s fitness program is re-evaluated from time to time to ensure it continues to meet their needs. “We are very fortunate to have a fitness specialist who is trained to work with individuals with SCIs on our staff,” added Thompson.

The Spinal Cord Fitness Program is held in the Rehabilitation Gym in the WakeMed Health Park. In the gym, participants have access to state-of-the-art equipment, including:

- RTI/FES Bike
- SCI-FIT Bike for UE/LE (boots)
- Bowflex
- Rick Shaw
- Glider
- Standing Frame

Fees are based on participants’ needs (such as equipment and level of assistance/supervision) and frequency of workouts. For more information about the WakeMed Spinal Cord Injury Fitness Program, call 919-350-8347 or visit [www.wakemed.org](http://www.wakemed.org) and enter “Spinal Cord Injury Fitness Program” in the search box.







Four rooms for pediatric patients. Children can choose their own wall décor to personalize their private room.



## The New WakeMed Spinal Cord Injury Unit

**W**ith all private rooms and its own therapy gym, the new WakeMed Spinal Cord Injury (SCI) Unit is up and running in the WakeMed Rehabilitation Hospital. “Our rehabilitation program for patients who have spinal cord injuries begins in the emergency department when they arrive for surgical and acute care,” explains Kathy Thompson, MHA, MA/CCC/SLP, director, WakeMed Acute Rehabilitation Services. “Patients and their families can remain at WakeMed throughout the entire surgical, medical, inpatient rehabilitation and outpatient rehabilitation continuum of care and that makes us unique from other facilities. Now that we have a unit specifically dedicated to our patients with SCIs, we have raised the bar even higher.”

For additional information or to schedule a tour of the new WakeMed Spinal Cord Injury Rehabilitation Unit and details about WakeMed’s comprehensive continuum of care for inpatients and outpatients with spinal cord injuries, please call 919-350-8861. For other information about the WakeMed Rehabilitation Hospital, please call 919-350-7876.

8

**Right: An in-unit gym equipped with special equipment such as the RT300 Functional Electrical Stimulation Cycle, the FES bike and additional electrical stimulation equipment.**





Many rooms have couches that convert from sleeping couches to work spaces as well as sinks that accommodate wheelchairs.



The in-unit gym is home to one of only three Vector Gait & Safety Systems in the U.S. It allows patients to work on walking without the fear of falling.



A special area near the SCI Rehab Gym where patients and families can use computer stations and enjoy activities.

Speech therapists can work with patients on their swallowing, voicing or speech in the SCI unit.







*“I was in denial. I always said that my weight wasn’t holding me back from doing things, but it was.”*

## Solving a Lifelong Weight Problem



**L**ooking back at a lifetime of being overweight, Nancy De Paz knows that “hindsight is 20/20.” A world traveller, De Paz always had to ask for a seatbelt extender on airplanes. The fluffy white bathrobes in cruise ship staterooms never fit. Segway tours with friends were out because she was over the weight limit. But Nancy never realized how much being overweight really did impact her life until she had weight loss (bariatric) surgery and lost more than 165 pounds (and still losing!). She also didn’t realize that it takes much more than surgery alone to be healthy.

At age 51, Nancy De Paz was 5’6” and weighed about 335 pounds. She had type 2 diabetes, high blood pressure, high cholesterol and sleep apnea. Copays on her medications totaled about \$700 a quarter.

“I talked to my doctor about bariatric surgery, and she was all for it,” explained De Paz. For the next six months, De Paz visited her doctor once a month to prove her ability to lose some weight on her own (part of the preliminary work prospective bariatric patients must do before they can qualify for the surgery). Though she put forth a good effort with diet and exercise, Nancy only lost 11 pounds and she suffered a knee injury, which was likely due in part to her lifelong weight problem.



While receiving physical therapy at WakeMed Outpatient Rehabilitation at North Healthplex, De Paz told her therapist, Chris Billiar, PT, that she was planning to have bariatric surgery. “Chris told me that WakeMed had a bariatric surgery program at WakeMed Cary Hospital and gave me a phone number to call,” said De Paz. “That conversation changed my life. There was a reason I met Chris.” It turns out that De Paz would later revisit WakeMed Outpatient Rehabilitation at North Healthplex but for a different reason.



Next, De Paz went to WakeMed Cary Hospital for a presentation by Dr. Brandon Roy, a general surgeon with Wake Specialty Physicians – General Surgery, who specializes in minimally invasive bariatric surgery procedures. “He said something that hit home for me,” recalled De Paz. “He said that bariatric surgery was not a magic bullet; it’s just a tool used in conjunction with a comprehensive support system, diet and exercise to achieve a healthy weight and lifestyle.”

After careful consideration, De Paz had bariatric surgery on April 19, 2012. Today, she considers it one of the best decisions of her life. “I set a goal that when I lost 100 pounds I would do that Segway tour, and I did it,” she exclaims. In fact, she has done it several times.

Today, De Paz has lost 165 pounds, has completed several 5Ks and is, in general, more active. An important part of De Paz’s bariatric surgery protocol was visits with a certified exercise specialist. It happened that Exercise Specialist Melissa Bell, HFS, CES, provided activity and exercise consults to bariatric surgery patients at WakeMed Outpatient Rehabilitation at WakeMed North.

“I knew I liked to do group activities,” says De Paz. “I am more motivated by a group than I am on my own and it’s more social. Melissa provided resources where I could find group activities that interested me.”

Bell meets with patients once before their surgery, once after and by appointment (for a small fee) if patients would like additional assistance. “The starting point is whether the patient has exercised in the past or is just beginning,” she explains. Bell and her patients then talk about exercise basics – stretching, cardiovascular exercise and strength training. “We put a lot of emphasis on how to stay motivated, goal setting and rewards,” explains Bell. “Knowing how to exercise is often the easy part. How to sustain an active lifestyle can be tough for everyone.” Bell often fields calls and emails from patients when they have questions.

De Paz admits that being active five days a week is a big challenge, but, thanks to Bell and the support of her long-time partner Helen, she has the tools to get and stay on track. In fact, De Paz is a motivator for Helen, too. In June, Helen also had bariatric surgery at WakeMed Cary Hospital and is making positive progress.

---

# The WakeMed Robotic Walking Program

*Benefits Patients with Lower-extremity Paralysis or Weakness*

---

**W**akeMed Rehabilitation Hospital is one of just 22 facilities in the United States approved to use the Ekso™ wearable robot (exoskeleton)

to help people who have lower-extremity weakness or paralysis stand and/or walk and enjoy the benefits of being vertical.

## Ekso Benefits

- Weight bearing – Stimulates bone density and decreases tone and/or spasms
- Upright posture – Facilitates better bowel and bladder emptying
- Vertical position – Facilitates improved cardio-pulmonary function
- Controlled movement pattern – Allows the ability to walk in a normal movement pattern
- Neutral posture – Allows the patient to work on balance and postural control in a neutral posture
- Upright posture & lower extremity range of motion: Decreased neuropathic pain
- Standing position: Decreased pressure on ischial tuberosities
- Upright posture & gait pattern: The joy of walking and looking people in the eye!

## Who Can Use Ekso?

Ekso users must:

- Be between 5'2" and 6'2"
- Weigh less than 220 lbs.
- Have a hip width less than 16.5"
- Be independent with sitting balance and transfers to chairs with no arms
- Be able to use a walker or crutches to balance
- Be in a standing program or pass a standing frame trial

Joint range-of-motion limitations, pregnancy, colostomy, deep vein thrombosis, osteoporosis, skin breakdowns, certain cognitive impairments, uncontrolled spasticity and other conditions can prevent a person from qualifying for the WakeMed Robotic Walking Program. That is why a thorough phone interview is the first step to determine if a person qualifies for the program.

## Getting Started

For information about Ekso and the WakeMed Robotic Walking Program, please contact Janis McLaughlin, manager, WakeMed Outpatient Rehabilitation, at [jamclaughlin@wakemed.org](mailto:jamclaughlin@wakemed.org) or 919-350-5175. To schedule a telephone screening, call WakeMed Outpatient Rehabilitation at the Health Park at 919-350-8347.

*"I love the feeling of independence and empowerment that I feel when walking with Ekso. It's so wonderful to stand up, look people in the eye and have a conversation."*

**Debbie Myers, WakeMed Robotic Walking Program participant**





# Just for Kids

## Learning to Thrive with WakeMed ENERGIZE!

Learning to make family-centered healthy lifestyle changes and choices. That's what WakeMed ENERGIZE! is about. Children who learn to eat right and exercise regularly are less likely to develop chronic health conditions such as heart disease, diabetes and obesity. The adults participating in ENERGIZE! enjoy these same benefits right along with their children. Hannah Williams and her grandmother Alice Burch are great examples of how building a healthy lifestyle through ENERGIZE! can directly and positively impact health indicators.

At age 13, Hannah was on a precarious path. A trip to her physician revealed elevated blood pressure and cholesterol levels due to family medical history, limited exercise and a less-than-healthy diet. But that trip to the doctor also yielded a solution: WakeMed ENERGIZE!.

Hannah's physician provided the necessary referral for ENERGIZE!, and soon Hannah was fully involved in the 12-week program at AE Finley YMCA in north Raleigh. Her grandmother, 67-year-old Alice Burch, took Hannah to her fitness sessions, and, in keeping with the program, exercised at the Y as well.

"Children who have support of their families are typically the most successful at making lasting changes," notes Julie Paul, MS, RD, LDN, CDE, ENERGIZE! program coordinator.

"The thing she liked best about ENERGIZE! was that it doesn't feel like exercise," explains Alice. "She felt like she was just playing games; not exercising. Hannah also loves to dance so she had a great time when they did Zumba®." WakeMed ENERGIZE! professionals also helped Hannah make some simple, healthy changes to her diet to both lose

### New Dedicated Children's Rehab Beds



Children in need of inpatient rehabilitation services deserve their own space, too! That's why the WakeMed Rehabilitation Hospital now houses four private rooms for children ages 4 and up (and younger on a case-by-case basis). Sleeping couches for a parent are conveniently located in the rooms, which are decorated with soothing organic colors and features.

WakeMed Rehabilitation offers comprehensive inpatient and outpatient care for children of all ages and diagnoses such as congenital issues, traumatic brain injury and serious physical injuries. For additional information, please call 919-350-8864 or send an email to [brudisill@wakemed.org](mailto:brudisill@wakemed.org).





With the support of her grandmother, Hannah continues to build activity into her life.

weight and decrease her chances of developing type 2 diabetes – a primary purpose of the program. “Hannah doesn’t drink any soda anymore,” says Alice. “She has also cut down on white bread and now eats more whole grains.”

The results? Hannah lost 12 pounds and brought her cholesterol and blood pressure back to normal. Alice, who has struggled with pre-diabetes and blood pressure issues, now maintains healthy glucose and blood pressure levels as well.

“WakeMed ENERGIZE helps children and their parents avoid health issues that are directly related to poor diet and lack of physical activity,” says Julie. “It’s wonderful when families like Alice and Hannah can see actual, positive results in both their waist lines and their health indicators, such as blood pressure, cholesterol and blood glucose levels. The benefits become very real and that can be very impactful.”

# ENERGIZE!

Parents are welcome to enroll their children and teens (ages 6 to 18) with a referral from their family physician. The ENERGIZE! team evaluates participants’ current health behaviors and provides ongoing education and support. Based on family needs and motivation levels, each family will be enrolled in one of the following options:

- A 12-week exercise and educational program that meets three times a week. Group healthy lifestyle education and fitness programs are provided at community-based locations (such as local YMCAs). Participants then follow up with the ENERGIZE! team every six months for two years to help ensure healthy ongoing progress.
- Individual medical nutrition therapy and healthy lifestyle education sessions including customized meal and fitness plans. Participants regularly meet with the ENERGIZE! team for ongoing support and goal setting.

Physician referrals are required. Referral forms and more information are available at [www.wakemed.org](http://www.wakemed.org) or by calling 919-350-5955.

## Concussion: When Is It Safe to Return to Play?



US emergency departments have seen a 60 percent increase in the number of sports- and recreational activity-related traumatic brain injuries (including concussions) during just the past 10 years, according to the Centers for Disease Control and Prevention website.

“In many cases, children are more vulnerable to head injury and heal more slowly than adults,” said Carrie Dow-Smith, MD, a pediatrician with WakeMed Faculty Physicians-Pediatrics and Concussion Services. “That’s why expert evaluations are critical for young athletes who sustain real or suspected concussions during play.”

Enter WakeMed Concussion Services. Led by a pediatric neurologist, WakeMed physical therapists, occupational therapists and speech language pathologists provide special screenings to determine if your child has fully healed after suffering a mild head injury. Services are available to children and teens ages 7 to 17 who have suffered a minor head injury within the past two weeks and include:

- Neurological exam and history documentation
- Neurocognitive and functional assessments including Immediate Post-concussion Assessment and Cognitive Testing (ImPACT)
- Balance testing
- Dynamic visual acuity testing

For more information about WakeMed Concussion Services, visit [www.wakemed.org](http://www.wakemed.org) or call WakeMed Concussion Services at 919-350-4340. WakeMed Concussion Services is located in the WakeMed Wake Forest Road Outpatient Rehabilitation Center at 3701 Wake Forest Road in Raleigh.

### Fast Facts about Kids and Concussions

- US emergency departments see more than 170,000 kids ages 0 to 19 for sports- and recreational activity-related traumatic brain injuries (including concussions) each year.
- Children and teens are more likely to get a concussion and take longer to heal than adults.
- Bicycling, football, playground activities, basketball and soccer are the activities associated with the greatest number of pediatric, traumatic brain injury-related emergency department visits.

Source: Centers for Disease Control and Prevention



## From Coma to Baseball Diamond

In January, 16-year-old Noah Bacon left for school and didn't return home for five months. No one really knows why the Durham resident's car left the road, but when the rescue crew reached the accident, Noah had to be cut out of the car.

Noah sustained massive injuries including a traumatic brain injury. He received immediate treatment at Duke Hospital where he spent several weeks in a medically induced coma to promote brain healing.

Once stabilized, Noah was ready for transfer to a rehabilitation hospital. But what rehabilitation facility would take a young patient in a coma who was expected to recover and be able to undergo intensive therapy?

Once at WakeMed Rehabilitation Hospital with at least one of his parents at his side every day, Noah went from coma, to consciousness, to intensive inpatient therapy. Noah's mother, Clarissa Bacon, recalls Noah's stay at WakeMed. "Everyone – the doctors, nurses, therapists – were so kind and respectful to our son. They were always positive and upbeat and made the whole situation bearable."

On Sunday, July 21, Noah Bacon, one of WakeMed's amazing Comeback Kids, threw out the first pitch – a rising fastball – at the Carolina Mudcats game vs. the Winston-Salem Dash.

Keep up the great work, Noah! You're amazing!



---

# Important Information for Medicare Patients

## *Outpatient Rehabilitation Regulatory Updates*

---

**R**egulatory changes in the Medicare Program may impact your ability to receive outpatient therapy services. One of the most significant changes is the Medicare limitations on therapy services. Medicare limits how much it pays for outpatient physical therapy, occupational therapy and speech-language pathology services in each calendar year. These limits are called “therapy caps” or “therapy cap limits and thresholds.”

This information only applies if you have the original Medicare Part B coverage. If you have a Medicare Replacement or Medicare Advantage Plan (like an HMO or PPO), check with your plan for information about your plan’s coverage rules on therapy services.





## Background

The Middle Class Tax Relief and Job Creation Act of 2012 signed into law in February 2012 made several modifications to therapy caps and the exceptions process and also extended the therapy caps and exceptions process to hospital outpatient departments for the first time. These changes have been in effect since October 1, 2012.

## Medicare Cap Q&A

### What are the outpatient therapy cap limits for 2013?

- \$1,900 for physical therapy (PT) and speech-language pathology (SLP) services combined
- \$1,900 for occupational therapy (OT) services

After you pay your yearly deductible for Medicare Part B (Medical Insurance), Medicare pays its share (80%), and you pay your share (20%) of the cost for therapy services. The Part B deductible is \$147 for 2013. Medicare will pay its share for therapy services until the total amount paid by both you and Medicare reaches either one of the therapy cap limits. Amounts paid by you may include costs for the deductible and coinsurance.

### Once I reach the 2013 \$1,900 cap, can I get an exception to the therapy cap limits?

You may qualify for an automatic exception to the \$1,900 therapy cap limits which would allow Medicare to pay for services after you reach the therapy cap. To qualify, your care must be medically reasonable and necessary and documented as such in your medical record. When your therapist identifies that you are at or near the cap and continued care is medically reasonable and necessary, he/she will give you a written notice, called an “Advance Beneficiary Notice of Non-coverage” (ABN), before providing services. The

ABN lets you choose whether or not you want the therapy services. If you choose to get the services, you agree to pay for them if Medicare doesn’t pay. The automatic exceptions process can continue if services are reasonable and medically necessary until the \$3,700 threshold is met for occupational therapy services and a second \$3,700 threshold for physical therapy and speech-language pathology services combined.

### What can I do if I need services that will go above the outpatient therapy \$3,700 threshold?

If you continue to require skilled medically necessary care after meeting the threshold amounts, you can choose to continue your services with the knowledge that Medicare may not cover the services. Your therapist must give you a written notice, called an “Advance Beneficiary Notice of Non-coverage” (ABN), before providing services over the threshold. The ABN lets you choose whether or not you want the therapy services. If you choose to get the services, you agree to pay for them if Medicare doesn’t pay. Once services are received and charges are submitted to Medicare, a Medicare assigned Recovery Audit Contractor (RAC) will review your medical records and check for documentation supporting that services were medically reasonable and necessary. If they agree that the services were needed, the services will be covered by your Medicare plan.

WakeMed benefits specialists are available at 919-350-5251 to assist with this complicated process. They can check your Medicare cap amounts prior to your first therapy appointment. If you are at or near your Medicare cap amounts, they will contact you by phone to discuss your options. They will also discuss and answer any additional benefits questions during your initial appointment registration process.

# WakeMed Rehabilitation Inpatient & Outpatient Data

The entire WakeMed Rehabilitation team thanks the providers, patients and families who support our efforts to provide high-quality care and service across our care continuum. The following data is derived from WakeMed Outpatient Rehabilitation admission and discharge information from October 1, 2011 through September 30, 2012, and WakeMed Rehabilitation Hospital data from January 1, 2012 through December 31, 2012.

## Outpatient Rehabilitation

### Day Treatment

Total Day Treatment Discharges	162
Total Visits	8,914
Overall Patient Satisfaction	95%

### Admission Diagnosis

Cerebrovascular Accident (CVA)	56%
Brain Injury	24%
Spinal Cord Injury	14%
Other Neuro Conditions	1%
Multiple Trauma	1%
Other	4%

### Our Spinal Cord Injury Patients

Total Discharges	22
Average Age	39
Average Length of Service	85 days

### Our Brain Injury Patients

Total Discharges	39
Average Age	40
Average Length of Service	85 days

### Pediatric Neuro Rehab Patients

(ages 4-17)	
Total Number	6
Average Age	12
Average Length of Service	78 days

For additional information about the WakeMed Day Treatment Program, please call 919-350-1711.

## Rehabilitation Hospital

### Admission Diagnosis

Orthopaedic	25%
Cerebrovascular Accident (CVA)	24%
Brain Injury	9%
Spinal Cord Injury	8%
Debility	7%
Multiple Trauma	6%
Amputee	4%

### Our Orthopaedic Patients

Total Discharges	410
Average Age	69
Average Length of Stay	13 days

### Our CVA Patients

Total Discharges	401
Average Age	65
Average Length of Stay	21 days

### Our Brain Injury Patients

Total Discharges	149
Average Age	54
Average Length of Stay	18 days

### Our Spinal Cord Injury Patients

Total Discharges	131
Average Age	61
Average Length of Stay	21 days

### Our Debility Patients

Total Discharges	111
Average Age	67
Average Length of Stay	17 days

### Our Multiple Trauma Patients

Total Discharges	89
Average Age	46
Average Length of Stay	19 days

### Our Amputee Patients

Total Discharges	64
Average Age	63
Average Length of Stay	19 days

### Pediatric Patients (ages 5-17)

Total Number	16
Average Age	13
Average Length of Stay	24 days



## Support Groups

### WakeMed Amputee Support Group

4 to 5 pm

Third Tuesday of each month

WakeMed Raleigh Campus

Rehabilitation Hospital

3000 New Bern Avenue, Raleigh

For information, call 919-350-8903

### Spinal Cord Injury or Disease (SCI/D) Support Group

WakeMed Raleigh Campus

Rehabilitation Hospital

3000 New Bern Avenue, Raleigh

For information, call 919-350-8137 or

e-mail [kvasquez@wakemed.org](mailto:kvasquez@wakemed.org)

## Brain Injury Support Groups

### Triangle Brain Injury Support Group

7 pm

Third Tuesday of each month

A separate caregiver support group  
meets at the same time

WakeMed Raleigh Campus

Conference Dining

3000 New Bern Avenue, Raleigh

For information, call 1-800-377-1464

or 919-618-3003

### Cary Brain Injury Support Group

6:30 pm

First Monday of each month

WakeMed Cary Hospital

Conference Center

1900 Kildaire Farm Road, Cary

For information, call 919-460-9094

## Stroke Support Groups

### WakeMed Rehabilitation Hospital Health Park

Noon to 1 pm

Second Tuesday of each month

WakeMed Raleigh Campus

3000 New Bern Avenue, Raleigh

For information, call 919-350-4163

### WakeMed Cary Hospital Conference Center

6:30 to 8 pm

First Monday of each month

1900 Kildaire Farm Road, Cary

For information, call 919-350-9094

### WakeMed Clayton Medical Park

Noon to 1 pm

Third Wednesday of each month

555 Medical Park Place, Clayton

(off Highway 70 West between

Guy & Shotwell roads)

For information, call 919-350-4174



---

# Weathering the Audit Storm

## Rehabilitation Hospital Regulatory Update

---

**W**hile there have been no significant changes to the Inpatient Rehabilitation Facility (IRF) Medicare regulations in the last couple of years, there has been a substantial increase in the level of audit activity impacting the industry. MACs, RACs, MICs and CERTs are just a few of the types of audits that make up the alphabet soup of pre- and post- payment contractors examining the records of inpatient rehabilitation facilities. WakeMed Rehab Hospital has not been immune to this activity.

The Medicare Modernization Act of 2003 introduced

Administrative Contractor (MAC), Medicaid Integrity Contractor (MIC) and Comprehensive Error Rate Testing (CERT) audits. The goal of these contractors - program cost containment and to ensure patients receiving care in IRFs meet established medical necessity guidelines.

In the past 18 months, WakeMed Rehab Hospital has had 82 requests for records by one audit contractor or another. Following a review of records, the vast majority have resulted in a favorable decision on WakeMed's part. However, through the handful of denials, there have been some lessons learned. In order to make the valuable inpatient rehabilitation program accessible to patients in the future, WakeMed Rehab has made every effort to learn from denials and bolster documentation to ensure every eligible patient has an opportunity to receive services.

Particular scrutiny is being placed on patients with orthopaedic conditions as well as those with diagnoses that lead to short rehabilitation hospital stays.

### Audit Q & A

**As a recipient of services at WakeMed Rehab Hospital or another IRF, do I run any personal risk of financial liability?**

No. If WakeMed Rehab determines you to be eligible for services and offers a bed for rehabilitation, you do not put yourself at financial risk. If your case is audited and a denial decision is rendered, you will not receive a bill. WakeMed Rehab will absorb the cost of your care.

*continued next page*

the concept of the RAC (Recovery Audit Contractor) audit, designed to identify and recover improper Medicare payments. The hope was to make the program permanent in January of 2010, though North Carolina IRFs didn't begin to feel the impact until late in 2011. Since that time, the program has expanded to include Medicare





**As a referral source, should I alter the types of referrals I send to WakeMed Rehab Hospital for potential admission?**

No. The WakeMed Rehab Admissions Department is staffed with experienced admissions nurses who understand IRF admission criteria as well as the scrutiny on the industry as a result of these audits. They will evaluate your patient's medical and functional status, confer with our medical director and make a bed offer if the medical record indicates your patient meets IRF qualifications and your patient's care needs could not be met at another, less expensive level of care.

**Do I need to review and understand IRF qualifications for admission?**

No. You can trust the WakeMed Rehab Admissions Department staff to interpret regulations and render an appropriate decision.

Please contact the WakeMed Rehab Admissions Department at 919-350-7876 if you have any questions about CMS criteria or to make a referral.



**WakeMed Zebulon/Wendell Outpatient Rehabilitation Continues to Serve Patients**

Physical therapy, occupational therapy and speech therapy services continue to be offered at WakeMed Zebulon/Wendell Outpatient Rehabilitation. The therapy team recently participated in a community health fair and hosted a balance event at their facility at 535 W. Gannon Avenue in Zebulon. "We want to show our neighbors that we continue to be committed to the community and look forward to serving their therapy needs," says LuAn Bartos, PT, manager, WakeMed Outpatient Rehabilitation. Patients are welcome by physician referral and appointments can be scheduled by calling 919-350-7000. For additional information, please call WakeMed Zebulon/Wendell Outpatient Rehabilitation at 919-350-4747.



**NASCAR Supports Scully!**

Driver Brodie KostECKi, who is NASCAR's first Canine Companions for Independence ambassador, poses with Zachary, a WakeMed Rehabilitation patient and Scully, a service dog with WakeMed's Pet Assisted Therapy program.



**Rehabilitation**

3000 New Bern Avenue  
Post Office Box 14465  
Raleigh, North Carolina 27610-4465

ADDRESS SERVICE REQUESTED

Non Profit Org.  
U.S. Postage  
PAID  
Raleigh, NC  
Permit No. 1307

# inside

- A Relentless Pursuit of Recovery .....3
- WakeMed Spinal Cord Injury  
Fitness Program ..... 7
- The New WakeMed Spinal Cord  
Injury Unit..... 8
- Solving a Lifelong Weight Problem..... 10
- The WakeMed Robotic Walking Program ..... 12
- WakeMed ENERGIZE!..... 14
- Returning to Play after Concussion ..... 16
- From Coma to Baseball Diamond ..... 17
- Information for Medicare Patients..... 18
- Inpatient & Outpatient Data ..... 20
- Calendar ..... 21
- Weathering the Audit Storm..... 22
- Zebulon/Wendell Continues to Serve.....23

