

Referral Checklist

This checklist is a resource tool to be used prior to completing the Complex Care Rehabilitation Application for admission to Community Re-integration Unit or Slow to recover stream. The checklist will assist in determining if your patient meets criteria, is rehab ready and if any outstanding items need to be achieved.

DEMOGRAPHICS

- Age 16 or older
- Ontario resident
- Moderate or severe brain injury
- Functional Impairments *different from prior baseline* due to the following new diagnoses responsible for current hospital admission: Traumatic Brain Injury, Anoxic/Hypoxic Brain Injury, Intracranial aneurysms or hemorrhages, or Encephalitis
- Consideration may be given to patients with:
 - A primary benign brain tumour, once surgical and/or adjuvant treatment has been completed
 - Ischemic stroke with cognitive or behavioral impairments not able to be addressed on an inpatient stroke rehab unit
 - Concurrent medical conditions that may affect rehab participation

MEDICALLY STABLE / NO ACUTE MEDICAL ISSUES:

- No Ventilators
- Stable respiratory status and tracheostomy
- No nasogastric tubes
- No active suicidal plan and/or psychosis
- All diagnostic investigations completed
- Plans for pending surgical procedures (e.g. Bone flap insertion) or medical treatment (i.e. dialysis, addictions treatment) are specified on the referral form
- Stable vitals and laboratory results (no significant fluctuation in medical status within 72 hours prior to admission)
- No significant wound impeding ability to participate in high intensity rehab
- Referral is not due to impairments due to a progressive or degenerative disorder (e.g.: Cancer, dementia, Parkinson's, etc.)
- Not undergoing radiation or chemotherapy that would affect rehab participation

REHAB READY:

- Consistently follows one-step commands
- Demonstrates potential for improvement (i.e. carryover of new learning)
- Have completed a formal occupational and/or physiotherapy and/or speech language pathologist assessment with achievable rehab goals specified on the referral form

DISCHARGE DESTINATION DISCUSSION:

- Repatriation Agreement will be required prior to admission
- Discharge planning and resources initiated in their community
- Discussion has taken place with patient and family regarding support and resources at home where applicable