



Spinal Cord Program

The Spinal Cord Program treats all levels of spinal cord dysfunction through its continuum of care. Our goal is to help each individual achieve the highest possible level of independence and psychosocial adjustment and to acquire the necessary skills to reintegrate into the community.



Referral information

For more information about the Rehabilitation Center, please give us a call or visit our website.

2100 Stantonburg Road, PO Box 6028
Greenville, NC 27835-6028

Referrals can be made by calling toll free 800-219-8850 or 252-847-7649.
252-847-8222 fax

ECUHealth.org/Rehab

The Rehabilitation Center at ECU Health Medical Center has a dedicated program for individuals with spinal cord injuries. The program provides medical and rehab nursing care 24 hours a day, seven days a week. The Spinal Cord Program has a separate treatment room, dining area and lounge, outside courtyard and independent living area. This is a place where individuals and family members can practice the things needed to be able to do when discharged.

How we can help

The Spinal Cord Program serves individuals with traumatic and non-traumatic spinal cord injuries of all levels including complete and incomplete. Individuals with an injury requiring ventilation management are treated in special rooms on the unit. Ventilator care may include continuous monitoring of respiratory status, prevention of further respiratory compromise and participation in a ventilator-weaning program. Families who will manage a person with long-term requirements receive training in ventilator management and emergency plans to consider.

Individuals in this program may need help with moving around, bathing, dressing, controlling bowel or bladder, toileting, communicating, swallowing, thinking, learning and memory, understanding medical and physical issues, and adjusting to having a spinal cord injury.

The Spinal Cord Program strives to address the medical, functional, and psychosocial aspects of spinal cord injuries. The Spinal Cord Program is

committed to providing education to the communities we serve and serving as a resource to other professionals.

Medical

Medical aspects include autonomic dysfunction, bowel and bladder functions, circulation and cardiopulmonary conditions, dysphagia (swallowing), edema, fertility, gender specific health concerns, infection, medication management, neurologic and musculoskeletal issues, nutrition, pain, pressure injuries and skin integrity, sexual dysfunction, and spasticity.

Functional

Activities of daily living, adaptive equipment including orthotics and prosthetics, assistive technology including environmental modifications, behavior, bowel and bladder training, cognition, communication, driving, durable medical equipment, emergency preparedness, independent living and community integration, health promotion and wellness, leisure and recreation, mobility, prevention related to risks and complications due to impairments, activity limitations, participation restrictions and the environment; promotion of safety, seating, securing personal care assistants, transition planning and vocational interests.

Psychosocial

Adjustment to disability and changes in body composition; aging with a spinal cord injury; behavioral health; case management; family/caregiver counseling, education and training; resource management; substance abuse; peer support services; sexual adjustment, education and counseling.

Team approach

Families are important members of the team. The rehabilitation case manager/social worker is your main contact person to discuss your needs, progress and plans for discharge. He or she will arrange services for follow-up care help with information about local resources patients and families may need during their stay. Your cultural and spiritual beliefs, goals and preferences will be an important part of the plan. Research opportunities are facilitated through ECU Health's Center for Research and Grants.

A dedicated interdisciplinary team follows patients throughout their rehabilitation program. Treatment team members are available as needed and may include:

- Medical family therapist
- Nutritionist
- Occupational therapist
- Physical therapist
- Recreational therapist
- Rehabilitation case manager/social worker
- Rehabilitation nurse
- Rehabilitation physician
- Speech-language pathologist

As discharge approaches, the team and family may use the center's transitional living apartment where care requirements for the person served can be simulated and monitored. The rehabilitation team may also conduct a home assessment and make recommendations for adaptive equipment, home modifications to enhance self-care, mobility and overall home safety. Before discharge, the treatment team may arrange an outing focusing on education, safety and skill development for community

pursuits. It is extremely important that families and caretakers participate in training to be prepared to care for their loved one when discharged.

Continuum of care

Our center is part of a major academic health system that offers a full range of medical, diagnostic, laboratory, pharmacy and other services on site. Medical specialists are available for emergency (within one hour), urgent (within four hours), and routine (within 12 hours) consultations. Our diagnostic, laboratory and pharmacy orders are transmitted real time through the hospital electronic system. Regularly scheduled follow-up services are provided through our outpatient clinics.

To make a referral

We accept referrals from physicians, case managers, social workers, therapists, other types of health care providers and representatives of the patient. Referrals are considered on an individual basis, and each potential inpatient is evaluated by a rehabilitation preadmission nurse and a rehabilitation physician prior to admission.

For additional information or to make a referral for inpatient services, contact the Rehabilitation Center's Admissions Department between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday, toll free 800-219-8850 or 252-847-4345.

General admission criteria

Persons with all levels of spinal cord injury and accompanying co-morbidities (such as skin issues, etc.) are served: complete, incomplete, tetraplegia and paraplegia.

The person served must:

- Have a spinal cord dysfunction caused by trauma or disease
- Be at least age 18 or an emancipated minor
- Be able to participate in therapy at least three hours a day, five days per week
- Have medical and nursing needs that require an inpatient admission
- Have two or more limited functions that require a planned program with an interdisciplinary team approach

Continuing stay criteria

To continue a successful inpatient rehabilitation program, individuals must:

- Continue to have medical and nursing needs that require an inpatient stay
- Be participating in three hours of therapy daily
- Be demonstrating progress in therapy programs

Transition and discharge criteria

An individual will be discharged when one or more of the following happens:

- Needs can be best served and resources will be conserved at another level of care
- 24-hour medical care is no longer needed
- Discharge goals have been met; there is no further demonstrated improvement with therapy
- Cannot participate in three hours of therapy per day
- Chooses not to participate in the program

Whom did we serve?

Spinal Cord Rehabilitation Program | 10/1/2020 – 9/30/2021

	TSCI ¹ Paraplegia	TSCI ¹ Quadriplegia	TSCI ¹ Other	NTSCI ² Paraplegia	NTSCI ² Quadriplegia	NTSCI ² Other
Number of persons served	7	27	12	26	11	50
Average age	36.71	50.59	57.92	51.85	62.82	64.56
Average number of days in rehabilitation	27	22.93	13.08	15.54	17.00	12.66
Average number of therapy hours per day	3.16	3.17	3.13	3.10	3.02	3.19
Average number of therapy days per treatment week	5.35	5.28	5.24	5.16	5.17	5.16
Where patients went at discharge						
Community	57.14%	77.78%	75.00%	65.38%	63.64%	82.00%
Skilled nursing facility	14.29%	14.81%	16.67%	7.69%	18.18%	8.00%
Return to hospital	14.29%	7.41%	8.33%	19.23%	3.85%	6.00%
Rehabilitation facility						
Other	14.28%			3.85%	18.18%	4.00%
Unplanned transfers to acute medical facilities: 10.07%						
Patient satisfaction with rehabilitation program	93.90% of our patients reported they would recommend this program to a friend or family.					

TSCI¹ – Traumatic Spinal Cord Injury

NTSCI² – Nontraumatic Spinal Cord Injury

Financial arrangements

We accept any type of reimbursement including Medicaid and Medicare. We work with insurance providers on a case-by-case basis. No individual is denied admission based on the ability to pay. We will help individuals with limited financial coverage to identify additional financial resources. A disclosure of fees may be obtained by contacting our Central Billing Office at 252-847-4472.

Other resources

- Support Team for Active Recreation (STAR): 252-847-4400
- Disability Advocates and Resource Center (DARC): 252-355-6215 toll free 888-541-7227 | DARCNC.org
- Assistive Technology Program: 252-830-8575
- Vocational Rehabilitation: 252-847-4446
- National Spinal Cord Injury Association Hotline: toll free 800-962-9629

ECU Health Rehabilitation Center

Spinal Cord Program

Your physician: Raymund Millan, MD

Your case manager: Brittany Burch, RN, case manager

Your management team: Cindy Clements, MSW, LCSW, program manager
Brittany Coker, BSN, RN, CBIS, nurse manager

Your personal information

Estimated length of stay: _____ days

How long you are in our program depends on your progress.

Services provided: Physician specializing in rehabilitation medicine daily visits

Nursing care: 24 hours a day

Physical therapy: _____ hour(s) per day, five to six days per week

Occupational therapy: _____ hour(s) per day, five to six days per week

Speech therapy: _____ hour(s) per day, five to six days per week

Additional services: Recreation therapy Medical family therapy
 Respiratory therapy Orthotics
 Other: _____

Therapy may begin as early as 6:30 a.m. to address activities of daily living and typically ends by 4:00 p.m.

Please let therapists know if there are particular scheduling requests.

The insurance/financial coverage you have for this rehabilitation stay is as follows:

- Medicare Part A
 - Medicare Part B for physician services
 - Medicare Managed Care
 - Humana Gold
 - United Health Care Advantage
 - Blue Cross Blue Shield Medicare Advantage
 - Medicaid
 - Medicaid Carolina Access
 - Aetna
 - Blue Cross Blue Shield of NC
 - Blue Cross Blue Shield out of state: _____
 - MedCost
 - Tricare Humana
 - Commercial Other: _____
 - Managed Care Other: _____
 - Workers Compensation: _____
 - Other Payer: _____
- No identified third party payer: Your case manager will assist you in applying for Medicaid benefits if eligible.

Payment for continued rehabilitation services is dependent upon meeting the criteria set forth by the payer. If you would like more information concerning your insurance coverage, please contact your rehabilitation case manager.