**WELCOME** to the Patricia Neal Rehabilitation Center (PNRC).

For over 40 years, Patricia Neal Rehabilitation Center has been working to help people like you realize a brighter future. The expertise of our professional team is focused on maximizing your physical rehabilitation and recovery. Rehabilitation is defined differently for every person because the specific needs of each patient are used as a guide to create an individualized plan of care. Whatever your goals may be, the staff at PNRC will provide the needed assistance and opportunities to help you achieve your highest potential.

We have created this guide book to help answer your questions about our facility, your rights as a patient, what to expect during your stay, and the discharge process. We are proud of our national award winning rehabilitation hospital and are honored to be entrusted with caring for you and your loved ones. Our goal is to provide excellent care. If there is anything we can do to make your stay with us more comfortable, please do not hesitate to let any member of our team know.

Sincerely,
The Staff of Patricia Neal Rehabilitation Center
About Your Care

Referral and Admission Procedure
- Referral is made to PNRC by your physician or discharge planner.
- Liaison is assigned to coordinate your referral to PNRC.
- Liaison will contact you and the facility you are currently in for more information including medical history, current therapy progress and your discharge plan from PNRC.
- After all information is received, the liaison will compose a pre-admission screen for a physician who specializes in physical rehabilitation, a physiatrist, to review in order to recommend the next level of care for you. This could be any level of the physical rehabilitation continuum including an inpatient rehabilitation facility (PNRC), skilled nursing facility (area nursing home), home with home health care or home with outpatient therapy.
- If the physiatrist recommends PNRC, our admissions coordinator will proceed with verifying your insurance coverage and obtaining a pre-certification for admission if needed.
- Once insurance information is completed, your liaison will coordinate with your discharge planner for transfer to PNRC.
- If transport by ambulance, your discharge planner at your current facility will make those arrangements and provide needed documents.
- If your transport will be by private car, your liaison will provide mapping information as well as the admission procedure for once you arrive. Please note: you must have a sealed envelope containing your medical information and physician orders from your previous facility. This should remain sealed and marked confidential. A nurse will ask you for that information upon arrival.
- If another level of care other than PNRC is recommended, your liaison will provide that information and your discharge planner will assist you with needed referrals.

What to Bring
- Personal Items
  Please bring your toothbrush, toothpaste, shampoo, battery operated shaver (if desired), deodorant, comb, brush, make-up (if desired) and equipment such as walkers, prosthetics, CPAP machines, dentures, etc.
  Please label equipment.
- Clothing
  Please pack sweat suits, shirts, shorts, socks, underwear, comfortable rubber soled shoes with support and sweaters/jackets according to season. Loose-fitting clothes are best. Pants made of knit or cotton fabric are preferred over nylon or other slick fabrics. These types of fabrics can contribute to sliding out of the wheelchair. Labeling clothes with your name is helpful. Machine washable clothing is recommended. Laundry services are NOT available at PNRC or Fort Sanders Regional; however, laundry facilities are nearby.
- Money
  A small amount of money may come in handy to buy snacks and miscellaneous items during your stay. Your nurse will be able to assist you with securing your valuables.

What NOT to bring
Alcohol, illegal drugs, weapons and firearms are not permitted in any form. For security and comfort, please do not bring jewelry or credit cards.

Visiting Hours/Rules
Visiting hours are flexible and depend on each patient’s schedule. Primary caregivers are encouraged to accompany patients to therapy. Social visitors are welcome in the patient’s rooms from 8:30 a.m. until 8:30 p.m. outside of scheduled therapy times. One family member or support person who is over 18 years of age is allowed to stay overnight in the patient’s room, if requested by the patient.

For the safety of our guests, visitors remaining after visiting hours must obtain a visitor’s pass from the security office. Between the hours of 9:00 p.m. and 5:00 a.m., all visitors should enter the hospital through the emergency department, located on 19th street.

Patients under the age of 18 must have a parent or adult authorized by the parent or legal guardian present at all times, 24 hours a day.

Photography and videotaping of patients and staff is not allowed.

Hospital Charges
PNRC is considered an inpatient acute care hospital. As such, charges on your hospital bill include the cost of your room, meals, supplies and equipment contained within your room, housekeeping services, services of rehabilitation therapy staff, and 24 hour nursing care. Ancillary charges for services that may include laboratory tests, supplies, medications, x-rays, or respiratory therapy will also appear on your hospital bill.

During your stay, other charges that are incurred are professional charges that will be billed separately from your hospital bill. These charges include charges for your physician services. These physicians include your attending physician at PNRC and any consulting physicians (radiologists, cardiologists, pulmonologists, etc.) your attending deems necessary to consult for your care during your stay.

Billing Procedures
We are committed to providing you with a better understanding of our billing process. Our Patient Accounting Department is staffed with personnel to assist you with specific concerns you may have at any point during our billing cycle.

The process begins when our Medical Records Department assigns the appropriate medical codes for billing your visit. Your bill is based on the medical record documentation. When the bill is processed, a summary statement is prepared and mailed to your home. This statement summarizes charges for the services that you received and advises you of the applicable insurance claims that we will file on your behalf. If you are covered by more than one insurance company, a claim will be processed with all companies. Each applicable insurance company, based upon information provided at the time of your visit, will be listed on the top right side of your summary statement. If you have additional insurance not previously provided at the time of your visit, or if we do not have the correct insurance companies listed, please contact Covenant Health’s Knoxville Business Office immediately at 865-374-3000.

Approximately 60 days after you are discharged, you should receive a Detail Statement of your account. The purpose of this statement is to advise you of the status of your claim. When an insurance payment is received, your corresponding out-of-pocket expense, such as any outstanding coinsurance or deductible, will be indicated on the statement as the patient’s responsibility. Upon receiving final payment from your insurance company, another statement will be produced indicating that all insurance benefits have been paid and will provide notification if the account is paid in full.
*NOTE: Even though the hospital files an insurance claim on your behalf, your assistance in resolving unpaid insurance claims is most appreciated. If your insurance company is not responding, please take the time to call and inquire about the status of your claim. If your insurance coverage changes or you become eligible for Medicare during your stay at PNRC, please notify your case manager. This will allow procedures to be taken to expedite your claim processing.

Once the insurance benefits have been paid, full payment for the balance remaining is expected within 30 days. The remaining balance is your responsibility. If you are unable to pay the remaining balance in full, please contact Covenant Health’s Knoxville Business Office at 865-374-3000 immediately to establish payment arrangements. We offer a variety of payment options, including American Express, Discover, MasterCard and Visa as well as cash and checks. If payment is not received within 30 days or payment arrangements have not been made, you will receive a final notice letter explaining that the account will be referred to collection.

There is a reason PNRC has received numerous national awards for patient satisfaction. Our entire staff strive for excellence. If you have a desire to show your appreciation for a staff member or employee group who has helped create a positive experience for you, we have several options available to ensure the employee receives the recognition he/she deserves.

**Employee Appreciation**

**Letter to Administration**
A simple way to show your appreciation is by writing a letter to Administration. You can mail your letter of appreciation to – Patricia Neal Rehabilitation Center, Attn: Administration, 1901 Clinch Ave., Knoxville, TN 37916.

**Fort Sanders Foundation**
The Fort Sanders Foundation solicits charitable contributions to support the programs and services of Patricia Neal Rehabilitation Center and Covenant Health. Honorary and memorial gifts are a particularly beneficial way to pay tribute to a staff member, friend or loved one while furthering the caring mission of PNRC. If you would like to know more about how your charitable gifts make a difference please call 865-531-5210.

**Chaplain’s Fund**
You may choose to make a donation to our Chaplain’s Fund in honor of the employee(s) who provided you with extra special care. The Chaplain’s Fund provides services and assistance to employees and patients who are in need throughout the year. For more information, contact Pastoral Services at 865-331-1234.

**Patient Meal Service**
Good nutrition is essential to your recovery and well-being. Your Nutrition Associate will contact you each day and discuss nutritional needs and menu choices for each meal. Meals are delivered to patient floors according to the following schedules:

- **Breakfast:** 7:30 a.m. - 8:30 a.m.
- **Lunch:** 12:00 p.m. - 1:00 p.m.
- **Dinner:** 4:30 p.m. - 5:30 p.m.

We encourage all patients to eat in the dining room located on the nursing unit. Should you have any questions regarding your prescribed diet, a dietitian or nutrition associate can be reached by notifying your nurse or by calling 865-331-1169 or 865-331-1170 from your room.

**Guest Meal Service**
Guest trays that will be delivered to the room during patient meal service may be purchased from the cafeteria cashiers by your family member or guest.

**Cafeteria Meal Service (All Spice Café)**
The All Spice Café is located on the basement level of the hospital. The easiest route from PNRC would be utilizing the green elevators.

- **Hours of operation:**
  - **Monday - Friday:**
    - **Breakfast:** 6:30 a.m. - 10:00 a.m.
    - **Lunch / Dinner:** 11:00 a.m. - 7:30 p.m.
    - **Midnight:** 12:00 a.m. - 2:00 a.m.
  - **Saturday & Sunday:**
    - **Breakfast:** 6:30 a.m. - 10:00 a.m.
    - **Lunch / Dinner:** 11:00 a.m. - 7:30 p.m.
    - **Midnight:** 12:00 a.m. - 2:00 a.m.

PNRC does not provide living accommodations for family or caregivers, however several hotels are located nearby. A list can be provided for you. If you are in need of assistance with lodging, listed below are two community funded charities that provide temporary lodging for caregivers.

**Fellowship Center**
The Fellowship Center is a lodging and care center located near the hospital. It is a complex of one bedroom apartments for those participating in our outpatient service and for caregivers who live more than 30 miles away. Call (865) - 331-1725 for more information.

**Ronald McDonald House**
The Ronald McDonald House is for caregivers of patients under the age of 18. It has limited space available. Call (865) 637-7475 for more information.

**Housing/Lodging**

**NOTE:** The Cafeteria is open for drinks and limited selections from 7:30 p.m. - 12:00 a.m.
Java Spice Coffee Shop
Java Spice coffee shop is open on the lobby level Monday - Friday from 6:00 a.m. - 4:00 p.m. The easiest route from PNRC would be utilizing the blue elevators.

Vending machines are located throughout the hospital.

Gift Shop
The Gift Shop is located on the lobby level of the hospital and offers a wide selection of personal hygiene items, newspapers, magazines, greeting cards, postage stamps, flowers, and candy. We also have home and fashion accessories, as well as a variety of collectible gift items. All profits from the Gift Shop benefit our patients through the purchase of medical equipment for the hospital. The easiest route from PNRC would be utilizing the blue elevators.

Hours of operation:
Monday - Friday . . . . . . . . 8:00 a.m. - 7:00 p.m.
Saturday . . . . . . . . . . . . . . 9:00 a.m. - 4:00 p.m.

Mail and Flowers Delivery
Mail and flowers are delivered to patient rooms by hospital volunteers each weekday. The address is {Patient’s Name and Room Number} c/o Patricia Neal Rehabilitation Center, 1901 Clinch Avenue, Knoxville, TN 37916. Any mail arriving after a patient is discharged will be returned to sender.

Parking
Visitor parking is available in several hospital parking garages. There is a flat fee for garage parking of $2.00. Commercial parking lots are also located in the vicinity of the hospital; however, we encourage you to pay close attention to parking rates and guidelines. To assist caregivers with the cost of parking, monthly permits are available for purchase, please ask your nurse for more information.

For the safety of our visitors, an escort to your car is available by calling Security at 865-331-1309.

Telephones
- Local Calls
  Dial “9” followed by the seven-digit phone number.
- Operator Assisted Long Distance Calls
  Dial “9+0+0”
  This service connects the caller with Century Link and provides options to use a calling card, place a collect call or bill a call to another number. Operator rates will apply. Calls cannot be charged to room extensions nor can you accept collect calls in your room.
**Reach the Hospital Operator**
Dial “O” for operator assistance.

**Dial Patient Rooms**
To call patient rooms from outside the hospital, dial 865-331-3___, (the room number).
If at any time you do not wish to be disturbed by incoming phone calls, your phone can be placed in a “Do-Not-Disturb” mode. Dial 884 and follow the instructions. You will hear a confirmation that the Do-Not-Disturb Service is activated. To deactivate the service, dial 884 and follow the instructions.

**Calls cannot be made to patient rooms between 10:00p.m. - 6:00a.m.**

**Smoke and Tobacco Free Environment**
Patricia Neal Rehabilitation Center is a tobacco free environment. As a healthcare provider, it is our responsibility to provide a safe, smoke and tobacco-free environment for patients, visitors, employees and the medical staff. This policy also extends to electronic cigarettes.

**Volunteers**
Whether greeting visitors, escorting patients, comforting a family in time of need or helping in the gift shop, our volunteers are known for their devotion to others. For more information on this award-winning group of volunteers, please dial 865-331-1249.

PNRC offers peer support programs for stroke, spinal cord injury and amputees. If you are interested in being a peer volunteer with any of the programs, please let your therapists know.

**Fort Sanders Wi-Fi / Internet Access**
Fort Sanders Regional offers free high-speed wireless internet access for patients and visitors.

SSID: fsrguest

Web streaming is not accessible through this network. A filter prevents access to some internet sites and attachments.

**Disclaimers:**
1. Patricia Neal is not responsible for any computer viruses obtained through the network.
2. Patricia Neal does not provide technical support associated with the network.

---

**Patient Rights**

**Advance Directives**
Advance Directives or Living Wills are documents which state your choices about medical treatment or name someone to make decisions about your medical treatment if you are unable to make decisions or choices yourself. You should discuss with your family and doctors what you want to do in such cases and be sure to bring a copy of your Advance Directives upon each admission to the hospital.

- **Advance Care Plan** is a document that tells your doctor how you want to be treated if you are terminally ill, permanently-unconscious or in an end-stage condition. You can use this document to tell your doctor you want to avoid life-prolonging interventions such as cardiopulmonary resuscitation (CPR), kidney dialysis or breathing machines. You may use this document to tell your doctor you want to be pain free and comfortable at the end of life.

- **Appointment of Health Care Agent Form** is another type of advance directive that allows you to appoint another person to make medical decisions for you if you should become temporarily or permanently unable to make those decisions for yourself.

Patricia Neal Rehabilitation Center is obligated to provide you information regarding your rights to make decisions concerning your healthcare, including the right to accept or refuse medical or surgical treatment, even if that treatment may be life sustaining. The hospital will provide the necessary forms and a notary if you wish to prepare an Advance Directive.

Advance Directives should either be witnessed by two competent adults or notarized. If witnessed, neither witness should be the person appointed as the healthcare agent, and one of the witnesses should be someone not related to you or entitled to any part of your estate. You may contact your Case Manager to receive a copy of this form.

**Grievance Process**
If you have a complaint or concern about your care, the first step is to discuss it with your physician, nurse or the PNRC patient representative. Most complaints can be resolved by your satisfaction by discussing them with the appropriate hospital personnel. However, if the concern cannot be resolved to your satisfaction, you have the right to file a grievance and have it reviewed by the hospital Grievance Committee.

To initiate the grievance process, request to speak with the Fort Sanders Regional patient representative or call 865-331-1611. You may file your grievance verbally or in writing. The patient representative will have a form you can use if you want to write out your complaint. The Grievance Committee will meet, review your concern, and provide you with a written response.

You also have a right to submit a grievance with the State or with Joint Commission. To contact the Tennessee Department of Health, please call 1-877-287-0010. To contact Joint Commission’s Office of Quality Monitoring, call 1-800-994-6610.
**Ethics**

As part of our mission to provide the highest quality of personalized patient care, Patricia Neal has established an Ethics Committee through Fort Sanders Regional Medical Center. Composed of representatives from our medical and nursing staff, as well as representatives from the local clergy and hospice, social services and the community, the Ethics Committee explores and addresses ethical issues that may arise.

- As a patient, spouse or significant other of a patient, it is your right to bring an ethical concern to the attention of the Ethics Committee. This may be done by contacting the hospital Operator and asking to speak to the Administrative Supervisor. Examples of ethical issues in a healthcare setting might include decisions involving the withholding of life support mechanisms or the perception that a physician or other caregiver did not provide appropriate care or did not use appropriate conduct.

**Patient Privacy**

Upon admission, patients will be asked by the registration staff to select a four-digit Patient Identification Number (PIN). The PIN should be given by the patient to all family and friends to whom they desire their medical information be disclosed. Patients can also choose to be considered a “no information” patient, which means no confirmation of presence or status will be shared with callers or visitors.

**Patient’s Rights and Responsibilities**

(Rights that can be exercised by the patient, or patient’s designated representative, as appropriate)

Patricia Neal Rehabilitation Center wants you to have the best possible care. We want you to know what your rights are as a patient, as well as what your obligations are to yourself, your physician and the hospital. We encourage you or those who represent you to talk openly to those involved in your care.

**Non-Discrimination**

Individuals shall be accorded impartial access to treatment, accommodations that are available or medically indicated, regardless of race, creed, gender, national origin, disability, age, sexual orientation, gender identity/expression, or sources of payment for care.

**As a patient, you have a right to:**

- Quality care provided by competent personnel in a considerate, respectful and safe environment
- Make informed decisions about your care, including requesting consultation or second opinion from another physician, or requesting transfer to another facility. This includes receiving information, explanations, consequences and options needed to make an informed decision.
- Designate a personal representative of your choice.
- Receive information on Advance Directives upon request.
- Request and receive a complete explanation of your charges and your bill.
- Know the name and professional status of the persons responsible for your care.
- Hear from your primary physician, in a language that you understand, your health status including diagnosis and prognosis, the treatment prescribed, and any follow-up care instructions.
- Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.

**Question and expect an answer to any concerns related to therapies or services provided.**

- Have ethical concerns about your treatment of care appropriately addressed. For specific concerns or further information, call PNRC Patient Representative at 865-331-2636 or page the Administrative Supervisor through the Operator “0”.
- Receive visitors whom you designate, including, but not limited to, spouse, domestic partner including same sex domestic partner, another family member, or friend. You or your designated representative have the right to withdraw or deny visitors at any time. (All visitors designated by you or your representative, where appropriate, enjoy visitation privileges that are no more restrictive than those that immediate family members would enjoy.)
- File a grievance with the hospital and to have your grievance reviewed and resolved by the Grievance Committee in a timely manner (usually within 7 days). For additional information or to file a grievance contact the Fort Sanders Regional Patient Representative at 865-331-1611.
- File a grievance with the Tennessee Department of Health regardless of whether you have used the hospital’s grievance process before. The department may be contacted by calling 1-877-287-0010 or by writing to: Tennessee Department of Health, Division of Health Licensure and Regulation, Office of Healthcare Facilities, 665 Mainstream Drive, Second Floor, Nashville, TN 37243.
- Religious and cultural practices as long as they do not interfere with diagnostic procedures or treatment.
- Expect communications with staff and records pertaining to your care, including the source of payment for treatment, be kept confidential.
- Actively participate in decision making and in developing and implementing your treatment, plan of care and discharge plan.
- Appropriate assessment and management of pain.
- Access your medical records.
- Be free from discrimination, abuse or harassment.
- Be informed of circumstances in which your Advance Directive will not be followed.
- Name a designated family member or someone you trust to act as your surrogate decision maker.
- Be free from seclusion and restraints, unless medically necessary.
- Access an interpreter when you do not speak or understand the predominant language of the community. This is particularly true where language, hearing and vision barriers are a continuing problem.
- Not to be transferred to another facility unless you have received a complete explanation of the need for the transfer and of the alternatives to such a transfer and unless the transfer is acceptable to the other facility.
- Request discharge planning evaluation.
- Prior to discharge to be informed by practitioner (or delegate) of any continuing health requirements.
- Expect upon discharge, there will be a smooth “hand-off” transition to post-hospital care.
- Express a complaint or concern about your care with your physician, nursing manager, or supervisor. Any staff member can help you start this process. Most complaints have obvious causes that can be resolved to your satisfaction by discussing this with appropriate hospital personnel or your physician.
- If you are an inpatient Medicare beneficiary, to receive a notice of discharge and non-coverage rights and to file complaints related to quality of care, coverage, or premature discharge with the appropriate Utilization and Quality Improvement Organization. The hospital will assist you with referring such complaints.
- If you are a Medicare/Medicaid beneficiary to file a grievance with the Centers for Medicare/Medicaid Services at 1-800-633-4227 or www.medicare.gov.
- Patricia Neal Rehabilitation Center is a Joint Commission accredited facility. Anyone who has concerns about the safety or quality of care at an accredited organization may share those concerns with The Joint Commission Office of Quality Monitoring by phone 1-800-994-6610 or by sending an email to complaint@jointcommission.org. Long-term care is not accredited by the Joint Commission.
While the hospital recognizes that you have rights which should be protected and appropriately cared for, it also recognizes that you, your family/representatives and visitors have certain responsibilities to assist the hospital to appropriately care for you during your hospital stay.

As a patient you are responsible to/for:

- Share complete and accurate medical history and information.
- Actively participate in your care and follow instructions and medical orders.
- Advise your nurse, physician, and/or patient representative of any dissatisfaction you may have regarding care.
- Express any concerns about your ability to follow the proposed plan of care or course of treatment.
- Your actions if you refuse treatment or do not follow the practitioner’s instructions.
- Personal valuables/possessions that you maintain during your stay that have not been deposited with facility for safekeeping and for which receipt has been issued.
- Cooperate in your care and ask questions if you do not understand your care, treatment or service or what you are expected to do.
- Respect the needs, rights, and property of other patients, family members, and caregivers.
- Report unexpected changes in your condition or perceived risks in your care to the responsible practitioner.
- Meet your financial obligations associated with your care.
- Cooperating with the hospital visiting rules and regulations which are to protect the rights of individual patients and others in such areas as privacy, confidentiality, and peace of mind.

Room Assignment
Your room assignment has been determined by the type of care you require, your doctor’s orders and the availability of rooms. At times during your stay, it may become necessary for you to transfer to another floor or room in order to receive the specialized care and attention you need.

Call Light
If you need help for any reason, push the nurse-call button and our nursing staff will make every effort to respond as quickly as possible.

Communications Assistance
The following services are available on request:
- Closed caption devices for television
- TDD (telephone telecommunication devices for the deaf)
- Amplified handsets for telephones
- Interpretive services for deaf and hearing impaired patients
- Interpretive services for non-English speaking patients

Housekeeping
The hospital and all patient rooms are cleaned and disinfected daily. If you have any concerns with the condition of your room, please let your nursing staff know, or call 865-331-1321 to speak to an environmental services representative.

Healthcare Team
Physician
Your rehabilitation physician is a physiatrist, a medical doctor trained as a specialist in physical medicine and rehabilitation. One of the PNRC physiatrists will be the team leader for your care. He or she will direct your interdisciplinary treatment and be in daily contact with your nurses and therapists to review your progress. Your physiatrist will monitor your medication and your general medical condition. He or she will evaluate spasticity, the need for casting, bracing, motor point blocks, and other diagnostic testing or procedures.

Rehabilitation Nurses
Nursing care is provided on a 24-hour basis by experienced staff with specialized training in rehabilitation. Many PNRC registered nurses have completed their CRRN (Certified Rehabilitation Registered Nurse) advanced certification for specialized care of people who have experienced spinal cord and brain injuries, strokes, neurological and orthopedic impairments. Your nurses coordinate your care while ensuring that the goals of the other rehabilitation disciplines are reinforced in all aspects of care. Rehabilitation nurses work individually with patients on self-medication, bowel and bladder training, as well as group patient and family orientation and education.
Physical Therapist
Physical Therapists focus on overcoming the bodily effects of disease, injury, developmental abnormality or amputation. They work with you to restore muscle strength, endurance, lost function, joint range of motion, pain-free body movement and motor skills. They also work with balance retraining, mobility training, wheelchair propulsion, obstacle negotiation and care transfer training. They individualize your specific equipment needs through the positioning/seating program and orthotic/prosthetic evaluation.

Occupational Therapist
Occupational therapists provide a variety of therapeutic activities designed to improve or restore functional loss. The therapy programs are tailored individually to help you function at a high level of independence. This therapy training concentrates on practical everyday activities such as grooming, dressing and all daily living and home management skills. These skills are regained through strength and endurance training, cognitive and perceptual training, upper extremity splitting evaluation and adaptive equipment assessment. In coordination with physical therapists, they may evaluate your home and make recommendations for any modifications that will be needed for your return. They may also work with you in the independent living apartment, a specially designed living arrangement for patients to try out their newly learned skills prior to discharge from inpatient rehabilitation.

Speech Language Pathologist
Speech Language Pathologists evaluate and treat a wide range of communication and swallowing problems. These may include difficulties in speaking, hearing, comprehension, written or oral communication, memory, problem solving, orientation or feeding/swallowing. The speech pathologist works with you on sensory stimulation, computer technology, augmentative/alternative communicate devices and voice disorders.

Behavioral Medicine
The Behavioral Medicine therapists provide services to help patients and their families return to former levels of psychological functioning. Many patients benefit from adjustment counseling, stress management and cognitive (thinking) training. The Behavioral Medicine therapists perform neuropsychological and psychological evaluations that can indicate the need for neuromuscular re-education, training in pain management, relaxation, assertiveness, memory, concentration, social skills and problem solving. Pre-injury and post-injury issues are addressed through individual, group, or family counseling.

Case Manager
The facility based case management teams consists of Registered Nurses and Social Workers. They work with the patient/family, physicians, other team members and payers to coordinate treatment options, enhance quality services and assist in the delivery of positive, cost-effective outcomes. They guide you and your family through the rehabilitation course from admission to follow up services.

Therapeutic Recreation Therapist
The recreation therapy specialists work with groups or individuals to promote independence, self-motivation and socialization. They provide leisure education to help you develop skills and attitudes for a healthier lifestyle and improve and maintain functional abilities. They also coordinate activities that include: pet therapy, known as Human Animal Bonding in Tennessee or HABIT; socialization events; patient outings; rooftop therapy activities; worship services; and community re-entry programs. In addition, they conduct the medallion ceremony to recognize patient progress.

Other Medical Support Services
Other healthcare professionals will be involved in various aspects of your care. Some of these services include radiology, laboratory, EKG, respiratory therapy, pharmacy and many others.

Pain Management
Our goal is to ALWAYS keep you as comfortable as possible during your hospital stay. There are some types of pain that we may not be able to completely eliminate, but we want to do everything to help control your pain. Always let your nurse know if you are having pain so we can control it as much as possible.

Participating in Your Care
Nurse bedside shift report – nurses going off duty and nurses coming on duty will meet by your bedside to talk about your care. This gives you a chance to meet the new nurse who will be caring for you, ask questions and share important information with your nurses. Nurse bedside shift report does not replace the conversations you have with your doctor. You can invite a family member or friend to stay during nurse bedside shift report. We will only talk about your health with others when you say it is okay.

Hourly rounding - the nursing staff will check on you, at least hourly, to assure that your pain is well managed and that your comfort needs are met. During these times, the nursing staff may also take your temperature and blood pressure, as well as make other assessments that are important to your care. Please feel free to contact your nurse using your call button if a need arises in the time between your hourly checks.

Patient care board – each room has a patient care board to be used as a communication tool between you, your family and your caregivers. The board will be updated at each shift change and as required. If you have any questions regarding the care board, please do not hesitate to ask your nurse at any time.

Talking to your doctor and nurses – communication is an important part of actively participating in your care. We encourage you to write down any questions or concerns you may have before he or she arrives to check on you and take notes of what the doctor is saying so you can better understand your care. Please do not hesitate to ask your nurse if you have any questions or concerns.

Discharge Care folder – this is a hospital resource for you and your family that will include hospital and patient care information. The care folder also serves as a place for education materials given to you describing how to take care of yourself when you go home. Discharge instructions may include information on your current condition, signs and symptoms to report, medications and its potential side effects, treatment procedures and follow up appointments.

Prevention and Safety
Infection Prevention and Patient Isolation
The most important infection-prevention method is through hand hygiene. All caregivers within the hospital are required to wash their hands with soap or use alcohol sanitizer hand cleanser before and after every patient contact. Those who visit you should also wash their hands when they enter and get ready to leave your room.

Please cover your sneeze or cough with a tissue or your upper arm. Dispose of all used tissues and wash your hands.
While standard precautions, such as hand washing and wearing gloves, are taken with all patients, sometimes additional precautions may be needed for your safety or the safety of others. Antibiotic resistant, infectious microorganisms can travel by air, fluids (coughing, sneezing, blood and other bodily fluids) and by direct physical contact with an infected person.

Taking extra precautions against these microorganisms may require placing you in “isolation,” and necessitate staff and visitors to wear gowns, masks or goggles when in your room. Your door will have a sign placed on it to inform staff and visitors to take these extra steps. When you are in isolation, all visitors will need to check in at the nurse’s station for assistance with understanding the precautions, and putting on and removing protective apparel.

Help Prevent Medication Errors
- Make sure that your allergies or bad reactions to all medications in the past are included in your medical record
- Before a nurse gives a medicine, ask:
  1. What is the medicine?
  2. What is it for?
  3. What are the side effects?
  4. Who prescribed it?
- Do speak up if you think a mistake is being made with your medicine. (for example- wrong patient, wrong medicine, wrong time, wrong dose)

Help Prevent Urinary Tract Infections related to Catheters
A urinary tract infection (UTI) is an infection that can develop when germs enter the body through a plastic tube used to drain urine called a Foley catheter.
- If the patient or your loved one has a catheter, ask the nurse and doctor EVERY DAY if it can be removed
- Make sure the area around the catheter is cleaned well - at least daily
- When the urine collection bag is half full, ask the nurse to empty it
- To keep urine from flowing back into your loved one’s body, make sure the tube is not kinked or tangled; the urine bag should hang below the patient’s stomach area at all times but up off the floor

Help Prevent Falls
Our goal is to keep you safe during and following your stay with us. Falls are a common cause of injury. Medications and other treatments can make you dizzy and disoriented. Your hospital room may be unfamiliar, especially when you wake up at night.

PNRC will conduct a fall risk assessment upon your admission and throughout your stay.
You, along with your caregivers and family, can help prevent accidental falls by following these easy guidelines:
- Do not attempt to get up by yourself without rehabilitation staff present! Family members and visitors should not attempt to assist patients to transfer. Call for staff assistance.
- Before a nurse gives a medicine, ask:
  1. What is the medicine?
  2. What is it for?
  3. What are the side effects?
  4. Who prescribed it?
- Do speak up if you think a mistake is being made with your medicine. (for example- wrong patient, wrong medicine, wrong time, wrong dose)

Help Prevent Painful Pressure Injuries
Pressure injuries are pits or breaks in the skin in areas that don’t get much blood flow, or where sweat collects (folds of skin). Pressure injuries are much easier to prevent than to heal.
- Make sure you change positions every two hours or more often if you can; if you or your loved one needs assistance, ask a nurse for help
- If the you become wet or the bed linens become wet or soiled, get them changed as soon as possible
- Make sure nothing rubs or scratches your skin – ask for barrier cream or moisturizing lotion for fragile skin areas
- Check skin daily, especially the tailbone, heels, hip bones, elbows, on the ears where the oxygen tubing sits, under breasts and between folds of skin – look for breaks in the skin, pinkness, redness or swelling in the skin that doesn’t go away in minutes and areas of skin that are extra warm

Help Prevent Urinary Tract Infections related to Catheters
A urinary tract infection (UTI) is an infection that can develop when germs enter the body through a plastic tube used to drain urine called a Foley catheter.
- If the patient or your loved one has a catheter, ask the nurse and doctor EVERY DAY if it can be removed
- Make sure the area around the catheter is cleaned well - at least daily
- When the urine collection bag is half full, ask the nurse to empty it
- To keep urine from flowing back into your loved ones body, make sure the tube is not kinked or tangled; the urine bag should hang below the patient’s stomach area at all times but up off the floor

Participate In All Decisions About Your or Your Loved One’s Treatment
- If you have questions or concerns ask. And, if you don’t understand, ask again.
- Educate yourself about your diagnosis, the medical tests you are undergoing, and your treatment plan.
- Ask a trusted family member or friend to be your advocate.
- Please talk to your nurse or call the PNRC Patient Representative at 865-331-1611 if you have any concerns about your care.

Rapid Response Request
Patricia Neal Rehabilitation Center has a Rapid Response Team (RRT) available 24 hours a day, 7 days a week to provide rapid assistance when a patient’s condition appears to be worsening. An Intensive Care Unit (ICU) nurse and other healthcare providers will respond to assist the patient’s nurse in obtaining additional extra treatment for your loved one. A healthcare provider, family member, or visitor may alert the Rapid Response Team in the event of an emergency by calling the Operator (“66”) and providing your name, the patient’s name, room number and a brief description of the emergency.
Your Discharge Planning Guide

CMS Discharge Guide
During your stay, your doctor and the staff will work with you to plan for your discharge. You and your caregiver (a family member or friend who may be helping you) are important members of the planning team. You and your caregiver can use this checklist to prepare for your discharge.

Instructions:
Use this checklist early and often during your stay. Talk to your doctor and the staff (discharge planner, social worker or nurse). Check the box next to each item when you and your caregiver have finished the task. Write down important information (like names and phone numbers) on the notes page at the end of this section. You can skip items that don’t apply to you or your stay.

Action Items: What’s Ahead?

- Ask where you’ll get care after you leave (after you’re discharged). Do you have options (like home health care)? Be sure you tell the staff what you prefer.
- If a caregiver will be helping you after discharge, write down their name and phone number.

Your Health
- Ask the staff about your health condition and what you can do to help yourself get better.
- Ask about problems to watch for and what to do about them. Write down a name and phone number of a person to call if you have problems.

Discharge Medications
- Review the list with the staff.
- Tell the staff what drugs, vitamins, or supplements you took before you were admitted. Ask if you should still take these after you leave.
- Write down a name and phone number of a person to call if you have questions.

Recovery & support
- Write down the number of a person you can call if you have questions about equipment.
- Ask if you’re ready to do the activities below. Circle the ones you need help with, and tell the staff:
  - Bathing, dressing, using the bathroom, climbing stairs
  - Cooking, food shopping, house cleaning, paying bills
  - Getting to doctors’ appointments, picking up prescription drugs
- Make sure you have support (like a caregiver) in place that can help you. See “Resources” for more information.
- Ask the staff to show you and your caregiver any other tasks that require special skills (like changing a bandage or giving a shot). Then, show them you can do these tasks. Write down a name and phone number of a person you can call if you need help.
- Ask to speak to a social worker if you’re concerned about how you and your family are coping with your illness. Write down information about support groups and other resources.
- Talk to a social worker or your health plan if you have questions about what your insurance will cover, and how much you’ll have to pay. Ask about possible ways to get help with your costs.

For the Caregiver
- Do you have any questions about the items on this checklist or on the discharge instructions? Write them down, and discuss them with the staff.
- Can you give the patient the help he or she needs? What tasks do you need help with?
  - Do you need any education or training?
  - Talk to the staff about getting the help you need before discharge.
  - Write down a name and phone number of a person you can call if you have questions.
- Get prescriptions and any special diet instructions early, so you won’t have to make extra trips after discharge.

More Information for People with Medicare
If you need help choosing a home health agency or nursing home:
- Talk to the staff.
- Visit Medicare.gov to compare the quality of home health agencies, nursing homes, dialysis facilities, and hospitals in your area.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Resources
The agencies listed here have information on community services, (like home-delivered meals and rides to appointments). You can also get help making long-term care decisions. Ask the staff in your health care setting for more information.

Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs): Help older adults, people with disabilities, and their caregivers. To find the AAA or ADRC in your area, visit the ElderCare Locator at eldercare.gov, or call 1-800-677-1116.

Medicare: Provides information and support to caregivers of people with Medicare. Visit Medicare.gov.

Long-Term Care (LTC) Ombudsman Program: Advocate for and promote the rights of residents in LTC facilities. Visit Ilcombsman.org.

Senior Medicare Patrol (SMP) Programs: Work with seniors to protect themselves from the economic and health-related consequences of Medicare and Medicaid fraud, error, and abuse. To find a local SMP program, visit smppage.org.


State Technology Assistance Project: Has information on medical equipment and other assistive technology. Visit resna.org, or call 1-703-524-6686 to get the contact information in your state.

National Long-Term Care Clearinghouse: Provides information and resources to plan for your long-term care needs. Visit longtermcare.gov.


State Health Insurance Assistance Programs (SHIPs): Offer counseling on health insurance and programs for people with limited income. Also help with claims, billing, and appeals. Visit shipatcenter.org, or call 1-800-MEDICARE (1-800-633-4227) to get your SHIP’s phone number. TTY users should call 1-877-486-2048.

For the Patient
- Get prescriptions and any special diet instructions early, so you won’t have to make extra trips after discharge.
- Ask about the items on this checklist or on the discharge instructions.
- Write them down, and discuss them with the staff.
- Can you give the patient the help he or she needs? What tasks do you need help with?
  - Do you need any education or training?
  - Talk to the staff about getting the help you need before discharge.
  - Write down a name and phone number of a person you can call if you have questions.
- Get prescriptions and any special diet instructions early, so you won’t have to make extra trips after discharge.

For the Caregiver
- Ask where you’ll get care after you leave (after you’re discharged). Do you have options (like home health care)? Be sure you tell the staff what you prefer.
- If a caregiver will be helping you after discharge, write down their name and phone number.

Your Health
- Ask the staff about your health condition and what you can do to help yourself get better.
- Ask about problems to watch for and what to do about them. Write down a name and phone number of a person to call if you have problems.

Discharge Medications
- Review the list with the staff.
- Tell the staff what drugs, vitamins, or supplements you took before you were admitted. Ask if you should still take these after you leave.
- Write down a name and phone number of a person to call if you have questions.

Recovery & support
- Write down the number of a person you can call if you have questions about equipment.
- Ask if you’re ready to do the activities below. Circle the ones you need help with, and tell the staff:
  - Bathing, dressing, using the bathroom, climbing stairs
  - Cooking, food shopping, house cleaning, paying bills
  - Getting to doctors’ appointments, picking up prescription drugs
- Make sure you have support (like a caregiver) in place that can help you. See “Resources” for more information.
- Ask the staff to show you and your caregiver any other tasks that require special skills (like changing a bandage or giving a shot). Then, show them you can do these tasks. Write down a name and phone number of a person you can call if you need help.
- Ask to speak to a social worker if you’re concerned about how you and your family are coping with your illness. Write down information about support groups and other resources.
- Talk to a social worker or your health plan if you have questions about what your insurance will cover, and how much you’ll have to pay. Ask about possible ways to get help with your costs.

For the Patient
- Get prescriptions and any special diet instructions early, so you won’t have to make extra trips after discharge.
- Ask about the items on this checklist or on the discharge instructions.
- Write them down, and discuss them with the staff.
- Can you give the patient the help he or she needs? What tasks do you need help with?
  - Do you need any education or training?
  - Talk to the staff about getting the help you need before discharge.
  - Write down a name and phone number of a person you can call if you have questions.
- Get prescriptions and any special diet instructions early, so you won’t have to make extra trips after discharge.
Discharge/Check-Out Procedure

Your physician determines when you are ready to be discharged. When discharge orders have been given to the nursing staff, the necessary steps for your departure begin. To help ensure a smooth and speedy discharge:

• Ask your doctor or nurse for a list of things you should and should not do during your recuperation.
• Obtain your diet and medication instructions.
• Arrange to have a family member or friend take your flowers and gifts home the day before you are discharged.
• Have a friend or family member come at least one hour before discharge to help you prepare to leave.
• Check all drawers and closets for personal belongings.
• Ask your nurse for any medication brought from home that we have stored for you.
• Ask your nurse to retrieve valuables you may have placed in the hospital safe.
• Ask your nurse about follow-up appointments with your doctor.
• Your nurse or transporter will direct your family member(s) to the exit you will be utilizing.

After Discharge from PNRC

The Case Managers at PNRC will make your return appointments to physicians that need to follow you once you are discharged. Records will be sent to your primary care physician before your next visit. In addition, if the team recommends you need additional therapies such as home care or outpatient, this will be coordinated for you. A case manager from PNRC will attempt to contact you to assist with any issues following your discharge and answer any questions. However, if a question arises before that time, please feel free to contact your case manager or the nursing unit. Finally, if you need a summary of your records, you can go online to https://app.relayhealth.com and complete the requested information to obtain your records.

Patient Satisfaction Survey

Following your discharge from Fort Sanders Regional, you may be contacted by Professional Research Consultants. This firm randomly surveys patients about the quality of the care they received. If you prefer not to be contacted, please inform our Quality Improvement Office by calling 865-531-5449. Our goal is to provide excellent care.