## Admission Justification Document Test111420181406 Last - California Rehab Institute - 11/14/2018 2:13:11 PM

Test111420181406 Last is a 38 year old male diagnosed with Cholera due to Vibrio cholerae 01, biovar cholerae. In an Inpatient Rehabilitation Facility, this patient will be classified under the Rehab Impairment Category of Stroke (Stroke).

Test111420181406 Last requires an acute Inpatient Rehabilitation level of care to address his complex medical condition complicated by comorbidities which resulted in his functional impairments and increased risk for medical instability.

Prior to referral for a rehabilitation admission, patient required assistance for self-care activities as well as household ambulation and community level ambulation.

Patient's past medical history and prior surgeries include: Test

Patient's history of present illness includes: Test

Test111420181406 Last's condition is complicated by the following comorbidities, as documented in the Pre-admission Assessment:

- A-Fib-Acute
- · A-Fib

The patient is sufficiently stable to actively participate in an intensive rehabilitation program and requires close medical supervision provided by a physician possessing specialized training and experience in an Inpatient Rehabilitation Facility. This close medical supervision will be delivered throughout the patient's stay with a minimum of three face-to-face visits per week to assess the patient's medical and functional needs, manage and adjust medications, and modify the plan of care as needed to maximize his rehab prognosis.

The patient requires medical oversight and 24/7 specialized rehabilitation nursing care for patient's safety including the management of the following:

- post-op management
- medication administration/education
- · pain management

As a result of diagnosis and comorbidities the patient presents with the following impairments:

- · lacks initiation
- impaired memory
- · impaired attention
- impaired safety awareness
- · impaired judgment
- · delayed processing
- executive dysfunction

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These impairments impact the patient's ability to safely perform self-care activities and mobility tasks. Patient's current functional status includes:

Eating: independent

Grooming / Hygiene: independent

Upper Extremity Dressing: independent

Lower Extremity Dressing: independent

Bed Mobility: independent

Supine-Sit: independent

Sit-Stand: independent

Transfer: independent

Toilet Transfer: independent

Expression: independent

Memory: independent

Ambulation: independent

The patient requires PT and OT and is reasonably expected to actively participate in and benefit from at least 3 hours of therapy/5 days per week. It is anticipated that he will make measurable improvement of practical value to improve functional abilities and help the patient / family learn compensatory strategies. Intensive therapy will focus on the following:

- skin integrity
- reduce risk for falls
- · safety strategies

The close medical management and interdisciplinary care required for Test111420181406 Last cannot be safely provided at a less intensive setting such as a skilled nursing facility or home care.

- Reduce risk for hospital re-admission
- Improve medical condition through appropriate management and education
- Reduce risk for complications

Patient has fair potential to achieve rehabilitation goals within the expected LOS of 15 - 21 days with anticipated discharge disposition and treatment which includes: Test

His functional and medical needs require close medical management, specialized rehabilitation nursing and intensive therapy to maximize the patient's level of independence.

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