

ACCESS

Kessler

A quarterly publication from Kessler Institute for Rehabilitation

Volume 1, Issue 2 Winter 2004

Key Contacts

Bruce Gans, M.D.

Chief Medical Officer
(973) 324-3657, bgans@kessler-rehab.com

Barbara Garrett

Clinical Manager
(973) 731-3600, ext. 2281
bgarrett@kessler-rehab.com

Jonathan Fellus, M.D.

Director, Brain Injury Program
(973) 414-4776, jfellus@kessler-rehab.com

Robin Hedeman

AVP, Rehabilitation & Program Planning
(201) 368-6020
rhedeman@kessler-rehab.com

Cynthia Macaluso

Coordinator, Amputee Support Group
(201) 368-6260, cmacaluso@kessler-rehab.com

Patty Morris

Director of Admissions
(201) 368-6003, pmorris@kessler-rehab.com

Robbi Nahum

Director, Case Management
(973) 243-6885, rnahum@kessler-rehab.com

Shailesh Parikh, M.D.

Amputee Program Director
(201) 368-6043, sparikh@kessler-rehab.com

Joe Reda

Asst. Director, Orthotic & Prosthetic Services
(201) 368-6029, jreda@kessler-rehab.com

A Few Minutes With:

Shailesh Parikh, M.D., Director, Amputee Program

Kessler Institute for Rehabilitation has the largest Amputee Program in northern New Jersey. Dr. Shailesh Parikh recently shared his thoughts with Access Kessler:

AK: What message do you offer amputee patients?

SP: For the more than 150,000 people who undergo an amputation each year due to birth defects, disease or traumatic injury, the loss of a limb can have a devastating impact physically, psychologically, socially and emotionally. However, amputee patients can lead full lives.

AK: What is unique about Kessler's Amputee program?

SP: Our comprehensive, interdisciplinary approach to medical rehabilitation allows us to provide an unparalleled continuum of individually tailored care. We also offer onsite design, fitting and manufacture of prostheses.

AK: Who comprises the treatment team?

SP: Psychiatrists, nurses, physical and occupational therapists, driving instructors, prosthetists, vocational counselors, psychologists and case managers. Other clinical specialists may also be involved.

AK: What are the program goals?

SP: To increase strength, coordination and endurance, and ultimately restore a patient's functional independence.

AK: What type of support services do you offer?

SP: Adaptive Driving, Amputee Clinics to address wound care and limb management, and Support Groups. Our extensive Outpatient Rehabilitation Program

also helps patients successfully transition back to home, work and family.

AK: How is new technology impacting amputee care?

SP: Exciting advancements include micro-processor-controlled knee joints; materials that decrease prosthetic weight while enhancing strength; upgrades in torsion and shock adsorption for feet and ankles; and Computer Aided Design (CAD) to improve socket fit and performance.

AK: What about outcomes?

SP: On average, our amputee patients have greater functional improvement during their stay and a higher level of functional independence upon discharge than patients of other rehabilitation hospitals according to national benchmarks.

AK: How are you meeting the needs of case managers, discharge planners, insurance providers and social workers?

SP: Our expert nurse liaisons are at their service and work closely with Kessler Admissions to help patients receive care quickly and efficiently. We participate in Medicare, Medicaid and most managed care and other major insurance plans.



Amputee Program Director Shailesh Parikh, M.D., (left) and Assistant Director of Orthotic and Prosthetic Services Joe Reda (right) work with Ken Schautz of Bloomfield, NJ.

In This Issue

Patient Spotlight	2
At the Forefront	3
Of Special Interest	4

Editor-in-Chief

Gail Mallor Solomon
Director, Corporate Communications
gsolomon@kessler-rehab.com

Managing Editor

David Plaskow
Coordinator, Marketing & Communications
dplaskow@kessler-rehab.com

Assistant Editor

Samantha J. Walski
Marketing Assistant
swalski@kessler-rehab.com

Contact Us

Kessler Institute for Rehabilitation
Toll-Free: (888) KESSLER (537-7537)
Website: www.kessler-rehab.com

West Orange (973) 731-3900

1199 Pleasant Valley Way
West Orange, NJ 07052

East Orange (973) 414-4700

240 Central Avenue
East Orange, NJ 07018

Saddle Brook (201) 587-8500

300 Market Street
Saddle Brook, NJ 07663

Chester (973) 584-7500

201 Pleasant Hill Road
Chester, NJ 07930

Mission Statement

Kessler Institute for Rehabilitation, Inc., provides comprehensive physical medicine and rehabilitation programs and services to optimize the health, function and quality of life for those we serve. We enhance the delivery of care and advance the field of rehabilitation through education, research and advocacy. We do so in a clinically effective and fiscally responsible manner.

Program & Services Overview

Kessler offers comprehensive physical rehabilitation programs designed to meet the individual needs of patients, including:

- Stroke/Neurorehabilitation
- Brain Injury Rehabilitation
- Spinal Cord Injury Rehabilitation
- Amputee Rehabilitation
- Orthopedic Rehabilitation
- General Rehabilitation

Access Kessler is published quarterly by Kessler Institute for Rehabilitation.

Legal Notice

Contents of this newsletter may not be reproduced without the express written consent of Kessler Institute for Rehabilitation.

©2004 Kessler Institute for Rehabilitation.

Harnessing the Power of New Therapies At The Forefront

Most people take walking for granted—until that ability is lost. For these individuals, many of whom have experienced a stroke or spinal cord injury, the capacity to walk again may seem remote. However, new research in physical rehabilitation shows great promise in improving the mobility of patients recovering from such injuries.

One advanced approach being used at Kessler Institute for Rehabilitation is Body Weight Supported Treadmill Training (BWST). BWST is based on the theory that the spinal cord can be strengthened to promote earlier mobility. “The primary purpose of this training is to provide sensory cues to retrain the nervous system to promote locomotion,” states Barbara Garrett, Physical Therapist, Clinical Manager.



Therapists assist a patient during Body Weight Supported Treadmill Training.

BWST uses an overhead harness system designed to support weight bearing while the patient maneuvers on a treadmill. Therapists provide manual assistance to the patient’s lower body to facilitate a walking pattern. As the patient progresses, weight bearing is increased and manual assistance is gradually decreased.

“When I started my therapy, I had limited strength and balance. Now, after three weeks of BWST, the improvement is pretty amazing! I can have full weight bearing on my legs and walk independently with a walker,” exclaims Tom McKenna, a spinal cord injury patient at Kessler’s West Orange facility.

“An exciting new treatment option, BWST provides certain patients with an opportunity to get on their feet sooner,” adds Garrett.

A Bride Gets Her “C-Leg®” Patient Spotlight

Walking down the aisle is a dream of every bride. For Stacy Waskiewicz, that dream became a reality thanks to a lot of personal determination along with state-of-the-art technology and compassionate care delivered by the staff at Kessler Institute for Rehabilitation.

Waskiewicz, after being diagnosed with cancer, underwent an above-knee amputation in 1996. During her rehabilitation at Kessler, the Bergenfield, NJ, resident was fitted for a prosthetic leg and essentially learned how to walk again. Waskiewicz periodically returned to Kessler for routine adjustments to her prosthesis. During one visit, Joe Reda, Assistant Director of Orthotic and Prosthetic Services at Kessler, suggested Stacy try the new C-Leg®. This advanced prosthetic contains a

microcomputer allowing the knee to compensate when a patient walks on uneven surfaces such as stairs, sand or hills. “We felt Stacy—a young, active

woman—would benefit greatly from this device,” remarks Reda. “It enables her to vary walking speeds and offers a more secure and natural gait.”

Waskiewicz is thrilled, “Physically, I feel more confident, and the socket looks better than other prostheses I had in the past. I owe a big ‘thank you’ to Kessler’s staff for making me feel hopeful and helping me to progress as far as possible.”

Smiles the newlywed, “It just wouldn’t have been the same wedding if I didn’t have this amazing prosthesis. I was able to comfortably stay on my feet from morning until night and really enjoy my big day.”



Stacy Waskiewicz on her wedding day.

Jonathan Fellus, M.D. – “Brain Injury Treatment is Not One Size Fits All”

Physician Profile

For the man who directs Kessler’s Brain Injury Program, treatment is an art as much as a science. “Neuroscience offers the opportunity to be creative because everyone’s brain is unique and therefore needs to be treated differently,” notes Jonathan Fellus, M.D.

Dr. Fellus, a board certified neurologist, has been the Director of Kessler’s Brain Injury Program for the past five years. Outlining his vision for Kessler’s Brain Injury program, Dr. Fellus states, “We strive to utilize leading-edge treatments, integrate the latest research, and unlock the mysteries of the injured brain so as to expand the scope of treatment and continuum of care.”



Dr. Fellus tests a brain injury patient’s mobility and muscle function.

Current brain injury research at Kessler includes treating spasticity, post injury-fatigue and cognitive deficits. Dr. Fellus feels Kessler’s depth of experience in this field and commitment of its health care team are what distinguish our program from others in the region and across the country.

But what sets the program apart for Dr. Fellus personally is the often unremarkable progress of his patients. Treating a young woman after a severe brain injury and seeing her graduate college within five years is just one rewarding example Dr. Fellus cites. “Guiding her, acting as a resource and helping her meet the physical chal-

lenges she faced during her college career truly inspired me.”

An assistant professor of Neurosciences at the University of Medicine and Dentistry of NJ, Dr. Fellus has written several book chapters. For those seeking brain injury treatment he advises, “Keep searching until you find a doctor who can discuss brain injury and its associated problems in a way that is understandable to you, approach your individual problems creatively and follow your care for years rather than months.”

Let’s Hear From You...

Do you have any questions, story ideas or comments? Would you prefer to receive *Access Kessler* via e-mail? Contact Samantha Walski, Assistant Editor, at swalski@kessler-rehab.com.

The 75% Rule Factor...Keep Referring

CMO Corner

Confusion and controversy continue to surround the Medicare regulation known as the “75% Rule.” As you may know, this July 2004 rule essentially specifies that most patients admitted to inpatient rehabilitation facilities must fall within one of 13 specific conditions. These conditions include brain injury, spinal cord injury, stroke, amputation, major multiple trauma, neurological conditions, hip fractures, burns, congenital deformities, inflammatory arthritides, vasculidities, osteoarthritis and a limited subset of joint replacement patients (such as morbidly obese patients with a BMI of 50+).

What this rule fails to address is the scope of rehabilitation today. Kessler,

like most rehabilitation facilities, treats increasing numbers of individuals with functional limitations resulting from cancer, pulmonary conditions, heart disease and pain. This new rule would constrain our ability to admit such patients.

Kessler has assumed a leading role—together with our colleagues—to argue against implementation of this misdirected, clinically damaging rule. I have met with members of the CMS, House and Senate, Secretary Thompson’s office, GAO, and even White House staff in an effort to remediate this problem.

Our primary concern is that this rule will adversely impact patients, limiting access to care and threatening our ability to provide the intense, multi-disciplinary programs they require. It would constrain admissions based upon a quota of types of patients served—regardless of their medical needs.

Kessler has not changed its practices or admitting criteria in any way. We are still dedicated to caring for every patient who needs hospital-level medical rehabilitation. Do what’s best for your pa-

tients by continuing to refer them to Kessler when you believe inpatient rehabilitation is appropriate. Our nurses and physicians apply the same assessment guidelines today as in the past to help you deliver high quality care to your clients.

We believe this adverse rule will be modified to enable rehabilitation hospitals to best address all patients’ medical rehabilitation needs. We look forward to working with you as we advocate for these individuals.

Dr. Gans’ photo

Bruce M. Gans, M.D.

Bruce M. Gans, M.D.
Chief Medical Officer
Kessler Institute for Rehabilitation

Fast Fact:

The average rehabilitation hospital in the United States has 64 beds. Kessler has more than five times as many—322.

— American Medical Rehabilitation Providers Association (AMRPA)

Case Management Gets Creative

Of Special Interest

“Kessler feels strongly that patients have a right to rehabilitation,” says Robbi Nahum, Director of Case Management for Kessler’s West Orange facility.

Nahum and her staff of five are specialists at procuring the resources a patient needs to successfully transition to the community upon discharge. That could mean getting patients wheelchairs, home nursing care, social programs such as Meals on Wheels, disability income, housing modifications and more. “This is where the creativity comes in,” explains Nahum. “We investigate all avenues including research on the Internet, letters to a patient’s legislative representative or calls to the head of a labor union.”

“I love helping the families of patients,” adds Nahum. “My office is a safe haven where family members can come to talk, cry, vent and gain some piece of mind.”

Kessler Case Management is constantly exploring new ways to improve service to its clients. At each of Kessler’s

four facilities, the Case Management staff works closely with insurance providers to establish specific rehabilitation goals for each patient. Kessler is studying the use of electronic medical records to provide prompt, accurate and consistent information to our clients. The new Spinal Cord Injury (SCI) Referral Team brings together representatives from Kessler’s Case Management, Admissions and SCI Program daily to discuss patients’ status and quickly resolve any admissions or discharge planning issues. And Kessler’s popular Brown Bag Breakfast seminars are keeping insurance providers, discharge planners, case managers and social workers informed of the latest advances in medical rehabilitation.

Nahum notes that Kessler’s clinical excellence can actually mean a cost sav-

ings to insurance providers, “We receive a significant number of cases where

patients didn’t receive proper medical rehabilitation at another facility and eventually come to Kessler. As a result, insurance companies wind up paying more money to rectify the situation than if the patient had come to Kessler initially.”

Lorraine Pullano’s husband, Nick, a quadriplegic, was one such patient. He came to

Kessler after developing multiple complications at a New York hospital unable to meet his special needs. “I can’t say enough about Robbi and her staff. They went way beyond the call of duty to help get Nick the care, equipment and counseling he desperately needed, says Pullano.



Kessler’s Case Management staff, like Robbi Nahum, tailor services to meet patient and family needs.

Kessler

INSTITUTE FOR REHABILITATION

a Select Medical company

1199 Pleasant Valley Way
West Orange, NJ 07052
www.Kessler-Rehab.com

Mark Your Calendars!

Brown Bag Breakfast

January 2005 (date and time TBA)
Kessler Institute for Rehabilitation
1199 Pleasant Valley Way, West Orange, NJ
Kessler Conference Center
Speaker and Topic (TBA)
No cost
Two Contact Hours pending approval by the
Commission for Case Manager Certification
Contact Samantha Walski (973) 414-4808

Mailing Address Line 1
Mailing Address Line 2
Mailing Address Line 3
Mailing Address Line 4
Mailing Address Line 5