

Frazier Rehabilitation Institute



UofL Health - Frazier Rehab Institute
NeuroRehab Program
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NeuroRehab Program Handbook

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Welcome to the Frazier NeuroRehab Program

Dear Friends:

I am pleased to welcome you to UoL Health – Frazier Rehab Institute, though the circumstances that bring you here may not be ideal. Our team is committed to your care, your safety, and your satisfaction. We pledge to provide the highest quality of care in a compassionate manner. I invite your feedback along the way if we can make things better for you!

Many people have never experienced the need for physical or cognitive rehabilitation, and you may not be sure what to expect from your time with us. We hope this handbook helps you understand our program – who we are, what we do, and how we plan to work with you to ensure your goals and needs are met while you're with us.

Sincerely,



Abbey Roach, PhD
Director, Brain Injury Program
UoL Health - Frazier Rehab Institute
P: 502-582-7669
Abbey.Roach@uoflhealth.org

Members of Your Treatment Team

YOUR NAME _____

Primary Therapist _____

Psychologist _____

Speech and Language Pathologist _____

Occupational Therapist _____

Physical Therapist _____

Case Manager _____

Physiatrist or Rehab Physician _____

NeuroRehab Program Supervisor **Misty L. Agne, MA, CCC-SLP • 502-429-8640 x.240**

Medical/Healthcare Providers _____

Please help us by adding to this list:

Introduction

To learn someone you care about has sustained a brain injury is never easy. Most people experience worrisome and confusing thoughts, while uncertainty about the recovery process adds to their level of stress and despair.

At Frazier Rehab, we recognize how difficult it is for survivors and their families to cope with the effects of brain injury. Thus, Frazier has developed a comprehensive brain injury treatment program to meet the unique needs of each person served. It is staffed with highly skilled professionals and has been organized to treat each individual admitted according to their needs. The treatment goal is to restore each person to their fullest potential of independence and productivity. To achieve this goal, the treatment team assists individuals in pursuing all aspects of rehabilitation: physical, social/interpersonal, cognitive, and emotional, while recognizing differences in personal beliefs.

This handbook has been prepared to assist you with beginning or continuing outpatient therapy. The following pages will outline Frazier's NeuroRehab Program and explain how you can assist and participate in the recovery process.

Who We Serve

The NeuroRehab Program regularly serves patients with the neurological problems noted below. This is not an exclusive list. Individuals with other neurological conditions or illnesses may be served, based on the NeuroRehab Program's ability to provide appropriate care and services to those individuals.

- Anoxia/Hypoxia
- Brain Tumor
- Concussion
- Electrical Injuries
- Encephalopathies
- Guillain-Barre Syndrome
- Infections
- Metabolic Disorders
- Mild Traumatic Brain Injury
- Multiple Sclerosis
- Parkinson's Disease
- Post-Concussion Syndrome
- Spinal Cord Injury
- Sports Related Injuries
- Strokes/Aneurysms
- Seizure Disorders
- Traumatic Brain Injury

Program Description

The Referral and Admission Process

Referrals to the program require an order from your physician for each therapy your doctor feels will benefit you. The order should be phoned, faxed, or mailed to the Case Management (CM) office at the NeuroRehab Program (502-429-9927). Case Management will contact you to set an appointment for your evaluation or admission. If the appointment is set for evaluation, the CM will contact you with the results of the evaluation and an admission date, if appropriate.

Team Approach

Throughout your participation in the NeuroRehab Program, a team of professionals will serve you in helping you regain the highest level of day to day functioning in all aspects of life. Each week your treatment team will meet to discuss your progress in the program and to ensure that you are receiving the most effective treatment. During your therapy, the treatment team will help you and your family coordinate your care with other professionals, including physicians, vocational rehabilitation, case managers, and other therapies. Eventually, our goal is to help you become the team leader and assist you in making decisions regarding your therapy. Ultimately, you are responsible for your life!

Role of the Primary Therapist

Upon your admission to the program, you will be assigned a primary therapist (one of our staff members). This therapist will act as your contact within the program. You will be responsible for letting your primary therapist know of any scheduling conflicts or cancellations. Your primary therapist is also a good person to ask any questions or express concerns you may have.

Individual's Rights and Responsibilities

Individuals being served at the NeuroRehab Program have rights and responsibilities to enhance the rehabilitation process and to ensure that everyone is treated with respect and dignity. Individuals and their families are encouraged to become familiar with these rights.

Healthcare Providers Rights and Responsibilities

Healthcare providers have professional rights and responsibilities to provide ethical care and treatment within the realm of their practice. Our staff is regulated by ethical codes enforced and regulated by their individual disciplines, and by state and federal laws. At the Frazier NeuroRehab Program, healthcare professionals are responsible for setting high expectations to provide quality rehabilitation services to all individuals.

Discharge Criteria

There are specific instances when a patient would be discharged from the program. They are as follows:

- If a patient has achieved their discharge goals;
- If a patient has achieved maximum outcome at this point in their recovery;
- If a patient has a significant change in their medical status;
- If a patient has significant psychiatric, behavioral or substance abuse issues that need clinical attention;
- If a patient has a lack of insurance or benefits, and continuation would be an economic hardship for the family;
- If a patient becomes non-compliant with treatment and misses three consecutive appointments without calling and informing the treatment team.

Typical Daily Schedule

8:45-9 a.m. **Individuals arrive at therapy and sign in at the front office.** Visitors can obtain passes at this time. Individuals will then go to the community room where there is a refrigerator for their lunch. Schedules can be found on the tables in the community room. The schedule changes daily and an important part of therapy is copying down the schedule correctly. A staff member will be in the community room to provide assistance.

9 a.m. – 12 p.m. **Each therapy session runs for approximately 40-45 minutes.** There are four morning sessions. You will typically have a short break between sessions to use the restroom or to get a drink.

12 p.m. **Lunch and Wellness Group:** All friends and family members are welcome to join their loved one for lunch, but are not required. There are a variety of options available for lunch.

1. Individuals may bring their lunch from home. The lunch must be labeled and dated. It can be stored in the refrigerator in the community room.
2. Individuals may sign out to go to lunch with a family member or friend.
3. Individuals may choose to purchase their lunch from one of the fast food restaurants or lunch deli's nearby. A staff member will accompany individuals going out to buy lunch.
4. Once an individual is independent in the community and the treatment team has discussed with their family, that individual will be allowed to sign out and go out for lunch without staff supervision.

1 – 3:15 p.m. **There are three afternoon sessions, approximately 40 – 45 minutes each.**

3:15 p.m. **Therapy day ends.** Due to the volume of participants in the NeuroRehab Program, it is not possible for staff to assist in helping individuals to their vehicles. If assistance is needed, arrangements can be made at the front desk. Please arrange to meet your transportation in the waiting area/lobby at 3 p.m. If you need additional assistance, ask the front desk for help.

Note: *The schedule above is an example of a therapeutic day. While most schedules run from 8:45 a.m. – 3:15 p.m., some individuals may attend from 9 a.m. – 12 p.m., or from 11:15 a.m. – 3:15 p.m. Your treatment team will explain your schedule to you thoroughly during your first day. Each treatment day is tailored specifically to meet the needs of each individual.*

Therapy Team

You will receive a variety of therapies to meet your physical, emotional, cognitive, and social/interpersonal needs. The treatment team will utilize several different treatment strategies and techniques in order to promote recovery.

Individual Therapy

Individual therapies allow each team member to address specific goals related to their specialty.

Individual therapies may include:

Psychology: Following brain injuries, individuals may experience depression, financial worries, social changes, and more. We recognize that your feelings of self-worth are important and Psychology can help to address these issues. Psychology examines and identifies observable behavior/changes that are the result of an injury or illness. Treatment may address adjustment to injury, deficit awareness, redevelopment of social interaction skills, close and intimate relationships, education regarding the illness or injury and education regarding activities to avoid. Psychology also works closely with family members.

Occupational Therapy (OT): Often after an injury or illness, everyday life activities are more difficult than before. Occupational Therapists assist individuals in improving the skills needed to complete everyday tasks such as dressing, bathing, driving, shopping and returning to school or work. OT's will focus on increasing strength, balance and coordination necessary for performing Activities of Daily Living (ADL's). They will also address cognition (thinking) and visual perceptual abilities. Your OT may suggest adaptive techniques or equipment that will allow you to be more independent with these daily activities.

Speech/Language Therapy (ST): After a brain injury or illness, many individuals report difficulties with memory, organization, and focus. Our Speech Therapists address the communication and language skills of listening, speaking, reading, writing, and cognition (thinking). These skills include attention, orientation, memory, problem solving, sequencing, and thought organization. Speech Therapists also diagnose and treat swallowing difficulties and voice problems.

Physical Therapy (PT): Mobility and independence are important to all of us. Physical Therapists assist individuals in improving movement, strength, coordination, balance, sensation and flexibility. If individuals are unable to walk independently, PT's may recommend and encourage the use of braces, assistive devices or custom wheelchairs to maximize each person's level of independence. Physical therapy will also address safety issues involved in physical activities.

Case Management (CM): Case management serves to coordinate the care between the individual, family, treatment team, and payer source. The case manager is a health professional that advocates for essential services, analyzes fiscal benefits, advises the individual and family, and monitors the use of resources. The CM guides the individual and family through the admission process into the NeuroRehab Program and assists the individual to ensure that all the services recommended are obtained.

Therapy Groups

All of us work in groups in some way. It may be at your worksite, through a religious organization, or in your neighborhood. Groups are a part of everyday life. An important aspect of the NeuroRehab Program is the involvement in group therapies. Therapeutic groups provide an opportunity to relate to other individuals who are going through similar circumstances. The groups provide encouragement and support. They also allow individuals to practice new strategies and procedures in a structured and safe setting. Some participants in groups at the NeuroRehab Program are doing well, and others are having more difficulty. Groups work together toward common goals.

Some of the groups offered include:

Goals Group Emphasis:

- Recording schedule accurately into planner or notebook
- Increasing independence by following a daily routine
- Identifying weekly goals to get done
- Prioritize daily, weekly, and monthly tasks (i.e. putting the most important things first)
- Learning to use strategies for daily tasks and responsibilities

Fitness Group Emphasis:

- Stretching exercises
- Strengthening
- Neuromuscular re-education (re-teaching muscles how to work)
- Gross motor coordination (large movements)
- Cardiovascular endurance (making your heart stronger)
- Balance
- Development of your exercise routine

Reasoning Group Emphasis:

- Generating and organizing thoughts
- Recognizing relevant information
- Recognizing similarities and differences
- Concrete versus abstract thinking
- Deductive reasoning

Executive Skills Group Emphasis:

- Initiation
- Goal setting
- Self-evaluation
- Self-awareness
- Self-monitoring
- Cognitive flexibility
- Task completion
- Planning

Vision Group Emphasis:

(relates to how your eyes work)

- Visual scanning strategies
- Visual memory techniques
- Visual perception skills
- Vision exercises for teaming, convergence, and tracking

Therapy Groups *CONTINUED*

Life Skills Group Emphasis:

- Home management skills (running your house)
- Financial management skills (money/paying your bills)
- Meal planning/preparation
- Safety
- Energy conservation/work simplification (using energy wisely and doing more with less)
- Real life problem solving
- Community reintegration (getting back to your activities in the community)

Lunch Group Emphasis:

- Socialization with others
- Meal preparation/set up
- Eating
- Community integration (getting back to activities in the community)
- Group problem solving (making decisions with others)
- Health and nutrition education

Brain Injury Education and Adjustment Emphasis:

- Knowledge of basic brain anatomy and function (how the brain works)
- Emotional adjustment after injury/illness
- Learning to deal with changes
- Deficit awareness (knowing how your injury/illness affects you)
- Support and encouragement
- Re-entry into life roles (getting back to your life)

Cognition Group Emphasis:

- Thought organization
- Reasoning
- Problem solving
- Memory
- Attention

Vocational Skills Group Emphasis:

- Practice interviews
- Job etiquette
- Self-esteem/confidence
- Interpersonal skills (getting along with others)
- Resumé building
- Vocational Rehabilitation Services (getting back to work or school)

Social Skills Group Emphasis:

- Non-verbal behaviors
- Social skills
- Self-monitoring
- Social cues
- Complex social situations

Aphasia Group Emphasis:

- Oral expression
- Auditory comprehension
- Writing skills
- Reading skills
- Functional communication strategies

The NeuroRehab Program will notify you if group therapy sessions are not a covered service by your insurance plan.

The individual's primary therapist will be responsible for scheduling persons into groups as appropriate.

Possible Recommendations

The following are examples of recommendations you may receive. Some, none, or all of these may be right for you. Other recommendations may be given that are not listed here.

Memory Device/Planner

A memory-planning device is frequently recommended for use after a brain injury or stroke. Planners have been shown to be one of the most effective tools in helping people return to school, work, and/or independent living after injury. If you already own a planner, please bring it with you to therapy. If not, your therapists will work with you in choosing a system that will best fit your needs. Planners are intended for long-term use at home, at work and in the community.

Homework and Home Programs

Homework and home programs are often recommended to help you be successful in treatment. These programs will help you in carrying over the strategies and techniques you have learned in therapy. It is extremely important that homework and home programs be carried out to maximize your rehabilitation and overall success in the recovery process.

Family/Friend Teaching Sessions

During your time in the program, with your permission we may ask your family and/or friends to attend some treatment sessions. During these sessions, the therapist will offer information regarding your progress, education about the therapy you are receiving, and suggestions for activities to be carried out at home. These treatment sessions will be designed for you, to focus on your needs and the needs of your family and friends.

Community Outings

It is therapeutic to include everyday activities into therapy sessions. These activities include shopping, dining out, taking public transportation, banking and recreational/leisure activities. Individuals are encouraged to employ the skills they have been

working on in therapy such as social skills, money management skills, map-reading skills, planning and organizational skills, problem solving skills and safety awareness. The specific location of community outings varies with the needs of the participants and may be done individually or with a group.

Home Evaluation

A home evaluation/visit may be suggested by your occupational therapist. The purpose of a home evaluation is to make sure you are safe, can function, and be the best you possibly can be in your home. You may be asked to complete a small cooking task (if appropriate) or demonstrate how you complete other home tasks. Your occupational therapist may provide you with some suggestions, making it easier to get things done in your home. These recommendations may include physical changes to your home or simply other ways to complete home tasks. Following the evaluation, you and your family will be given a written list of recommendations.

Neuropsychological Evaluation

Individuals who have a neurological diagnosis may be referred by their physician to take a neuropsychological evaluation. This evaluation is helpful in finding out what your strengths are and what abilities have changed and continue to need improvement. This evaluation is also helpful in planning your rehab. This is typically an all-day evaluation that is usually administered downtown. Your Treatment team can provide you with further information regarding this evaluation.

Possible Recommendations *CONTINUED*

Driver Evaluation/Training Program

After a neurological injury or illness, individuals often have both physical and cognitive changes that may limit their ability to drive safely. Most individuals are not yet driving when they begin the NeuroRehab Program. Your occupational therapist will consult with your doctor regarding when you will be ready to begin the driving process.

For your safety, and others driving on the road with you, a driver's evaluation may be recommended. This evaluation is offered by Frazier located on Newburg Road. The program offers a pre-driving evaluation and a behind-the-wheel assessment to ensure that you demonstrate safety awareness and judgment while driving and the skills necessary to control your vehicle.

If necessary, follow-up services are provided such as: an individualized driver's training program, a vehicle and equipment assessment and adaptive equipment training. The goal of the NeuroRehab Program and the driving program is to return you to driving again if at all possible. We understand the importance of driving, but also of driving safely.

Support Groups

Individuals recovering from neurological injury or illness are faced with many changes in their lives. Many individuals find it comforting to discuss these changes with other individuals who are going through similar circumstances. Your therapy team may recommend that you participate in a support group as you recover and transition into previous life roles. Please talk to your therapy team for more details about meeting times and locations.

School Re-entry Program

With permission of parents and the student, a member of the treatment team will contact the school to receive past school records, set up home-bound services, begin the process of school reintegration,

and follow up services with the student after the transition has occurred. (If your student received inpatient treatment we will discuss with that team the recommendations for your student.) The team develops specific recommendations and provides objective data, such as the neuropsychological evaluation, and other standardized tests, so that the school has a comprehensive understanding of the student's needs. Educational information is also provided to the school regarding the effects of brain injury and common changes that can occur. By providing teachers and school staff with education regarding brain injury, it helps them to successfully meet the needs of the student.

The treatment team also educates parents and their student on services within the school system that they may need. Often an Individualized Education Plan (IEP) or 504 plan is set in place for grade school through high school levels of education. This is a specific plan that is legally binding to ensure your student is provided the optimum services and care available. Please talk to your student's therapy team as soon as possible to develop a plan for re-entry.

Vocational Services

The NeuroRehab Program is committed to assisting individuals in achieving the highest level of functioning possible. Therefore, the treatment team offers vocational services to assist individuals in getting back to work. Some of the services offered are: a worksite evaluation, a job analysis, job trials, assessment of work skills, identification of modifications or adaptations, incorporation of strategies, on-site job training and job coaching. The NeuroRehab Program works closely with Kentucky and Indiana Vocational Rehabilitation to provide the best quality of care possible.

Frequently Asked Questions

1. Does a family member or care-provider need to stay for the entire therapy day?

A family member or care-provider does need to come with you during your first visit to Frazier. This is primarily so that an accurate history can be obtained and necessary paperwork can be filled out. After the evaluation, family members are welcome to attend individual therapies but are not required to, unless requested by the treatment team. Many times, it is more therapeutic for family members not to attend therapies as this increases the independence of the individual.

If family members choose to stay for therapy, they will be required to wear a nametag, which can be obtained from the front office.

Also, family and friends are not permitted to attend group sessions. This is so the privacy of the other individuals in the group is maintained. We have found that when family members stay interested and involved in the treatment at the NeuroRehab Program, assist their loved one with following through with homework and home programs suggested by their therapists, encourage regular attendance and participation in the program, recovery is improved.

2. How long is the average length of stay?

An average length of stay is around 8-10 weeks. This question is difficult to answer however, as each length of stay is tailored directly to the needs of each individual. Your treatment team will discuss the recommended length of stay with you after the evaluation.

It is not uncommon for the projected length of stay to change and become longer or shorter as treatment progresses. Everyone has a different speed of recovery. It is well

known among therapists who treat individuals with brain injuries everywhere that the best recoveries are made when individuals actively participate in treatment without interruption and for the recommended length of time. Compared to a person's lifetime, the time spent in therapy is a small investment.

3. Is therapy enjoyable?

The staff at the NeuroRehab Program make every effort to make therapy as enjoyable as possible. However, it is important to remember that the goal of therapy is to get better. Part of the rehab process is working through deficits, or problems caused by the injury or illness, which can be difficult for individuals and their family members. This question is similar to asking whether a job is enjoyable. It depends upon the person and the things that need to get done. Some individuals see their job as enjoyable and some see it as income. Recovery can occur either way, but attitude is everything.

4. We can't provide transportation to therapy, what are our options?

To those who live in Jefferson County, TARC 3 service is a wonderful resource to use for transportation assistance. TARC 3 is a public transportation service for individuals with disabilities. Once the individual has applied and been accepted, TARC will come to their current place of residence, pick them up, drive them to therapy, pick them up at the end of the therapy day, and transport them home again. There is a small fee involved for each ride. See the list of resources in the back to contact TARC. We encourage you to apply early for this service, as it takes 3-5 weeks to begin.

Resources are limited for those who live outside of Jefferson County. Talk to your therapist about options available to you.

5. What if we need to cancel therapy?

It is our expectation that you will view attendance in this program much in the same way you view work or school. We expect you will be here unless there is a medical or personal emergency. In the event that you will be missing a scheduled therapy session, you need to let your primary therapist know at least one week in advance. Whenever possible, schedule medical appointments for days or times that do not conflict with therapy.

In the event of illness, please contact your primary therapist as early as possible. Please ask to speak directly to your primary therapist and do not leave a message.

6. What will happen in therapy?

Each treatment program is tailored to the needs of each individual. Therapy may consist of occupational therapy, speech therapy, physical therapy, and neuropsychological services. The program focuses on achieving the highest level of independence possible. When it is appropriate, getting back to work or school will be addressed. Memory, organization, vision, endurance, thinking skills, balance, strengthening, coping, brain injury education and adjustment, safety, reasoning and judgment are all addressed as needed.

7. When can I drive?

When the treating Occupational Therapist feels that it is appropriate to consider driving, they will collaborate with the treating physician to determine the next course of action. This usually requires a rehab-type driving evaluation that is offered at one of Frazier's clinics. Our goal is to return individuals to driving as soon as possible, but also with safety as the primary concern. Ask your OT any questions you have regarding driving.

8. How can family members/ caregivers assist in the recovery process?

It is important that the things learned in therapy be carried over to the home! Your team will work with you to determine what should be done at home. For example, planners are often used as a memory and organizational tool. Encourage the use of the planner at home and while in the community, not just while at therapy. The goal is to create healthy habits in therapy that will be used long after discharge. Call and schedule yourself to attend a therapy day and follow along in the therapy sessions. Meet with staff to learn more about the injury/ illness and recovery process. Work with the team to set goals and a pace of recovery that best matches the individual. Ask to participate in team rounds.

9. Where can we have our questions answered?

At any point during rehab, the staff and therapists at Frazier are more than willing to answer any questions you may have. First, seek out your primary therapist to get answers to your questions. The primary therapist may ask another team member to talk to you to address your question. If calling by phone, a good time to reach your primary therapist is before 9:00 AM or after 3:15 PM.

10. After participating in the NeuroRehab Program, are participants fully recovered?

Most individuals are significantly more independent, need less supervision, and have a higher quality of life after participating in the NeuroRehab Program. Some people report skills that are not like they used to be prior to the injury or illness. In this case, strategies and compensations need to be used long term. Also, healing continues long after therapy! While the first 1-2 years are the most acute and critical phase of recovery, further recovery continues for many years down the road.

To the Family

Family and friends often experience a wide variety of strong feelings when their loved one is injured or ill that involve both hope and concern. Often in the first few weeks or months after the injury, they may experience feelings of fear, anxiety, hope or denial. Generally, as the individual progresses, you may begin to have feelings of anger, frustration, and sorrow. All of these reactions to the experience are very normal considering the seriousness of the injury/illness. We recommend that you allow yourself to feel and recognize the wide variety of feelings you are experiencing. Your life, as well as your loved one's, has been dramatically altered by the injury/illness. We have learned that allowing yourself to express your feelings will help keep you healthier and more able to cope with this stressful situation. We have outlined activities that will help you care for yourself during the recovery process:

Live Without Guilt

Many family members and friends feel guilty if they take time to attend to their own needs and even have a little break. Your loved one will recover best if you are well-rested and happy. It is important that you set a good example for a well-balanced life that includes some enjoyment. Helping your loved one by working on overcoming your guilt is a positive, healthy contribution.

Rest, Rest, Rest

To be an effective team, we recommend you allow yourself adequate rest periods. Many times brain injury recovery is a long process and you will need lots of energy to handle the "ups" and "downs". Keeping yourself rested is a gift that you are giving to your loved one.

Family and Caregiver Support Group

Caring for your loved one, maintaining your home life, and returning to work can be over-whelming. You may also have questions about how to guide and support your loved one as they recover. Frazier NeuroRehab offers family and caregiver support group meetings to answer these questions and provide encouragement for you as you and your loved one go through the recovery process.

Proper Nutrition

You will need all the energy you can get to cope, both physically and emotionally, with this traumatic situation. Avoid eating on the run or eating junk food. A well-balanced diet is recommended.

Maintain Your Life

Unfortunately, your everyday life does not come to a standstill when someone you love experiences a brain injury. Balance your personal needs with the situation. Allow yourself time for a hot bath, exercise, or time out with friends. Your loved one is in a safe environment with professionally trained personnel.

Avoid Abusive Activities

Substance abuse, alcohol, and drugs will only create more problems and add stress to the situation. They may also cause seizures or re-injury.

Discuss Your Feelings

Confide in someone that can give you love and support during this stressful experience. Don't be ashamed to express both your positive and negative feelings. Often family and friends find it beneficial to maintain a journal regarding their experiences and feelings.

Ask Questions and Seek Support

Ask any questions you have. The NeuroRehab Program staff are accustomed to assisting family and friends with resources to answer their questions. Although not all questions have clear answers, we will do our best to provide families with answers. We also recommend that families seek emotional support. Support can be provided through our Psychology Department. Frazier can also refer families to support groups, and/ or place them in contact with former participants/families.

What to Bring

The following are items you need to bring with you to the program:

- Lunch or lunch money
- Daily medications and/or other medical equipment
- Pen/Pencil
- A list of your current medications
- Your current insurance card (if applicable)
- Comfortable clothing and supportive shoes

The following are items you should NOT bring with you:

- Whole bottles of medications
- Drugs or alcohol

Attendance Policy

It is our expectation that you will view attendance in this program much in the same way you view work or school. We expect you to attend therapy unless there is a medical emergency. Whenever possible, schedule medical appointments for days or times that do not conflict with therapy.

In the event that you will be missing a scheduled therapy day due to illness, please contact your primary therapist as soon as possible. If you must miss a therapy day due to a medical appointment, let your primary therapist know at least one week in advance.

Inclement Weather Policy

In the event of inclement weather, please complete the following steps:

1. Check the status of NRP by going online to one of the TV station's websites seen below OR call the main NRP phone line.
 - **Open Status:** Clinic will open at 8 a.m. Sessions begin at usual times.
 - **Delayed Status:** Clinic will open at 9:45 a.m. Sessions begin at 10:30 a.m.
 - **Closed Status:** No therapy sessions. Case management staff present, limited availability.
2. If we are open or delayed, call the **MAIN OFFICE at 429-8640 opt. "0" no later than 7:30 a.m.** to notify us about whether you **will or will not be attending** therapy for the day. ***We ask that you do not leave a message on your primary therapist's voice mail.***
3. Please continue to monitor the clinic's operational status, as it may change due to the number of cancellations or worsening weather conditions. If the clinic must close, **A FINAL DECISION WILL BE MADE NO LATER THAN 9 a.m.**

Each news station has their own method of noting business delays and closure. Please review the information below:

	<ul style="list-style-type: none"> • Listed as "Frazier NeuroRehab Program" • WAVE3 News app • www.wave3.com <ul style="list-style-type: none"> – Select "Weather" header at top of the page. – A drop down box will appear. Select "Closings". – We will be listed as a BUSINESS.
	<ul style="list-style-type: none"> • Listed as "Frazier NeuroRehab Program" • www.wlky.com <ul style="list-style-type: none"> – In upper left hand corner, select "Menu". – The menu tab will appear. Select "Closings" – We will be listed as a BUSINESS.
	<ul style="list-style-type: none"> • Listed as "Frazier NeuroRehab Program" • www.wdrb.com <ul style="list-style-type: none"> – Select "Weather" header at top of the page. – A small tab will appear. Select "Snow Fox Closings/Text Alerts". – We will be listed as a BUSINESS.

Please Note: Not all stations will list our business on TV due to the volume of cancellations they receive. It is recommended to check the website first to ensure you see our listing.

Location/Map





UofL Health - Frazier Rehab Institute
NeuroRehab Program
4912 U.S. Highway 42, Suite 104
Louisville, Kentucky 40222
P: 502-429-8640