The Spinal Cord Injury Program at Touro Rehabilitation Center addresses the unique needs of patients with traumatic and non-traumatic spinal cord injury. This inpatient program focuses on restoring the patient to his or her maximum level of functional independence by using an interdisciplinary team approach and engaging family members and loved ones in the rehabilitation process.

Touro’s program is known for quality of care, patient outcomes and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

**About Our Patients**

Touro treats a diverse patient population that comes primarily from the Southeast region. In 2015, Touro’s Spinal Cord Injury Program treated 120 patients—73 traumatic spinal cord injuries and 47 non-traumatic spinal cord injuries. The acuity, or case mix index, of the patient population served at Touro is higher than most regional and national rehab facilities because of our patients’ complex medical needs.

Non-Traumatic Spinal Cord Injury (NTSCI): This includes surgery-related spinal cord injuries or tumors where trauma is not the cause of the injury.
- Case Mix Index at Touro is 1.53, compared to 1.43 regionally and 1.40 nationally.
- The average age of non-traumatic patients was 61.
- Of the total number of non-traumatic SCI patients, 63.8% were male and 36.2% were female.

Traumatic Spinal Cord Injury (TSCI): Trauma from falls, gunshot wounds, or vehicle accidents are leading causes.
- Case Mix Index at Touro is 2.20, compared to 1.83 regionally and 1.83 nationally.
- The average age of traumatic patients was 44.9 with 15.1% falling in the 18-25 age group and 1 adolescent (16-17 years).
- Of the total number of traumatic SCI patients, 79.5% were male and 20.5% were female.

**Length of Stay**

The average length of stay at Touro Rehabilitation Center is slightly longer than the regional and national averages. Patients treated at Touro typically stay longer than patients in other rehabilitation facilities due to the intense and comprehensive nature of their therapeutic treatment and more medically complex conditions.

**Comparison of LOS**

- **NTSCI**
  - Facility Actual Mean: 23.4
  - Region Adjusted Mean: 14.8
  - Nation Adjusted: 15.3

- **TSCI**
  - Facility Actual Mean: 34.0
  - Region Adjusted Mean: 22.7
  - Nation Adjusted: 24.6

Return to the Acute Level Care
Touro’s traumatic spinal cord injury patients are less likely to have their rehabilitation interrupted by a return to acute care.

Return to Community
Touro’s traumatic spinal cord injury patients are more likely to be discharged home or to another community setting.

Satisfaction - Spinal Cord Injury
100% of respondents indicated they received accurate and useful information about their spinal cord injury. 100% of respondents said their therapists understood their rehab needs, treated them with courtesy and respect, listened carefully and explained things in a way that patients could understand.

Contact Us
For more information about the Spinal Cord Injury Program:
• Call (504) 897-8565
• Email spinalcordinjuryprogram@lcmchealth.org
• Visit www.touro.com/rehab

Housing
La Maison de HOPE is a temporary non-smoking residential facility for family members of Touro Rehabilitation Center patients who travel from afar to receive services. The house is located at 1322 Aline Street, just steps from the back entrance of the hospital.

The maximum rental period for La Maison de HOPE is one room per family for two consecutive weeks during “peak use” with a maximum occupancy of two adult family members per room. Only one room can be rented per family and the daily rate for the room rental is $25. Short visits (e.g. one-two nights) are permitted ONLY for family training, admissions or discharges.

Daily maid service is not provided and guests are asked to clean up after themselves. All reservations must be made in advance of the patient’s arrival at Touro Rehabilitation Center. In order to secure a reservation, please call (504) 897-7600 between the hours of 9:00 a.m. and 2:00 p.m., Monday-Thursday or 9:00 a.m. and 1:00 p.m. Friday.

Comparison of % Cases that Return to Acute Level Care

Comparison of % Cases Discharged to Community