CHILDREN’S HOSPITAL’S REHABILITATION PROGRAM
Welcome and thank you for considering the Gilda Trautman Newman Rehabilitation Center at Children’s Hospital to manage your child’s rehabilitation. Our program has a renowned reputation throughout Louisiana and the Gulf South. For more than 50 years, Children’s Hospital has served the medical and surgical needs of the children of our region. Today’s strength is the result of the hospital’s solid foundation as a rehabilitation hospital, beginning in 1955. That strong commitment to pediatric rehabilitation continues, and it is even stronger today. The comprehensive rehabilitative services and compassionate care provided by the center’s dedicated staff have dramatically improved the quality of life for thousands of children. We are extremely proud of our past accomplishments, but we never lose sight of our goal of “healing one child at a time.”

The center offers consulting medical services in more than 40 pediatric specialties, including the treatment of children with brain injury, limb deficiency, cerebral palsy, developmental disability, spinal cord injury, trauma injuries, seizure disorder, neuromuscular disease, feeding disorder, stroke, ventilator dependence, myelodysplasia, rheumatic disease and other congenital or acquired disabling disorders. The center has earned the rehabilitation program at Children’s Hospital a renowned reputation throughout the state and the Gulf South.

The rehabilitation program has a comprehensive, interdisciplinary, family centered, team-oriented program that specializes in treating children from birth through 21 years of age. We know that when a child is injured or disabled it affects the entire family. Patients are treated in a rehabilitation program designed to meet their specialized pediatric needs. Our team members provide a framework to help each family adjust to the child’s individual abilities and offer emotional support to preserve and strengthen the family during hospitalization. Family members are encouraged to attend therapy sessions with the child to foster success in rehabilitation and reintegration into the community, school and vocation as appropriate. Through family interviews and community reintegration, therapists can help evaluate your home and your child’s school to suggest adaptations to ease the transition to life away from the hospital.

Once again, welcome to the Gilda Trautman Newman Rehabilitation Center at Children’s Hospital.
A child requiring the specialized services of a rehabilitation program experiences a profound interruption in life and the relationship within the family. The family unit is quite unique for each child; however, it is the constant in a child’s life. As such, the family is respected and treated as an essential part of the rehabilitation team. We will work with you and include you in treatment decisions as your child progresses through the program and prepares for transition back to life at home and school. We encourage parents to provide input, interact with the rehabilitation team and frequently ask questions about their child’s treatment plan.

Before being admitted to the Rehabilitation Center, our interdisciplinary team of physicians, nurses, therapists and social workers review important medical information about each child. The goal of rehabilitating children is to concentrate on restoring their abilities or helping them learn and adapt to new skills.

Once admitted, physical, occupational, speech, music and recreation therapists, as well as psychologists in coordination with patient and family, establish goals for each patient. Each child’s therapy program is individualized to maximize functional recovery.

Therapy appointments are typically scheduled in 30 minute time blocks and consist of physical therapy (PT), occupational therapy (OT), speech and language therapy (ST), music therapy (MT) and recreational therapy (RT). Each child must fulfill three hours per day of OT, PT and/or ST. Additional members of the rehabilitation team, including audiology, psychology, respiratory therapy, nutrition, nursing and social services, will also perform assessments.

Treatment team meetings are held weekly throughout your child’s hospitalization. Your child’s progress will be discussed, as will all needs for transitioning back to home and school. We encourage you to be engaged and ask questions about your child’s treatment. If additional information is needed, family conferences can be easily set up at the request of the family, physician or case manager.
Child
The child is at the center of the rehabilitation team. All attention and focus is placed on motivating each child so that healing can begin. Our doctors, nurses and therapists are specially trained to work with children and will develop a rehabilitation regimen that includes kid-friendly therapies that disguise hard work as serious fun.

Family
Because you know your child best, you are considered an important member of the rehabilitation team. You will provide motivation and encouragement to your child (hugs and kisses, too). We encourage you to participate in your child’s medical care and therapies. Of course we will help you along the way, showing you appropriate ways for you to help your child. Our doctors, nurses and therapists will help you find information and answers to all of your questions.

Physicians
Once a child is admitted, the attending physician guides the rehabilitation team and assists them in treatment decisions. Through personal contact, reports and a complete discharge summary, the rehabilitation physician maintains the important bond between the child and his/her primary physician. Following discharge, the child returns to his/her primary physician, with visits to specialists as needed.

Physical Therapy
The Physical Therapy Department provides evaluation and treatment to children to improve gross motor and developmental skills, balance, coordination, strength, joint range of motion and all types of functional mobility (e.g., walking with or without assistive devices, use of a wheelchair). Orthotic and prosthetic evaluation, fitting and training are also available.

Occupational Therapy
The Occupational Therapy Department provides evaluation and treatment to help children become more independent with age-appropriate daily activities, such as feeding, dressing, grooming and bathing. Occupational Therapists help children with these functional tasks by increasing their fine motor skills, upper body strength, range of motion and sensory processing and by providing adaptive equipment and splints.

Speech Therapy
The Speech Pathologist provides a full range of evaluation and treatment for children with speech, language, oral motor, voice, fluency, feeding and swallowing disorders. Swallow studies are conducted by speech pathologists as indicated.

Mission Statement: To comprehensively support the child and family through high quality medical care, therapy services, education and advocacy in order to optimize functional well being and enhance quality of life in a nurturing, safe environment.
Child Life
Our ChildLife Program provides group playroom and teen room activities, plus individual music therapy and/or recreation therapy services. A music therapist and recreation therapist will work with your child on an individual or co-treatment basis. These sessions are goal oriented and structured to enhance rehabilitation team goals and improve your child’s overall functional leisure and play skills. As part of the discharge process, community reintegration outings will be provided. For more information about community reintegration, please refer to the going home information on page 13 of this booklet.

Audiology
The Audiologist uses behavioral assessment as well as physiologically-based tests to assess auditory sensitivity and outer, middle and inner ear function. In the event of hearing loss, an audiologist provides amplification and rehabilitation as appropriate.

Nursing
Nurses provide 24-hour patient care and education. They take a holistic approach to meeting children’s medical, vocational, educational and environmental needs, and vigilantly assess, plan, perform, evaluate, and coordinate rehabilitative and medical care. They work with physicians, therapists and other members of our rehabilitation team to solve problems and promote children’s independence.

Psychology
The doctors in the Department of Psychology provide a broad range of services. Neuropsychologists provide a structured functional assessment of brain-mediated functions after head injury, neurological disease, infection or stroke. A battery of standardized tests may be administered to assess a wide range of abilities after injury, thus providing the rehabilitation team with important information regarding the child’s skills and weaknesses. Clinical Psychologists provide expert, research-based diagnostic and therapeutic support for children and their families during a typically disorienting and frightening period.

Respiratory Therapy
The Respiratory Care Department offers diagnostic evaluation and treatment to children with abnormalities and/or diseases of the cardiopulmonary system. Families and children receive education and training in all aspects of specific disease management and respiratory system management, including mechanical ventilation and tracheotomy care. Respiratory therapy provides 24-hour patient care as needed.
Nutrition
A registered dietitian assesses and follows children for any nutritional needs and provides a special diet or formula education as needed. The registered dietitian monitors each child’s nutritional status throughout their hospital stay and works with other members of the rehabilitation team to address feeding issues and discharge dietary requirements.

Chaplain
The Chaplain is a professional caregiver who provides spiritual guidance and emotional well-being to the children and their families. The Chaplain is available to members of all faith groups. Religious resources, such as prayer, scripture and/or sacrament, are made available to patients as requested.

Rehabilitation Case Manager
The Rehabilitation Case Manager acts as a liaison between the child’s family and the rehabilitation team. Services provided include transfer and admission to the Gilda Trautman Newman Rehabilitation Center at Children’s Hospital, orientation to the rehabilitation process, arrangement of staffing and family conferences and coordination of discharge planning.

Social Services
The Social Services Department provides a psychosocial assessment and identifies the family’s strengths and weaknesses. Financial counseling and referrals are made when appropriate. The social worker works closely with the family and rehabilitation team during discharge planning. The social worker also provides discharge planning, including referrals for resources based on the child’s individual needs. The rehabilitation social worker provides emotional and practical support to the child and family.

Team

On each floor of the hospital, age-appropriate playrooms provide places where kids can play video and board games, surf the Web, read and hang out with other kids their age.
In preparation for being discharged and transitioning to home, you may be offered the following options:

**Community Reintegration Program**

The goal of community reintegration is for your child to return to home and school with the highest quality of life and function. You and your child will be given the opportunity to take outings into the community. This program provides an opportunity to practice and apply skills learned in therapies in a fun, yet realistic community environment. Examples of outings include restaurants, movies, zoo, aquarium, sporting events and, when appropriate, school.

**Home Trial**

This provides the family the opportunity to be responsible for the care of their child, while in the secure hospital environment. Following appropriate training by hospital staff, the family is responsible for the administration of medications, feedings, ventilator or tracheotomy care. This allows the family to become comfortable with the level of care needed by their child, while under advisement of the hospital staff.
Mission Statement:
**Children’s Hospital** opened on March 1, 1955 as the 50-bed, $1.2 million Crippled Children’s Hospital. Shortly after the hospital’s opening, arrangements were made to admit children through the Crippled Children’s Hospital’s Section of the State Department of Health, and a contract dedicating state funds to help offset patient care was established. One by one, special outpatient clinics were established. Services to meet children’s psychiatric, social, dental and recreational needs were added, while existing services — physical therapy, occupational therapy, and speech and hearing therapy — were adapted to keep pace with the latest treatment methods and technology.

Fueled by tremendous community support, a determined and resourceful board of trustees, and an increasing demand for its services, the hospital continued to thrive. In 1965, only 10 years after opening, the hospital added a recreation building to enhance its rehabilitation program.

In 1975, the board voted to execute ambitious plans to transform Crippled Children’s Hospital into a full-service pediatric medical center. Appropriately, the board voted to change the name from Crippled Children’s Hospital to Children’s Hospital.

Even though Children’s Hospital is now a comprehensive medical service provider, its foundation as a rehabilitation center has allowed the interdisciplinary collaborative approach to patient care to thrive, benefiting thousands of children who have passed through the doors.

**Children’s Hospital was founded as a rehabilitation hospital and we are committed to providing cutting edge care while healing each child, one at a time.**
Ariel Onofry

HOMETOWN: Albany, La.
AGE: 6
CONDITION: Encephalitis
TREATMENT: 3 weeks PICU, 3 weeks inpatient rehabilitation, 2 years outpatient rehabilitation
OUTLOOK: Full recovery

When five-year-old Ariel Onofry started showing symptoms of a cold, her parents thought she had a virus that was going around school. But soon she started having seizures, stopped breathing, and slipped into a 10-day coma. Tests revealed she had encephalitis and doctors feared she would have severe, permanent brain damage that could leave her unable to walk or talk. Once she escaped her coma, she had lost her motor and communication skills, and regressed mentally to the age of a two-year-old. Through speech, physical and occupational therapy, she learned how to walk and communicate, first by signing and eventually vocally. She made steady progress, returned to school and is on track for a full recovery. Her mom, Diane, credits the rehabilitation team for making Children's Hospital so special.

"We felt at home here, so much so that I drove three hours, three times a week for her appointments," Diane said. "We didn’t believe they could do what they said they could, but they did. They made us whole again."

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Isaiah Jasmine

HOMETOWN: New Orleans
AGE: 3
CONDITION: Brain Tumor
TREATMENT: Surgery to remove the tumor, nine months of physical therapy, 11 months of speech therapy, 1 year of occupational therapy
OUTLOOK: Full recovery

Isaiah Jasmine was a healthy, bustling two-year-old until he became disoriented and physically sick one morning and everyday thereafter for three weeks. His mother, Deanna, brought him to his pediatrician who thought Isaiah had a virus. When medication didn’t clear up his illness, his doctor ordered an MRI. His physicians found a mass at the base of his skull. Three days later, Children’s Hospital neurosurgeons removed 100 percent of the tumor, and three days after that, Isaiah began rehabilitation with occupational, physical and speech therapy. Within nine months, he was released from physical therapy. Two months later, he wrapped up speech therapy. And he’s expected to complete his occupational therapy within weeks. On the anniversary of his surgery, he received a clear brain scan.

“We feel loved, like a part of the family at Children’s Hospital," Deanna said. "When we walk in, everyone knows his name. Everyone wants to make sure he’s doing well in his recovery. It’s touching to know that they are so invested in him and his recovery."

“It’s touching to know that they are so invested in him and his recovery."
Linsey Rogers

HOMETOWN: Chauvin, La.

AGE: 17

CONDITION: Traumatic Brain Injury

TREATMENT: 1 month in PICU, 5 weeks inpatient rehabilitation, 5 months outpatient rehabilitation

OUTLOOK: Full recovery

Linsey Rogers is getting behind the wheel again after a devastating car wreck left her doctors thinking she wouldn’t survive. Paramedics rushed her to the hospital where doctors discovered her pelvis was cracked in five places, the bones in her left leg were broken; she had a collapsed lung, severe brain injury and required a respirator to breathe. After a month in a coma she awoke. When she did, she thought she was in New York City, the year was 1836 and the president was George Washington.

“I thought there was no way she would be able to come back,” her mom, Natalie LeBoeuf, said. “At first, her doctors told us to expect her to be a vegetable for the rest of her life.” Natalie said Linsey started making progress once she was transferred to Children’s. “She reached one milestone, then another and another really fast.”

Linsey returned to school, graduated at the top of her class at South Terrebonne High School, and is a freshman at Nicholls State University. Linsey is majoring in biology with hopes to become an occupational therapist.

“There were things I didn’t think I’d be able to do that I’m doing today,” Linsey said. “I’m amazed. I think it’s a miracle.”

“I’m so impressed with Children’s Hospital,” Natalie said. “The therapists brought her back. I tell everyone to come here,” she said. “It’s a special place.”

Tan Nguyen

HOMETOWN: New Orleans

AGE: 13

CONDITION: MRSA “staph” infection

TREATMENT: 2 weeks in PICU, 2 weeks inpatient rehabilitation, 5 months outpatient rehabilitation

OUTLOOK: Full recovery

A few days after jet skiing in Lake Ponchartrain, Tan Nguyen’s lower leg began to stiffen. Doctors found he didn’t have a sprain, rather a Methicillin-resistant Staphylococcus aureus (MRSA) infection commonly known as a “staph” infection, which can quickly cause widespread, potentially life-threatening infections — especially in children because their immune systems aren’t fully developed.

“I thought we were going to lose him,” his mom, Tho, said, as he translated their native Vietnamese. “I was so scared.”

Tan was admitted to Children’s Hospital’s Pediatric Intensive Care Unit, where doctors were able to cure the infection, but it caused atrophy and weakened his muscles leaving him unable to walk or lift his arms. He was transferred to inpatient rehabilitation where he began working on building strength to master basic skills. Within two weeks, he was walking without assistance and discharged to the hospital’s outpatient program. Today, he has made a remarkable comeback and shows no signs of the infection.

“I’m so happy he’s back to being Tan,” Tho said. “He’s healthy and strong again. I’m very grateful to Children’s Hospital. They gave me back my little boy.”
Connor Breaux

HOMETOWN: Lafayette, La.
AGE: 9
CONDITION: Traumatic Brain Injury
TREATMENT: 3 weeks PICU, 2 months inpatient rehabilitation, outpatient rehabilitation
OUTLOOK: Full recovery

Connor Breaux was having fun riding his dirt bike when he had an accident that left him with a traumatic brain injury. He spent three weeks at Lafayette General Hospital before he was transferred to Children’s Hospital’s Rehabilitation Center for two months of treatment. At first, Connor struggled to regain the basic motor skills he had before his injury. He could barely stand on his own, but after a week of rehabilitation he was taking steps using a walker. During one music therapy session his therapist played “When the Saints Go Marching In.” He smiled, picked up his pace, began singing along and snapped his fingers to the beat.

“When working with rehab patients who are working on major re-training skills, it really helps in their motivation and endurance during the tasks that are really difficult,” his music therapist Suzanne Denu said. “Just being able to provide that musical element can make all the difference in the world.”

Connor said he enjoyed his treatment at Children’s Hospital because the therapists made it fun. “Everything was great. I felt like the therapists wanted to see me do well,” he said, “so I worked harder because I didn’t want to let them down.”

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David Riggins

HOMETOWN: New Orleans
AGE: 16
CONDITION: Double amputee
TREATMENT: Fitted for sockets and prosthetic legs, acute inpatient and outpatient rehabilitation
OUTLOOK: Six months after injury walking with assistance

Walking home one night 15-year-old David Riggins and a group of friends were involved in a horrific accident. Paramedics arrived and rushed him to University Hospital. Once there, doctors were able to save his life, but not his legs. Both were amputated just above his knees. He began inpatient rehabilitation treatment at Children’s Hospital immediately, learning how to get around in a wheelchair until he could be fitted for and learn to walk on prosthetic legs. Through persistence, determination and dedication, he is up and walking again with an assistive device. “It’s been tough, but I’m making a comeback with the help of Children’s Hospital’s Rehab Team.”

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