

Welcome to Alexandra Hospital's Inpatient Rehabilitation

Your Journey to Recovery



Acute Hospital Stay

Inpatient Rehabilitation

Integration to Community



Alexandra Hospital Rehabilitation Medicine

The Alexandra Hospital Rehabilitation Medicine inpatient service focuses on early rehabilitation after an illness or injury. We offer a comprehensive rehabilitation programme that will start you on the journey to achieve your best function possible and the best quality of life possible.

Common causes of admission for inpatient rehabilitation are:

- Stroke
- Spinal cord injury
- Brain injury
- Major trauma
- Cancer
- Orthopaedic issues (e.g. amputations, joint replacements)
- Cardiac / Pulmonary issues
- · Deconditioning from serious illnesses
- Rehabilitation before major surgery

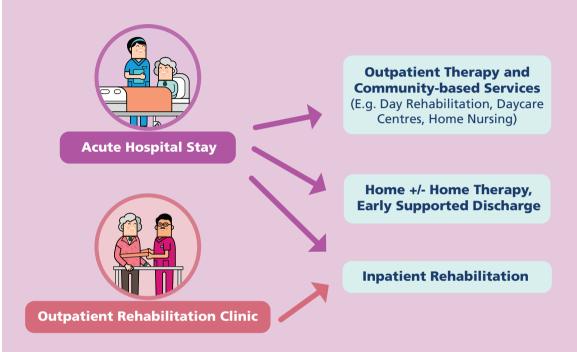
Your Rehabilitation Journey

You are being admitted for inpatient rehabilitation because there has been a change in your usual function due to an illness or injury. Your inpatient rehabilitation stay is the start of your journey to re-learn skills and/or learn new ways to adapt to these changes in function.

After discharge, it is important for you to continue to practise the skills that you have learnt, incorporate these in your daily activities, and return to an active lifestyle. We will continue to journey with you to explore returning to work, school or activities of your interest.

Your Rehab Journey

A patient's potential rehabilitation journey could take a few routes. You are currently at the inpatient rehabilitation phase.



Integration back to society

- Continuing therapy in an outpatient setting (e.g. Hospital PT/ OT/ ST, Day Rehabilitation Centre)
- Returning back to work/ school / sports/
- Returning to driving

Maintaining an active lifestyle is important!



What Should You Expect?



The main focus of your rehabilitation inpatient stay will be therapy. Depending on your requirements, this generally involves 1-hour sessions of each type of therapy (physiotherapy, occupational therapy, speech therapy) a day. Your therapy will take place from Monday to Friday, and sometimes on Saturday.



The timing of your therapy session(s) will be made known to you on the morning of each day so that you are able to plan your day.



An interdisciplinary team will perform an initial evaluation and discuss with you and your loved ones the treatment plan and goals of your stay, what you can do to optimise outcomes, possible complications to watch out for and how to prevent them.



The team will update you and/or your loved ones on your progress at least once a week, depending on your medical condition.



Mood and coping issues are common and can be addressed with the interdisciplinary team, which includes our psychologist and social worker.



In preparation for your safe discharge home, members of the team will discuss home modifications, assistive equipment and discharge care options with you. This will be discussed early during your stay to help us calibrate our rehabilitation goals collaboratively, as some arrangements may need several weeks to achieve.



On the day of your discharge, you will be given a follow up appointment with a doctor and/or therapist. A nurse will give you a call within a week of your discharge to check in on you.

What Should You Do?



Be ready to go for your therapy sessions before the hospital porter comes to fetch you.

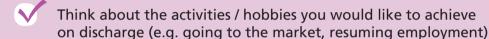


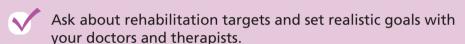
Actively participate in the rehabilitation sessions.



Ask your therapist about the exercises that are safe for you to do by the bedside, outside of your therapy time.

- These exercises can also be done with your relatives, or with supervision from the nurses.
- Remember, the more you practice, the better you will get.
- Sit out of bed (if permitted by medical team) and keep occupied during waking hours.







If you are unsure or have any questions about your condition/journey, please raise this up with the team.

What Can Your Family Do For You?

- Comfortable footwear like sandals or sports shoes.
- Familiar photos, objects and/or music.
- Eye glasses (if applicable).
- Hearing aid (if applicable).
- Personal hygiene items such as toothbrush.
- Please check with the nurses/speech therapists if you have any dietary restrictions before consuming food from your relatives.
- Eye mask/ear plugs for more comfortable sleep in the ward if required.





One Care Journey

Throughout your rehabilitation journey, you will be supported by an interdisciplinary team.



Physiotherapist (PT)

Your Physiotherapists will focus on improving your strength, range of motion, coordination and balance to maximize your functional mobility in transfers, standing and walking. They may also use body weight supported devices and/ or robotics to support your recovery process



Occupational Therapist (OT)

Your Occupational Therapists address various domains, including maximising your ability to carry out Activities of Daily Living (ADLs), cognitive retraining, upper limb rehabilitation, recommendations of assistive equipment and home modifications that can help you and/or your caregiver perform your ADLs safely.



Speech Therapist (ST)

Speech Therapists are involved in the assessment and management of swallowing and communication difficulties. During the rehabilitation stay, it will be important and beneficial to have constant discussions with your STs about therapy goals and rationales of activities. We may provide specific communication or feeding strategies, which will be useful during the stay.



Psychologist

If needed, you will have access to a psychologist who provides a holistic service in supporting your mental wellness in your recovery journey. They can conduct cognitive assessments to evaluate your functioning abilities. Your psychologist may then provide emotional and/or cognitive support depending on your requirements.



Medical Social Worker (MSW)

The Medical Social Workers provide counselling and emotional support to you and your family members to help cope with the challenges faced in your hospitalisation as well as upon discharge. We can also provide advice on financial concerns related to your medical treatment



Rehab Nurse

Your rehab nurse will assess your rehab care needs and provide a care plan that aims to restore function and prevent complications. They also provide health education and supportive counselling to you, your family and your caregiver, both in hospital and upon discharge, to support your reintegration back to society.

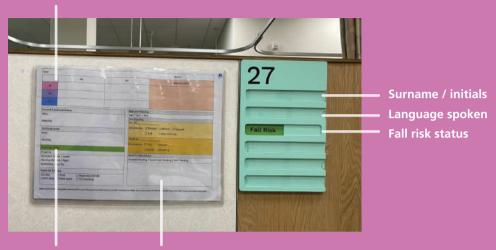


Rehab Doctor

Your doctor will manage your medical condition(s) and potential complications arising from them. They can also help to address some common issues such as pain, spasticity and bladder and bowel problems. They work with all the members of the rehabilitation team to provide a holistic approach in caring for you and to optimise your function.

Ward 3 Orientation

Therapy-related information (e.g. Daily therapy schedule)



Estimated discharge date

Information related to food / fluid intake

Ward 3 Schedule

Therapy schedules are finalised and printed each morning, please look out for them at the following areas:





Personal Property

- We strongly advise you NOT to bring valuables such as cash, bank cards, jewellery or other cherished items. We are sorry to inform you that there are no bedside cabinets that come with lock and key. If you have any of these valuables with you, your family may bring it back home or you may request to keep your valuables in the ward's safe box.
- Your valuables will be returned to you upon your discharge from the hospital.
- Should you choose to keep your valuables with you, the hospital and staff will not be held liable if they go missing.



Infection Control Policy

- We take infection control very seriously.
- We want to keep everyone you, your loved ones, and us safe, by making sure hand hygiene is done strictly. We encourage you to remind your visitors to wash their hands and use the alcohol hand rub available before and after their visit.
- We also advise that visitors should use the visitor's chair and NOT sit on patient's bed.



Fall Precaution

- Your safety is important.
- Please do not attempt to get out of bed/chair on your own until it has been assessed safe to do so by your Physiotherapist.
- Please use the call bell to ask for assistance when needed. Your nurse will attend to you as soon as possible.



Skin Care

- There may be a chance of developing pressure sores when physical mobility is limited.
- Your nurse will assess if you require any pressure sore prevention measures.

Elimination

Bladder

- Urinary incontinence and urinary retention can be caused by many factors.
- If you are unable to pass urine, your doctor may try to remove your urine catheter once you are getting out of bed more often.
- If you are unable to control your urine, your nurse will help with bladder training by offering to bring you to the toilet every 2 hours to empty your bladder.

Bowels

- Constipation often happens due to disease process and limitation of physical activity.
- You are encouraged to drink plenty of water, unless contraindicated, and consume a high fiber diet to prevent constipation.
- If you are unable to open bowels for 2 days, a suppository may be given to aid in clearing of bowels.
- Suppositories are given after dinner to prevent interruptions during therapy sessions in the daytime.



Discharge and Follow-up

While we aim to improve or restore your ability to function during your inpatient stay, it is likely that you may continue to require follow up rehabilitation after discharge. This may take place in the following settings:

Day Rehabilitation Centre (DRC)
Outpatient ST/PT/OT

Home Therapy
Private Therapy Services

- To prepare your caregivers for your discharge, we encourage them to participate in assisting you with your Activities of Daily Living (ADLs) early on, whist you are in the hospital.
- Once your Expected Discharge Date (EDD) is set, Caregiver Training (CGT) sessions will be arranged for your identified caregiver. The number of sessions / duration will vary based on your loved one's needs, subjected to the team's assessment.
- You and/or your caregiver will be informed at least one day prior to the CGT session.
- Discharge time is before 3pm. An extra day charge will be charged for discharges after 3pm.
- Do expect to receive a phone call within one week after discharge from your nurse to follow up on how you are coping at home. Please bring up any concerns you have regarding your symptoms, medications, follow up appointments, activities / home exercises or update us of any changes in plans that you may have (e.g. cancelling therapy).

Useful Numbers / Contacts:

Alexandra Hospital (AH) 6472 2000

AH Ward 3 6379 3037/3030

Agency of Integrated Care (AIC)

AIC hotline: 1800-650-6060 to speak with their Customer Care Officers for advice.

AIC Care Link @ National University Hospital (NUH)

5 Lower Kent Ridge Road, Singapore 119074.

Main Building Lobby B, Level 1 (opposite The Coffee Bean and Tea Leaf Cafe)

Operating Hours:

Mondays to Fridays - 9.30 am to 5.30 pm

Saturdays - 9.00 am to 12.30 pm

Closed on Sundays and public holidays

Website: https://www.aic.sg/

HDB Enhancement for Active Seniors (EASE)

For enquiries regarding grab bars or ramp installation.

Contact no.: 1800-225-5432

Operating Hours: 8.00am to 5.00pm on weekdays (excluding Public Holidays)

Website:

https://www.hdb.gov.sg/residential/living-i

n-an-hdb-flat/for-our-seniors/ease

SG Enable

For enquiries on schemes and services for persons with disabilities.

Infoline: 1800-8585-885

Operating Hours:

Monday to Friday: 9.00am to 5.30pm Closed on Weekends and Public Holidays

Corporate Office Address:

SG Enable Ltd 20 Lengkok Bahru

#01-01, Singapore 159053

Website:

https://www.sgenable.sg/Pages/Home.aspx

Support Groups

Stroke Singapore National Stroke Association (SNSA) http://www.snsa.org.sg/ Aphasia SG https://www.aphasia.sg/ Stroke Support Station (S3) 20 Lengkok Bahru, #01-04 Playground Singapore 159053 http://www.s3.org.sg **Spinal Cord Injury** Tetraplegia workgroup (Facebook) (Facebook) **Traumatic Brain Injury** Beyond Broken Brains https://www.brokenbrains.sg/ **Others** Amputee Support Group (Facebook) **Home Ventilation and Respiratory Support** Service (HVRSS) https://www.ttsh.com.sg/Patients-and-Visitors/Med ical-Services/HVRSS/Pages/default.aspx Serving People with Disabilities (SPD) https://www.spd.org.sg/

Caregiver Respite

AIC Respite Care https://www.aic.sg/caregiving/getting-respite

TOUCH Caregiver To seek advice on caregiving issues.

Care Line no.: 68046555

Operating Hours:

Mondays to Fridays - 9.00 am to 5.00 pm

Website:

https://www.touch.org.sg/about-touch/our-services/touch-caregivers-support-homepage

Planning My Journey

	MON	TUE	WED	THUR	FRI	SAT	SUN
Before 9am	 - 	 	 			! !	! ! !
9am- 10am		 	 		 		
10am- 11am	 - 	 	 		 		
11am- 12pm		 	 		 		! ! !
12pm- 1pm	 	 	 		 	 	
1pm- 2pm	-	 	† 		-		†
2pm- 3pm			 				
4pm-			+ 		 		
After 5pm				DINNER			
Evening		 	 	 	 	 	

My Goals:

Weekly Goals	Final Goal						
1							
2							
3							
4							
5							
What's important to me? Chief concerns?							
Questions I want to ask my therapists / doctors:							
-							





Scan the QR code to find directions and locate our facilities!

For updated information on shuttle bus timings and designated stops, please visit www.ah.com.sq

Main Line
Call 6908 2222 to
schedule an appointment
or make enquiries.

Email

For Appointments: Appointments@nuhs.edu.sg For Enquiries: Contactus@nuhs.edu.sg For Feedback: AH_Feedback@nuhs.edu.sg

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