Primary Medical Conditions

Our hospital provides a comprehensive, individualized approach to treat a wide range of complex medical conditions, including the following:

**INFECTIOUS DISEASE**
Including but not limited to:
- Osteomyelitis
- Cellulitis
- Infectious pneumonia
- Bacteremia
- Abscess
- Osteomyelitis
- AIDS/HIV
- Endocarditis

**WOUND/SKIN**
Including but not limited to:
- Decubitus ulcers
- Abscess
- Amputation
- Cellulitis
- Post-operative wound complications
- Necrotizing fasciitis
- Neurogenic ulcers

**DIRECT ADMISSIONS**
Including but not limited to:
- Wound changes or lack of positive tissue progression
- Suspected infections with clinical manifestations
- Unstable blood sugars
- Pulmonary condition changes with chronic respiratory history (may be with or without mechanical ventilation)
- Patients who frequent ERs or urgent care centers due to lack of successful treatment outcomes in an outpatient setting

**MEDICALLY COMPLEX**
Including but not limited to:
- Debilitation related to a primary diagnosis
- Metabolic disorders
- Aplastic anemia
- GI issues
- AIDS CARDIOVASCULAR/PERIPHERAL

Patients who are admitted to long-term acute care hospitals typically:

- Require acute care services as determined by a physician
- Require daily physician intervention to manage multiple acute complex needs
- Cannot be effectively managed at a lower level of care

A specialized setting for complex needs

Our team of highly skilled clinicians is passionate about helping patients recover to the fullest extent possible.

To refer a patient for long-term acute care, please call our local facility today.
VASCULAR
Including but not limited to:
• Amputation
• Post-operative complications
• CVA
• Unstable diabetes mellitus
• Syncope/presyncope
• Congestive heart failure

VENTILATOR WEANING
Including but not limited to:
• Nocturnal ventilators
• New initiation of BI-PAP or CPAP
• Failed weaning attempts at an acute care setting
• Chronic ventilator with pneumonia
• Aspiration
• Acute respiratory distress syndrome
• Interstitial lung disease

LTAC REHABILITATION
Medical needs are still the primary reasons for admission. Including but not limited to:
• Major or multiple trauma with functional limitation
• Progressive CNS conditions
• Traumatic brain injuries
• Orthopedic conditions
• Amputation
• Spinal cord injury
• Cardiac disease or surgery with active co-morbidity and functional limitation
• Burns

ACTIVELY TREATED CO-MORBID CONDITIONS
In addition to primary medical conditions, our patients must have other acute medical issues that require active treatment, including the following:

• Mechanical ventilation due to respiratory failure
• Pulmonary hygiene
• Tracheotomy insertion and management
• High-flow oxygen therapy (FIO2 40% or greater)
• OET/NET intubation
• Pleural chest tube management
• Exacerbation of COPD treatment
• Complicated tuberculosis therapies
• Vasoactive IV medication and drug titration
• Complicated cardiomyopathy management
• Intensive sepsis management
• IV and oral anticoagulation in conjunction with INR management
• Hyperalimentation
• Management of decompensated/refractory CHF
• Acute care of pre- and post-cardiac surgery patients
• Endocarditis drug therapy and monitoring
• External wound infection management
• Stage III and IV decubitus ulcer care
• Management of severe peripheral vascular disease complications
• Negative pressure wound therapy
• Wound debridement
• Pre- and post-transplant care
• Frequent blood product transfusion
• Post trauma with extended acute medical needs
• Rehabilitation for patient