

Volume 24, Issue 11

NOVEMBER 2023

REHABILITATIVE CARE – INPATIENT AND HOME CARE

Treatment for Lymphedema

The lymphatic system is a network of organs, vessels, and tissues that work together to move lymph fluid through the bloodstream. As part of the body's immune system, the lymphatic system helps to protect against infection by filtering harmful substances and waste products that are created by the body's tissues. The lymphatic system also maintains normal fluid levels in the body and absorbs fats and fat-soluble vitamins into the bloodstream.

Lymphedema is a build-up of lymph fluid in the body. A person can develop lymphedema from various causes, such as surgery, infection, trauma, or cancer treatment. The swelling usually occurs in the arms or legs but can occur in other parts of the body. Lymph fluid is part of the lymph system that carries fluid and cells that help fight infections throughout the body.

When the lymphatic system is not working properly, the body accumulates fluid which causes swelling, the most common symptom of lymphedema. Other symptoms may include an inability to feel the veins or tendons in the extremities, arms or legs may appear to be slightly different sizes, joints may feel tight or inflexible, skin is puffy or red, clothes or jewelry fit more tightly than usual, feeling of burning or itching, or the skin becomes noticeably thicker. Lymphedema can be painful and affect a person's ability to manage daily activities, and they may feel self-conscious about their physical appearance.

Lymphedema requires a diagnosis by a medical professional. A healthcare provider can perform several tests to determine if a patient's swelling is due to lymphedema. Ultrasound can be utilized to find obstructions in the lymphatic system that may be causing the swelling. A magnetic resonance imaging (MRI) test uses a magnet, radio waves, and a computer to create detailed threedimensional pictures inside the body to see if a tumor could be putting pressure on the lymphatic system. Computed tomography (CT) scan uses X-rays that show a cross-section image of the body to determine if there is a blockage within the lymphatic system. Lymphoscintigraphy is a procedure in which the patient is injected with radioactive dye and scanned by a machine. The images show the dye moving through the lymph vessels, revealing any blockages.

There is no cure for lymphedema; however, the condition can be managed by treatments and therapies that focus on reducing swelling and preventing complications. Licking Memorial Rehabilitation Services offers treatment for lymphedema at the Gibb Reese Rehabilitation Center, located at 1717 West Main Street. Occupational therapists can utilize various techniques to reduce swelling, such as exercises that involve gentle contraction of the arm or leg muscles to move excess fluid out of the swollen limb. Manual lymph drainage is a massage technique in which therapists apply light pressure to move fluid in the

swollen limb toward an area with working lymph vessels.

Compression wraps and garments can help to provide pressure to the affected area to encourage lymph fluid drainage. Compression wraps are made of short stretch material with a flexible spine and multiple overlapping bands that are secured with Velcro. When applied, the wraps provide firm, even pressure on the swollen areas to move lymph back into circulation. Compression garments are close-fitting elastic sleeves or stockings that compress the arm or leg to encourage lymph fluid drainage.

Lymphedema increases the risk of cellulitis, an infection of the deep layers of the skin which can cause damage to the lymphatic vessels. Symptoms include redness, swelling, and heat in the skin, and can be accompanied by fever, nausea, or vomiting. A physician may prescribe antibiotics for patients with lymphedema if they begin to experience symptoms of cellulitis.

To prevent complications from lymphedema, it is important to practice good hygiene. Individuals should clean their skin daily and examine the affected area for cuts. Applying lotion will help prevent dry skin and avoid cracking. Proper nutrition and exercise help to reduce stress, give the body energy, and encourage healing. Support groups can connect people with others who have lymphedema to share their challenges and receive encouragement.

Patient Story – Sophia Renner

Around the age of six months old, Sophia Renner's parents, Julie and Jon, began to suspect Sophia was experiencing some type of developmental disorder. She was not meeting typical infant milestones such as sitting up on her own. The family had to prop Sophia in a seated position. As she continued to grow, it became more evident that Sophia was having difficulty with gross motor skills. She was unable to crawl or pull herself up as would be expected for a child her age. The family was unsure what was causing Sophia's developmental delays, but were determined to find out and assist Sophia in any way possible.

"We spoke to her pediatrician about our concerns, and he began testing to get to the root of the problem," Julie remembered. "While watching one of our sons play soccer, we met another family in our community, and they introduced us to their son, John, who had been diagnosed with Angelman syndrome. John's symptoms were exactly what we were seeing in Sophia."

Angelman syndrome is a rare genetic disorder that causes delayed development, intellectual disability, problems with speech and balance, sleeplessness, seizures, and epilepsy among other medical issues. Despite the symptoms, people with Angelman syndrome have an overall happy and excitable demeanor. Angelman syndrome is caused by a loss of function in a gene located on chromosome 15 called the ubiquitin protein ligase E3A (UBE3A) gene. Every person receives pairs of genes from their parents, the maternal and paternal copy. Typically, the body uses information from both copies to function. In those with Angelmen syndrome, part of the maternal copy is missing or damaged. In a few cases, Angelman syndrome is caused when two paternal copies of the gene are inherited, instead of one from each parent.

As the pediatrician worked to confirm a diagnosis, Julie and Jon took measures to assist Sophia in building strength to better enhance her gross motor skills. Julie was taking Sophia to areas around Columbus for care including physical therapy. She was frustrated by the long drives and amount of time that she and Sophia were spending in the car. One developmental specialist who was working with Sophia mentioned to Julie that Licking Memorial Rehabilitation Services offers pediatric therapy for children including physical, occupational, and speech therapy.

"We took Sophia to Licking Memorial Rehabilitation Services for an evaluation in December, and she began working with Taylor Wright soon after," Julie said. "Sophia was only 10 months old and was wary of strangers. She would cry when someone who she did not know would approach her. Initially, Sophia would cry when working with Taylor, but Taylor was very gentle with her and soothing. Now, Sophia lights up as soon as she sees Taylor. Taylor is so compassionate and is a truly wonderful person."

A short time after Sophia began therapy, the pediatrician was able to confirm that she was suffering from Angelman syndrome. The diagnosis assisted her care team in creating a plan to enhance Sophia's abilities. Since beginning therapy, Sophia has been working to build strength in her extremities and core. She is able to crawl and walk with the assistance of a walker and is very close to

being able to walk independently.

"Sophia has built a strong relationship with Taylor, and it is fun to watch them together. The two of them bring smiles to the other people receiving therapy at the facility as Sophia walks around the therapy space with her walker," Julie shared. "I am so happy to have found an amazing therapist so close to our home."

In addition to Sophia, Julie and Jon have two boys - Matthew, who is 6-years old, and Isaac, who is 3-years old. Both boys are very active with school and sports. Caring for a child with developmental delays and keeping up with two active boys can be stressful and exhausting. Both Julie and Jon moved from Pittsburgh, Pennsylvania for employment reasons, and have no extended family to rely on for assistance. However, the Renners have formed very strong bonds and receive much support from the Granville community especially John's family, the other couple with a child diagnosed with Angelman syndrome. Sharing a desire to raise awareness, support, and funds for research, the two families along with their friends formed the Granville Angels Foundation. The organization supports the Foundation for Angelman Syndrome Therapuetics (FAST), a group researching a cure for Angelman syndrome, and Angleman Syndrome Foundation.

"Medical researchers know what causes Angelman syndrome, and there is hope that they can find a cure or an at-birth option for treatment," Julie explained. "For Sophia, there is hope that a treatment will improve her quality of life, allow her to easily communicate her needs, reduce her seizures, improve her sleep, and allow for some independence."

The care team at Licking Memorial Rehabilitation Services can offer multiple types of therapy and includes physical, occupational and speech therapists as well as social workers. Patients can receive treatment at the Gib Reese Center For Physical Therapy located at 1717 West Main Street in Newark, or at the Pataskala Health Campus located at One Healthy Place in Pataskala.



Rehabilitative Care – Inpatient and Home Care – How do we compare?

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare to benchmark measures. Then, we publish the information so you can draw your own conclusions regarding your healthcare choices.

Patients who are undergoing rehabilitation are at increased risk for falls due to factors such as the expectation of increased independence, weakness, and possibly pain medication. Falls can result in injuries and potentially delay a patient's rehabilitation. All Acute Inpatient Rehabilitation Unit (ARU) patients receive daily assessments for their level of fall risk and are advised of precautionary measures.

	LMH 2020	LMH 2021	LMH 2022	LMH Goal
Unassisted patient falls in the ARU that resulted in injury	0	0	0	0

Upon admission to the ARU, patients receive a standardized assessment scoring their ability to perform daily activities, such as walking, dressing, and personal hygiene. The quality indicators (QI) are composed of measures to capture the improvement in an individual's function. The skills are reassessed before discharge.

Average ARU patients' quality indicators showing improvement at discharge	LMH 2020	LMH 2021	LMH 2022	National ⁽¹⁾
Overall rate of improvement in self-care ability	8.9%	11.3%	12.6%	12.9%
Overall rate of improvement in self-mobility	24.4%	23.9%	24.7%	34%

The goal of the ARU is to help patients who have experienced an illness or injury improve their functional status and mobility so that they may return home rather than to a nursing care center.

	LMH 2020	LMH 2021	LMH 2022	National ⁽¹⁾
ARU patients discharged directly to home	83.5%	82.6%	87%	88.5%

4.

Inpatients' level of satisfaction with their healthcare experience is affected by many factors, such as achievement of therapy goals, staff communication skills, nurse response times, and facility cleanliness. To monitor the quality of care, the ARU at Licking Memorial Hospital (LMH) offers patients an opportunity to offer feedback through a post-discharge survey.

Overall patient extinfaction with	LMH 2020	LMH 2021	LMH 2022	National ⁽²⁾
Overall patient satisfaction with ARU experience	92%	86%	87%	81%

LMH Home Care provides skilled professional care to patients at home. Services are based on the individual's needs and include a wide range of support, such as therapy, nursing care, medication instruction, pain management, home management, financial needs assistance, emotional support, as well as others. LMH surveys Home Care patients regarding their level of satisfaction on a scale of 0 to 10, to evaluate how well their needs are being met. A score of 9 or 10 is considered ideal.

	LMH 2020	LMH 2021	LMH 2022	National ⁽³⁾
Percent of Home Care patients rating LMH a 9 or 10	94.1% 86th percentile	90.8% 72nd percentile	95.1% 93rd percentile	87.3% 50th percentile*
*For national percentile ranking, higher scores a				

LMH Home Care patients often have some degree of physical deficit which can interfere with their ability to walk and quality of life. The Home Care staff provides physical therapy and other support to help patients improve their walking function.

	LMH 2020	LMH 2021	LMH 2022	LMH Goal
Home Care patients with improved walking function	89%	96%	98%	75%

Rehabilitative Care - Inpatient and Home Care - How do we compare? (continued on back page)

7.

Studies have shown that patients are more likely to take their medications properly in the correct dosage and at the correct intervals if they are informed about the importance and purpose of the drugs. LMH Home Care nurses provide medication education to patients and their caregivers.

	LMH 2020	LMH 2021	LMH 2022	LMH Goal	
Home Care patients receiving medication education	95%	93%	94%	100%	

8.

Patients who have physical impairments due to illness, surgery, or injury may not recognize fall hazards in their homes. Items such as throw rugs, stairs without railings, extension cords across floors, and slippery bathtubs are particularly dangerous to recovering patients. The LMH Home Care staff offers a safety evaluation of the patient's home, as well as an assessment of the patient's own physical abilities in the home environment.

	LMH 2020	LMH 2021	LMH 2022	LMH Goal
Fall risk assessment completed for every Home Care patient	100%	100%	100%	100%

Data Footnotes: (1) Uniform Data System for Medical Rehabilitation Report (2) Press Ganey Associates, "Home Health Care Consumer Assessment of Healthcare Providers and Systems" (HHCAHPS) survey results (3) Press Ganey Associates, "Inpatient Rehabilitation Facility Consumer Assessment of Healthcare Providers and Systems" (IRFCAHPS) survey results

Check out our Quality Report Cards online at LMHealth.org.

Shoveling Snow Safely

Shoveling snow is a necessary task during winter to keep driveways and sidewalks clear for vehicles and pedestrians. Nationwide, snow shoveling is responsible for thousands of injuries and nearly 100 deaths each year. Cold weather can increase heart rate and blood pressure, which raises the risk of blood clots. Shoveling snow is a strenuous activity that can place strain on the heart, especially if a person has been sedentary for a long period of time. The following tips will help you to shovel snow safely and prevent injury:

• Lift with the legs and not the back

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- Shovel snow when it is fresh; melting and packed snow is more difficult to move
- Push the snow instead of lifting it
- Do not shovel after eating
- Do not work to the point of exhaustion

Call 911 immediately if you experience shortness of breath, pain in the chest, arms, back, neck, jaw, or stomach, a cold sweat, nausea, or lightheadedness. Individuals with a history of heart disease should consult with their physician or cardiologist before shoveling snow.



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