(MGH) Traumatic Brain Injury (TBI)

**Location** – Are you located on one floor or in several locations in the hospital?
- Primary floor = 14W
- TBIs May be off service on 12 east/west or in ICU and 18

**Population** – Describe in point form the characteristics of the patient population.
- TBI (MVA, Falls)

**Age range**
- Adult

**Impact of illness/injury**
- Restrictions in function, pain control issues, cognitive –behavioral issues
- Restrictions post-op (fractures, surgical limitations)

**Medications:** be aware of their indications as well as side effects affecting functions and precautions
- Sedatives
- Pain medications
- Blood thinners

**Role** – Describe the role of your service in point form.
- Swallowing Ax
- Functional Ax + assistance with d/c planning
- Cognitive appreciation and driving screen
- Positioning
- Treatment plan (acute/chronic/end stage),
- Continuity of care (rehab/convalescence/homecare/community/LTC/palliative)

**Team and Key Contacts** – Indicate if you work in a multidisciplinary team; who are the key players, staff doctors, consulting CNS’s and other specialists.
- Unit Coordinator: # 46401
- Head Nurse: 43378, spectra 43347
- Assistant Head Nurse: 43779 (spectra)
- OT: local 42378, 406 1579
- PT: pager: 514-406- 4087, local 42378
- SLP (stroke/TBI): ext: 42125 pager: 514-406-1154 and
- SLP (TBI) # 42349 and 514 406- 4963
- SW: #44145 and 44136 pager 514-406-4467
- Dietician: pager 514 406- 4467
- Neuropsych : 44192

**Rounds** – List the day(s), hours and location(s) of the clinical rounds for your service.
- Tuesday at 1:30pm and Friday at 11:30am in Conference room
- Trauma education rounds: Tuesday at 12:00 in conference room
Medical Tests – Describe in point form the principle/most frequent risk factors that you assess specifically related to your patient population.

- CT head, CTA,
- MRI head/spine,
- CXR

Assessments - Describe in point form the principle/most frequent forms that you complete specifically related to your patient population in addition to the psychosocial assessment.

- MVPT, TRAIL, MMSE/MOCA, GOAT, Bells, Albert’s test, line bisection
- MMT, 9HPT, Jamar

Resources - Describe in point form the principle/most frequent hospital and community resources that you allocate specifically related to your patient population.

- DSIE for rehab and outpatient follow up
- In-patient rehab at IRGLM, CMR or Jewish rehab hospital
- Outpatient follow up at Constance Lethbridge Center, Lucie Bruneau
- CLSC
- Link with TBI clinic for outpatient follow up

“Insider” Info – List any tips, cautions, fast-tracks, templates or lists that would help facilitate a quick-start for someone new to this service.

- TBI patients are identified through phone message to the PT/OT gym voice mail or on the unit board
- Neuropsych testing available for TBI patients
- Standing order for TBI screening and collective order for stroke client evaluation (on service)
- Be aware of skills/functions associated with different lobes of the brain