

## 2<sup>nd</sup> International Conference and Exhibition on **Physical Medicine & Rehabilitation**

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### **Multiple readmissions in acute care physical therapy rehabilitation of an elderly patient with comorbidities and a surgically repaired ankle fracture**

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**Background:** Ankle fractures result in 10% of all falls, are predominant among the elderly, and occur at an incident of 184 per 100,000 persons a year. Falls result in fractures that can lead to many complications and multiple hospital readmissions. Physical therapy, including discharge planning, may benefit a patient under these circumstances. This case study describes physical therapy of a patient who had multiple readmissions in the acute care setting.

**Case description:** The patient is an 80-year-old male who fell and sustained a right bimalleolar ankle fracture, which required surgical repair. His impairments included non-weight bearing on the right lower extremity, poor balance, pain, decreased range of motion and joint mobility, and difficulties with ambulation, bed mobility and transfers. Physical therapy intervention consisted of bed mobility, gait training, and lower extremity strengthening one to two times per day for up to one-hour treatments over four episodes of care throughout a five-week time frame.

**Discussion:** Multiple factors influenced this patient's extent of episode and affected his readmission rate. Due to the patient's comorbidities and refusal to follow medical advice, he had multiple readmissions caused from sepsis, cellulitis, and a fall, which all resulted in a poor outcome. This may have been a reflection of inadequate management of the rehabilitation team and the patient's adamant refusal to follow medical advice.

**Conclusion:** This case illustrates the course of events of readmissions in acute care. The patient's comorbidities may have influenced his request to discharge home following his hospital stay and may have affected his outcome and readmission episodes. The rehabilitation team should encourage communication between health care providers, create a safe and effective discharge plan, and educate patients.

#### **Biography**

Trent Jackman is an Assistant Professor in the physical therapy program at Idaho State University, Pocatello, Idaho. He is an academic coordinator of clinical education. His clinical expertise is in the area of Clinical education, professionalism, ethics, and ergonomics.

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