



Long-Term Acute Care Hospitals Admission Criteria

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