WHAT TO EXPECT FROM STROKE REHABILITATION

The goal of stroke rehabilitation is to restore as much independence as possible by improving physical, mental and emotional functions. Rehabilitation should start in the hospital as soon as possible after the stroke and should be continued after release from the hospital.

Basic Stroke Rehab

These essential therapies help address the needs of most stroke survivors.

- **MOTOR SKILLS**: training to improve mobility and ability to do daily tasks
- **STRENGTH AND COORDINATION**: developing a post-stroke exercise program
- **COGNITIVE**: access to cognitive/engagement activities (books, games, computer)
- **SPEECH**: speech therapy if stroke caused difficulty speaking or swallowing
- **VISION**: eye exercises if stroke caused a loss of vision
- **BALANCE**: vestibular rehab for those with a high fall risk or poor balance
- **ADAPTING**: strategies to help survivors function within a “new normal”

Personalized Rehab for You

Additional services may be available to help you relearn specific skills.

- **SELF-CARE**: feeding, grooming, bathing, toileting and dressing
- **MOBILITY**: transferring from chair to bed/bed to chair, walking or self-propelling a wheelchair
- **SPEECH**: communicating and language therapy
- **COGNITIVE**: memory recall and problem solving
- **SOCIAL**: interacting with other people
- **WORK**: vocational evaluation, driver’s training and programs to improve your physical and emotional stamina so you can go back to work

Talk to your health care team to help determine which option is best for you and your specific needs.

stroke.org/rehab
Considering stroke rehabilitation? Know your options. There are many different settings for stroke rehab programs. Talk to your health care team to help determine which option is best for you and your specific needs.

INPATIENT REHABILITATION FACILITIES (IRFs):
May be part of a hospital or free-standing facility providing services for stroke survivors who need intensive rehabilitation (at least three hours a day/five days a week). AHA/ASA guidelines recommend IRF care for those who can tolerate intensive rehab.

SKILLED NURSING FACILITIES (SNFs):
Available for stroke survivors who are not well enough to be discharged directly home and can’t tolerate the more intensive therapy provided by an IRF.

LONG-TERM CARE FACILITIES:
Provide long-term basic nursing care and assistance for people who need help with everyday activities, such as dressing or bathing.

LONG-TERM ACUTE CARE HOSPITALS:
For those with complex medical needs (such as those on a ventilator) due to a combination of acute and chronic conditions.

HOME OR OUTPATIENT STROKE REHABILITATION:
Can be provided by home health care agencies or through outpatient offices.

stroke.org/rehab