BRAIN INJURY ASSOCIATION OF NORTH CAROLINA

SERVICE DESCRIPTIONS

MEDICAL SERVICES

The wide range of severity might mean accessing different parts of medical services after a brain injury. In mild injuries, the individual may not experience immediate symptoms - making it difficult to determine when or if medical care is necessary. However, to sooner access to care, the better, as the severity of the injury and the time elapsed impacts the recovery process. The longer TBI is left untreated, the more potential for long-term complications. If you've experienced a head injury, seek medical attention. No matter the severity of the head injury, any sudden trauma can change how our brains function.

Emergency Department (ED)

The emergency department is often the first line of medical care, particularly for those experiencing mild injuries or concussions. These injuries may or may not result in a loss of consciousness and show up on traditional brain scans done in emergency settings to assess for threats to life (i.e. CT to check for bleeding or swelling). So with "negative" scans and no severe symptoms, they may suggest no treatment other than rest and over-the-counter pain relievers to treat headache. They will likely refer you to your doctor for follow-up treatment. However, a person with a mild traumatic brain injury usually needs to be monitored closely at home for any persistent, worsening or new symptoms. Relative rest (meaning limits on physical or mental activities that make things worse) is usually recommended for the first few days then return to normal routines gradually.

Immediate Care Unit (ICU)

Emergency care for moderate to severe traumatic brain injuries focuses on medical stabilization - making sure the person has enough oxygen and an adequate blood supply, maintaining blood pressure, addressing additional serious injury, and preventing any further injury to the head or neck. Additional treatments in the emergency room or intensive care unit of a hospital will focus on minimizing secondary damage due to inflammation, bleeding or reduced oxygen supply to the brain.

Step-Down Unit (SDU)

Once medically stable, an individual may be moved to the Step Down Unit (SDU). SDUs provide an intermediate or transitional level of care. Likely the individual will receive slightly more rehabilitation (perhaps an hour or so more per day) than they did in the ICU, but not as much as they would in inpatient rehabilitation settings.

Inpatient Rehabilitation

Inpatient rehabilitation is provided in a special unit of a trauma hospital, a rehabilitation hospital, or another inpatient setting. Services typically involve 24-hour rehabilitation nursing and the person must be able to participate in three hours of therapy per day with a team of brain injury health professionals to regain activities of daily living.

Outpatient Rehabilitation

Outpatient or community-based therapies can help individuals with mild, moderate, or severe injuries continue treatment, maintain, and enhance recovery. These therapies generally focus on short and long-term goals to increase independence related to movement, speech, thinking, swallowing, recreation, and more.

Primary Care Physician (PCP)

A General Physician or Primary Care Physician is a health care professional who practices general medicine, often seen for a routine checkup or non-emergency medical care as well as advice for establishing a healthy lifestyle (such as addressing weight concerns, exercise routines, proper medication or supplements). Physician Assistants (PAs) or Nurse Practitioners (NPs) can also fill this role. Annual visits to a general doctor can help prevent serious disease and disorders.

Federally Qualified Health Center

Federally Qualified Health Centers (FQHCs) are outpatient clinics that qualify for specific reimbursement systems under Medicare and Medicaid, typically available in rural areas.

RESOURCES & REFERENCES

- Brain Injury Association of America: www.biausa.org
- Brainline: www.brainline.org
- CDC: www.cdc.gov/traumaticbraininjury
- Model Systems: msktc.org/tbi/model-system-centers

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