

METHODS

- Using the medical records of patients treated for COVID-19 related care following discharge from short-term acute care, a single-center retrospective analysis was conducted at Gaylord Specialty Healthcare, a long-term acute care hospital (LTACH) in the Northeastern United States.
- Study data was collected from March 19, 2020 through August 14, 2020.
- A reference cohort of 170 patients treated at the facility the three months prior (December 1, 2019 through February 29, 2020), was used to compare patient demographics and outcomes.

RESULTS

- There were 127 admissions and 118 discharges by the data cut-off. The patient mean (\pm SD) length of stay was 25.5 (\pm 13.0) days.
- Mean patient age was 63 years, 64.1% were male, and 29.9% of patients tested-positive for SARS-CoV-2 infection at admission. 40/51 (83.3%) patients admitted as non-ambulatory were ambulatory at discharge.

- Gait distance increased an average of 217.4 feet from admission to discharge, a significantly greater increase than the reference cohort of 146.3 feet.
- 93.8% (15/16) of patients being mechanically ventilated at admission were weaned before discharge with a mean wean time of 11.3 days.
- 74.7% (56/75) of patients admitted with a restricted diet were discharged on a regular diet.

Patients with Covid-19 ambulated greater distances than a comparison cohort, and weaned from ventilation and improved swallowing at a high rate of success.

CONCLUSION

Through coordinated care and rehabilitation, the majority of patients treated at Gaylord Specialty Healthcare for severe COVID-19, and related complications, showed significant improvement, including improvements in functional ability, cognitive communication, and pulmonary measures. Together, these data suggest patients in the post-acute phase of COVID-19 benefit from structured rehabilitation.

