PennState Health
Rehabilitation Hospital
In Partnership with Select Medical

Scope of Services

Penn State Health Rehabilitation Hospital is committed to providing the highest level of safe, quality care to all those we serve. Our teams of medical rehabilitation specialists deliver carefully coordinated, comprehensive treatment to advance individual recovery. We embrace industry-recognized standards of excellence and strive for continuous quality improvement to optimize patient outcomes. These efforts have helped us earn the trust of patients, families and colleagues across our communities.

Our 98-bed adult hospital, which is located in Hummelstown, in the heart of central Pennsylvania, offers highly integrated programs of care to treat patients' complex medical rehabilitation needs. Penn State Health Rehabilitation Hospital is accredited by The Joint Commission. Additionally, Penn State Health Rehabilitation is CARF accredited with specialty programs in stroke, spinal cord and brain injury.

Who we serve

Patient profile

Comprehensive inpatient rehabilitation services are provided to adults 18 years and older who have experienced an injury or illness that resulted in the loss of function (abilities) in activities of daily living (ADLs), mobility, cognition and/or communication.

Diagnoses treated

Our patients' diagnoses include, but are not limited to stroke, brain injury, spinal cord injury, neurological diseases (e.g., multiple sclerosis, ALS, polyneuropathy, Guillain-Barré syndrome, motor neuron disease), amputation, orthopedic injuries, including complex fractures and joint replacement, major multiple trauma, cardiac conditions and cancer.

Admission guidelines

To be considered for admission, patients must be medically stable yet still require care by rehabilitation physicians and nurses. They must also have physical and/or functional needs that require highly-coordinated physical, occupational and/or speech therapies and the capacity to benefit from such services.

Patients are admitted without regard to race, color, religion, ethnicity, gender identity/expression, sexual orientation, marital status, mental or physical disability, veteran or military status, creed and/or national origin. Our team works to ensure that individualized care is based on each patient's cultural and language preferences, gender/gender identity and ability to learn.

Patients who do not meet our hospital's admission criteria include those who: are under the age of 18; present with behavioral limitations that pose an imminent risk to themselves or others or have medical needs beyond the scope of services offered.

Referrals

Referrals for admission are accepted from private physicians, hospitals, other post-acute providers, insurance companies and agencies serving persons with disabilities. Patients may be admitted from a hospital, surgery center, clinic, skilled nursing and long-term care facilities, as well as from home.

Insurance

Our hospital participates with Medicare, Medicaid, V.A. and most managed care plans, as well as workers' compensation, no-fault and other insurance providers. Fee schedules are available upon request.

Assessing patient needs

All patients are evaluated prior to admission to determine their potential to participate in and benefit from inpatient rehabilitation. This includes a review of their medical, physical and cognitive condition, previous and current levels of function, and psychosocial and cultural background.

Once admitted, patients are assessed by the rehabilitation team – including a physiatrist (a doctor specializing in physical medicine and rehabilitation); nurses; physical, occupational and, if indicated, speech therapists; dietitians and case managers are assigned to patients during their stay. The interdisciplinary team works with the patient to establish individual, specific goals and tailor treatment to address impairments in mobility, self-care, speech, cognition and other areas. This plan is documented within the patient's medical record and serves to guide care delivery and monitor improvement and is modified as needed.

Special needs

Our hospital also accommodates patients requiring special care needs, including colostomy care, gastrointestinal (PEG) feeding tubes, halo devices and external fixators, indwelling catheter, intravenous lines including central lines (e.g., PICC lines, Hickman and Broviac catheters), ongoing IV therapy, LVADs/ Lifevest, nasogastric (NG) tubes for feeding and hydration, negative pressure wound therapy, orthotic and prosthetic prescription and training, dialysis, paracentesis, and tracheostomy tube.

Provision of care

Hours of service

Inpatient care is provided seven days per week including 24-hour nursing care. Physician services, therapy services including physical, occupational and speech therapies are provided as prescribed by the physician team. Respiratory therapy, laboratory and radiology services are available and utilized as ordered by the medical providers. Pharmacy services are on-site and available seven days per week. Physical, occupational and speech therapies are available Monday through Sunday from 7 a.m. to 6 p.m. Patients' specific schedules are established with the patient by the care team. Outpatient services are generally offered Monday through Friday between 8 a.m. and 6 p.m. and Day Neuro program between 9 a.m. and 5 p.m.

Rehabilitation team

The rehabilitation team is led by a physiatrist who is a board-certified physician specializing in physical medicine and rehabilitation. The interdisciplinary team also includes rehabilitation nurses, physical and occupational therapists, speech language pathologists, recreational therapy; respiratory therapy, dietitians, pharmacists, case managers/social workers, and other clinical, support and administrative staff.

A majority of our staff have advanced degrees and specialty certifications. Some examples of specialty training includes certified rehabilitation registered nurse (CRRN); board certified physical therapist and occupational therapists.

Staffing

Staffing is based on census, diagnosis, severity of injury/illness and intensity of services required by each patient, as well as by state practice guidelines for each discipline. Contract staff is available for coverage as needed.

Therapy schedules

The rehabilitation team collaborates with each patient to establish a treatment schedule. Patients are expected to participate in three hours of physical, occupational and/or speech therapy per day, five days per week. If unable to tolerate these hours due to certain medical issues (e.g., chemotherapy, radiation, dialysis) or other extenuating circumstances, they may engage in 15 hours of therapy over a seven-day period. On average, our patients participate in 3 to 4 hours of therapy each day Monday through Friday and less on Saturday and Sunday.

Scope of treatment

We offer a wide range of evidenced-based treatments, advanced techniques and innovative technologies to help rebuild strength and skills, restore function and mobility, and maximize independence. This carefully coordinated, individualized approach guides patients toward their goals, including a safe and timely discharge to home or the next appropriate level of care.

Additional services

To best meet patients' complex needs, our hospitals offer additional or ancillary services, including but is not limited to: nutritional guidance and dietary services, pharmacy services, respiratory therapy, recreational therapy, diagnostic radiology, Fiber optic Endoscopic Evaluation of Swallow, laboratory services, neuropsychology services when indicated. Chaplaincy services/pastoral care are arranged upon request.

Also available are prosthetic and orthotic services, wheelchair and mobility evaluations, and vision assessments for patients with neuro-visual impairments. The interdisciplinary rehabilitation team helps identify the need and arrange for these services.

Practice guidelines

Our hospital follows the standards and guidelines established by federal, state, local and industry agencies, including the Centers for Medicare & Medicaid Services (CMS), Commission on Accreditation of Rehabilitation Facilities (CARF), The Joint Commission and national boards/associations of medicine, nursing, therapy, pharmacy and others.

Evaluating and documenting patient progress

Ongoing assessment of a patient's medical condition, progress and changing rehabilitation needs is documented through the individualized, interdisciplinary plan of care, progress notes, team conference report, discharge summary and the 90-day post-discharge follow-up call.

Patient Feedback

We gather patient feedback through patient/family conferences, education and training sessions, leadership rounding, patient satisfaction questionnaires (e-Rehab survey), 90-day post-discharge follow-up call and both inpatient and outpatient support groups. Also in place is a complaint/grievance process should any concerns arise.

Discharge planning

Returning a patient to home and/or the community is the goal of rehabilitation. Our case managers work closely with the patient, family and rehabilitation team to determine the most appropriate discharge setting. The planning process begins at the time of admission and continues throughout the patient's stay with Care Partner meetings,

multiple hands-on family training sessions and individual activities that support the successful transition from hospital to home.

As needed, therapists may provide an on-site or virtual home assessment or complete structured community outings to recommend modifications or special equipment that may help to ensure a safe discharge. The team will also assist in identifying vendors and other resources.

Our specialized programs and services

The guiding philosophy of all our programs and services is to provide comprehensive, compassionate care and advanced treatment to individuals with complex medical rehabilitation needs from the time of injury or illness through long-term community follow-up. Our goal is to maximize each patient's medical, physical, psychological, behavioral, cognitive, social, recreational and vocational potential and quality of life.

Spinal cord program

Our hospitals' spinal cord injury (SCI) program provides a highly structured, carefully coordinated system of care for persons with SCI. This includes individuals with spinal dysfunction due to traumatic injury resulting from motor vehicle crashes, falls, acts of violence, sports or recreational activities, etc., or from a non-traumatic disease, such as tumors, infection, cervical stenosis with myelopathy, or surgery. Inclusion criteria includes complete spinal cord injuries from C5 level and below, as well as incomplete spinal cord injuries of all levels, may be considered for acceptance.

Additional patient populations, including those with multiple sclerosis, Guillain-Barré syndrome, transverse myelitis and motor neuron disease, may also be considered for admission.

We provide in-house physician coverage. We provide 24-hour rehabilitation nursing. We provide evidence-based therapies, advanced technologies, family training, education and support to address each patients' needs, including bladder, bowel and respiratory function, mobility, skin integrity, nutrition, cognition, emotional, behavioral or sexual concerns and other issues/co-morbidities.

This comprehensive approach to SCI rehabilitation, provides a strong continuum of care from inpatient rehabilitation through our outpatient services to community re-integration. We partner with national organizations for peer mentorship opportunities.

Stroke program

Our stroke rehabilitation program focuses on the often complex needs of individuals who have experienced an ischemic stroke (when blood flow to the brain is blocked), hemorrhagic stroke (bleeding in the brain), or transient ischemic attack (TIA or a mini-stroke).

In addition to medical and nursing oversight, our experienced team of stroke/neuro rehabilitation specialists provide a range of physical, occupational, speech and cognitive therapies to improve recovery. This includes hands-on treatment and advanced technologies, such as Fiberoptic Endoscopic Evaluation of Swallow (FEES) follow up electrical stimulation to treat swallowing disorders; body-weight supported treadmill training (BWSTT) to improve gait performance and mobility; robotic therapies to help build new neural pathways; and prism adaptation treatment to address visual impairments.

Brain injury program

The Brain Injury (BI) Program provides a continuum of services from inpatient acute rehabilitation to outpatient services to long-term follow up. Individuals may be admitted to this program with an acquired BI including, but not limited to, traumatic, non-traumatic or anoxic BI, brain tumor or aneurysm.

Patients in a coma or persistent vegetative state who do not demonstrate a purposeful response to their surroundings are not appropriate candidates for admission.

Inpatient rehabilitation focuses on restoring the individual’s strengths, skills and functional independence.

In addition, we provide comprehensive post-acute community re-entry services within our Outpatient Neuro Day program which helps to prepare persons with acquired brain injury to return to independent living and productive activity at home and/or in the community.

We also serve as an important resource to brain injury providers, organizations and other entities both in our local communities and across the country.

Amputation program

Our hospital’s comprehensive amputee rehabilitation program focuses on the post-surgical as well as prosthetic and outpatient/community reintegration phases of recovery for individuals with limb loss. This holistic, interdisciplinary approach assures proper wound care and limb management; increases an individual's strength, coordination and endurance and decreases pain; provides the expert fitting and custom-manufacture of a prosthesis to meet personal lifestyle needs; trains individuals on the use and maintenance of their device; helps to avoid secondary complications and facilitates the transition to life ahead.

Working with the patient and family to address any needs or concerns, the amputee rehabilitation team will also introduce advances in prosthetic design, make adjustments to current devices, offer guidance to meet changing lifestyle needs and provide access to a variety of resources.

In addition to support groups, our Peer Visitor Program, developed in cooperation with the national Amputee Coalition, brings together patients and families with specially trained, certified amputee volunteers for peer-to-peer mentoring.

Individuals with upper or lower limb loss due to a traumatic injury or surgery resulting from vascular disease, diabetes, cancer, infection, excessive tissue damage, neuropathies or other conditions may be admitted to this program.

Orthopedic program

Individuals who have undergone joint replacement, experienced a musculoskeletal injury, sustained bone trauma or have been diagnosed with a degenerative joint disease may be candidates for this specialized orthopedic rehabilitation program. Treatment is tailored to individual needs to build strength and endurance, restore physical function and mobility, minimize pain and avoid complications.

Among the range of treatment offered are electrical stimulation, treadmill training, assistive equipment and technologies, advanced pain management, including pharmacological intervention and alternative treatment, such therapeutic taping, as appropriate.

Neurological program

Our hospital's neuro rehabilitation program offers a coordinated, interdisciplinary continuum of inpatient through outpatient care for individuals with multiple sclerosis (MS), Guillain-Barré syndrome, critical illness myopathy and other neurological diseases. Treatment is tailored to address acute or changing needs related to balance, strength, endurance, mobility cognition, communication, swallowing, bowel/bladder function, vision, self-care and participation in activities of daily living.

The rehabilitation team includes LSVT Big and Loud and PT neuro certified specialists, psychologists, wheelchair seating and assistive technology practitioners through contracted vendors and cognitive rehabilitation specialists. Patients may also benefit from the hospital's support groups and community integration activities.

Medical complex program

Our hospital provides an interdisciplinary program of care to meet the rehabilitation needs of individuals with organ transplantation, infections, pulmonary disease, cancer, post-COVID issues and other complex medical issues. The program addresses the scope of a patient's needs, including strength, endurance and mobility; functional/daily living activities skills; cognition; respiratory, speech and swallowing issues; and pain management.

Cardiac recovery program

The cardiac recovery program is an inpatient, acute rehabilitation level of for individuals who have undergone recent cardiac surgery, including coronary artery bypass, valve replacement, aortic aneurysm repair, LVAD placement or heart transplant. It is designed to help patients manage the healing process and regain the strength, skills and strategies to return home safely. An interdisciplinary team of medical rehabilitation specialists, as well as consulting cardiologists, pulmonologists and others as needed, coordinate care and provide the education and support to patients and families.

Revised 08/14/2025