The team at The Johns Hopkins Hospital’s Comprehensive Integrated Inpatient Rehabilitation Program (CIIRP) cares for individuals suffering disability following brain injury, including those with subdural hematoma, subarachnoid hemorrhage, ischemic and hemorrhagic stroke, brain neoplasm, hypoxic brain injury and brain trauma. The program has a team of rehabilitation and neurorehabilitation psychologists, physical medicine and rehabilitation physicians (physiatrists), physical and occupational therapists, speech-language pathologists, social workers, rehabilitation nurses and nursing assistants.

The team is able to provide intensive rehabilitation, medical management and guidance through the continuum of care for patients with middle to moderate cognitive dysfunction following brain injury or illness.

The program is particularly well suited for individuals who:

- Need help with mobility and balance
- Need help with activities of daily living
- Need help with memory and thinking problems
- Need help with swallowing and communication problems
- Are able to follow directions and have the ability to learn and improve

Patients should be generally medically stable and able to participate in three hours of combined physical therapy with occupational therapy and/or speech-language pathology treatment five to seven days a week, or 15 hours over a seven-day period; meet their inpatient rehabilitation program goals in a reasonable time frame; and have a viable discharge plan. Patients with significant agitation or other severe behavioral problems following brain injury are not appropriate for The Johns Hopkins Hospital’s CIIRP.

*These criteria roughly correspond to Level VI of the Rancho Los Amigos Scale.