

*Indiana State Department of Health-Indiana Rehabilitation Registry*  
*941 Incidents Statewide*  
*Data from September 2013 - September 2014*

**Comments**

-Facility Names have been replaced with numbers for formatting purposes. Please reference the numbers below to identify your facility.

-1=Franciscan St. Elizabeth Health Acute Inpatient Rehab - Central.

-2=Community Health Network (Rehab).

-3=Community Howard - West Campus Speciality Hospital (Rehab).

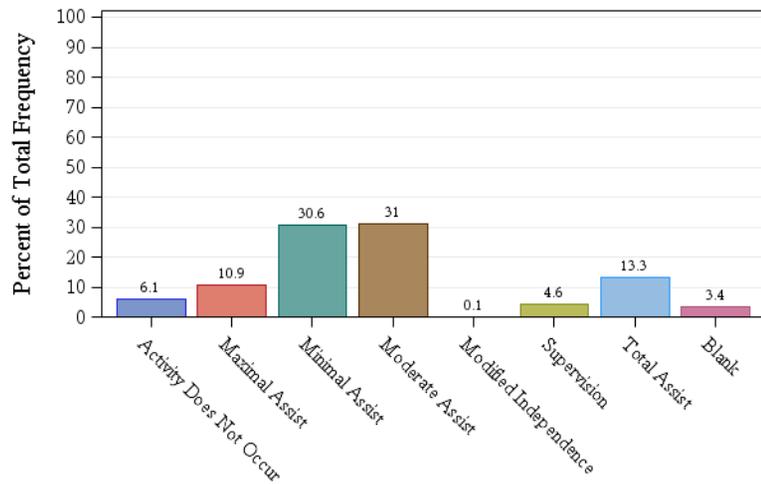
-4=ImageTrend Facility.

-5=Rehabilitation Hospital of Fort Wayne.

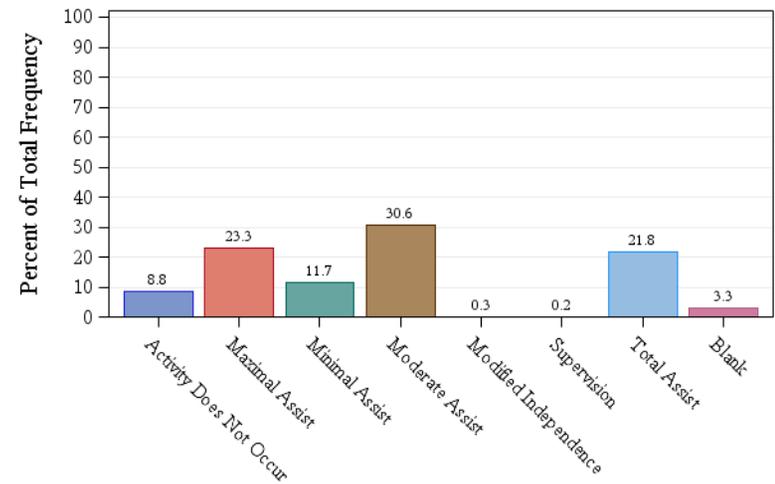
-6=Rehabilitation Hospital of Indiana.

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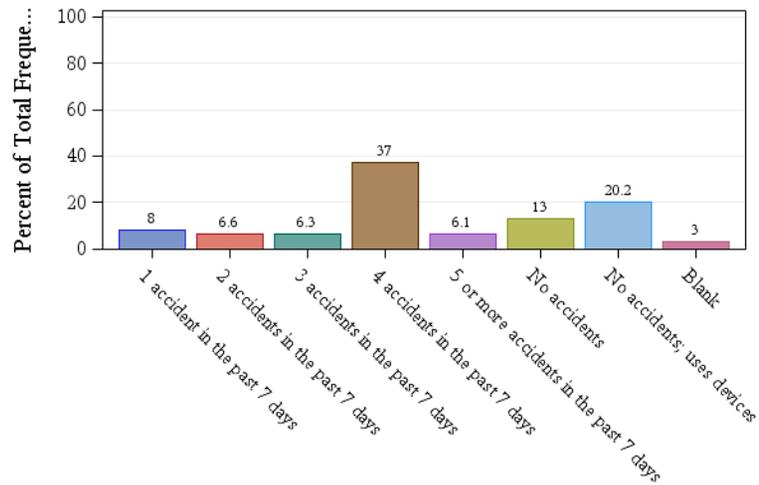
**Admission - Bathing**



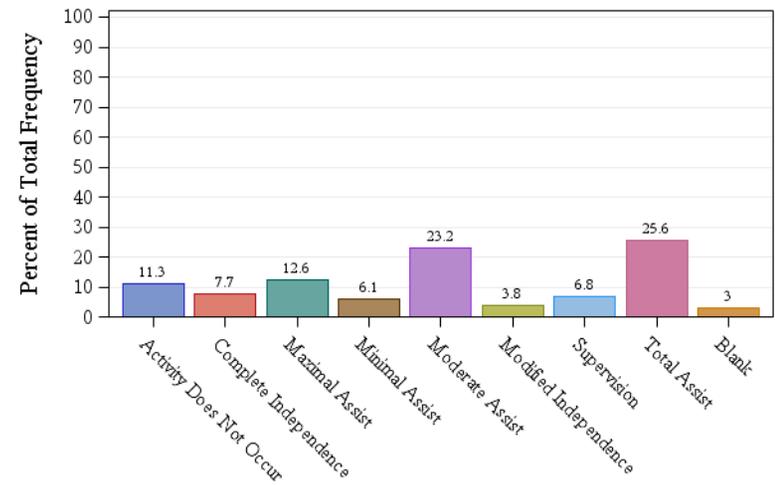
**Admission - Bed to Chair**



**Admission - Bladder Frequency of Accidents**

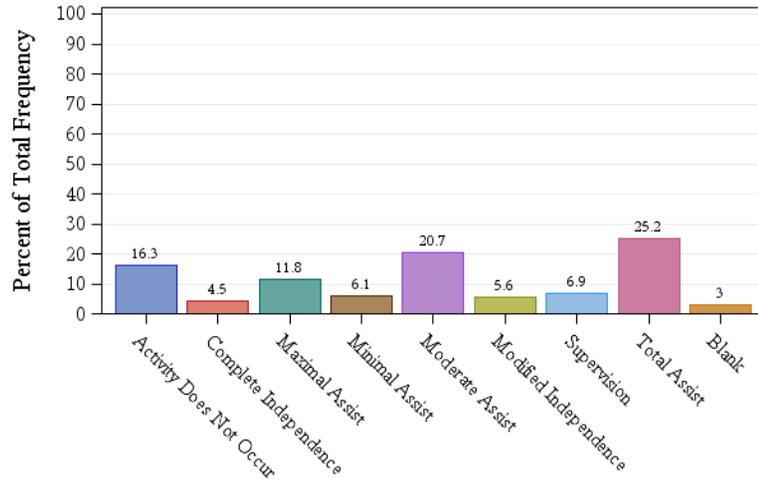


**Admission - Bladder Level of Assistance**

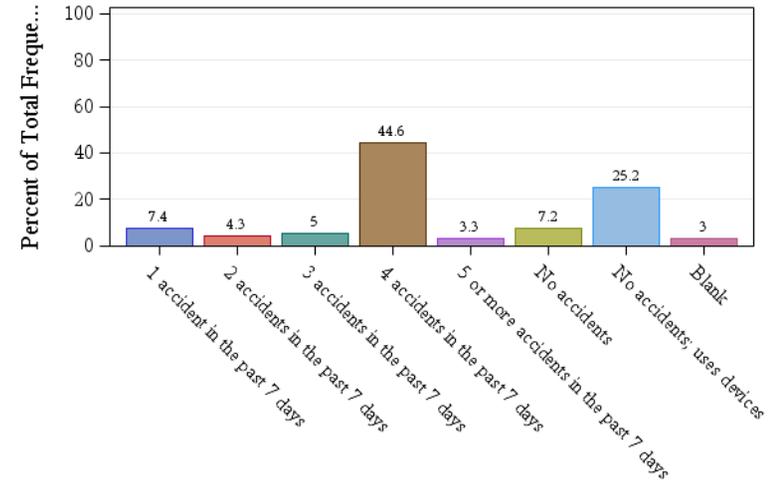


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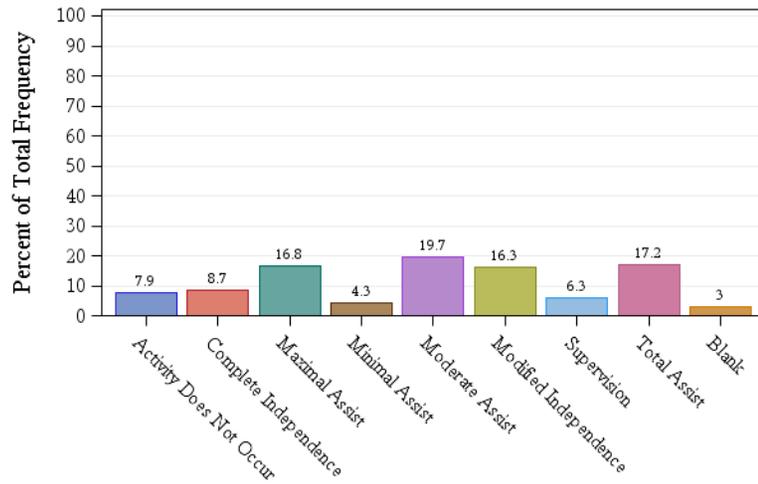
**Admission - Bladder Management**



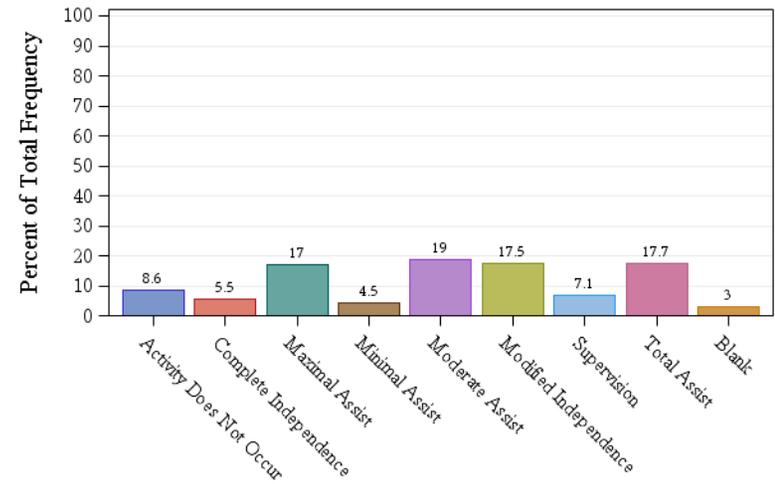
**Admission - Bowel Frequency of Accidents**



**Admission - Bowel Level of Assistance**

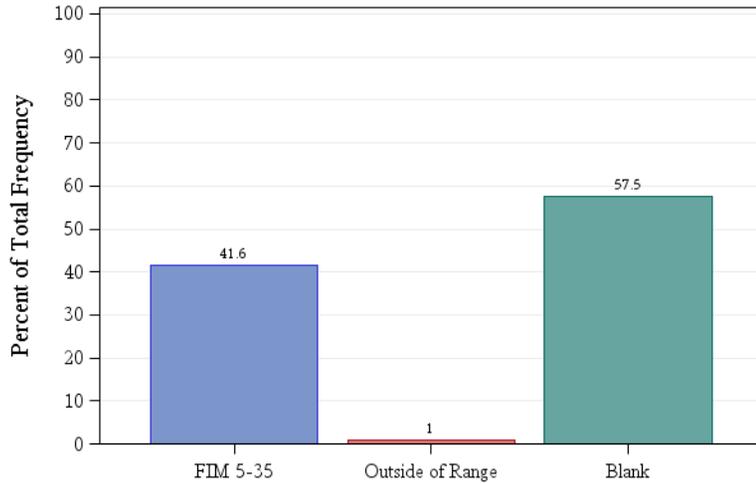


**Admission - Bowel Management**

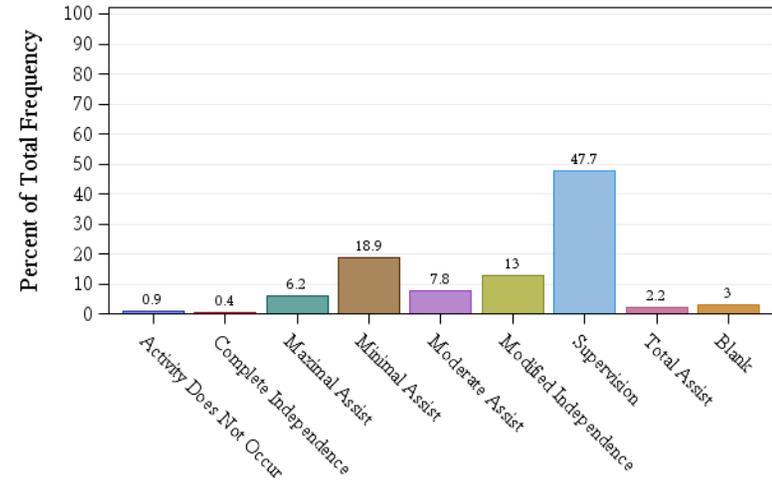


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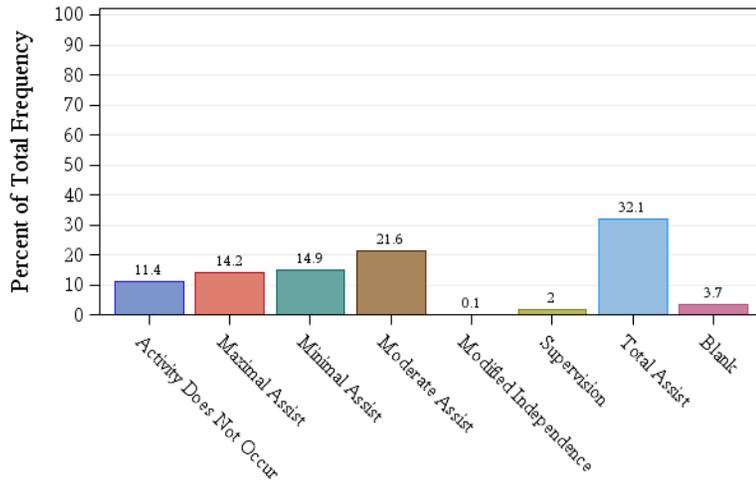
**Admission - Cognitive FIM Score**



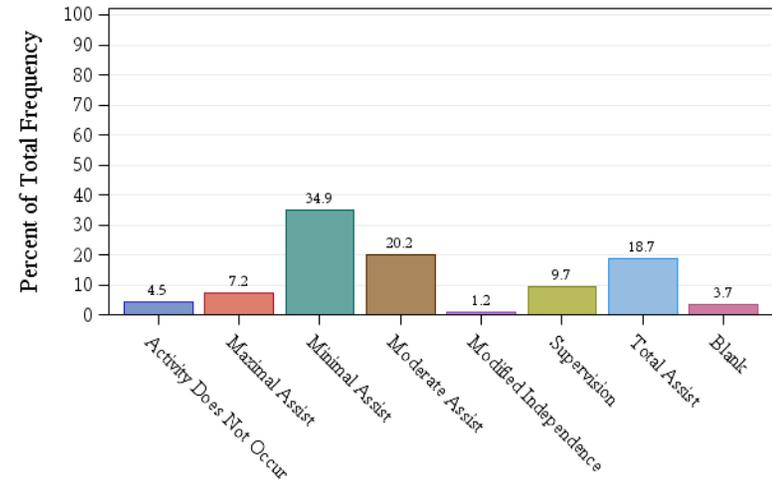
**Admission - Comprehension**



**Admission - Dressing Lower Body**

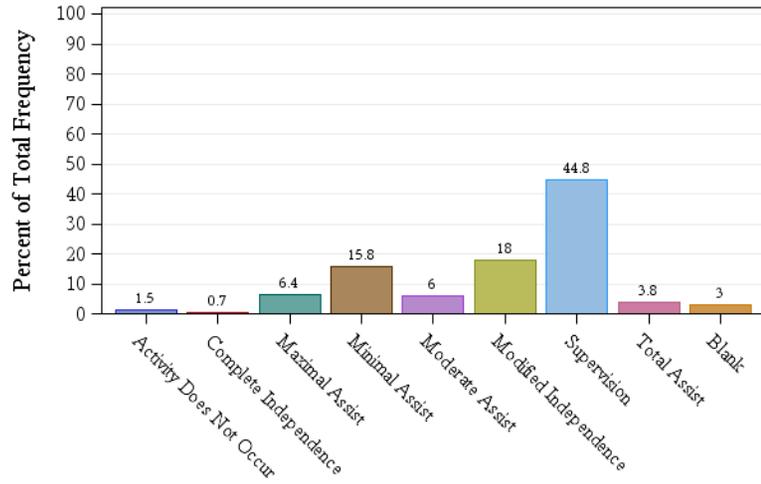


**Admission - Dressing Upper Body**

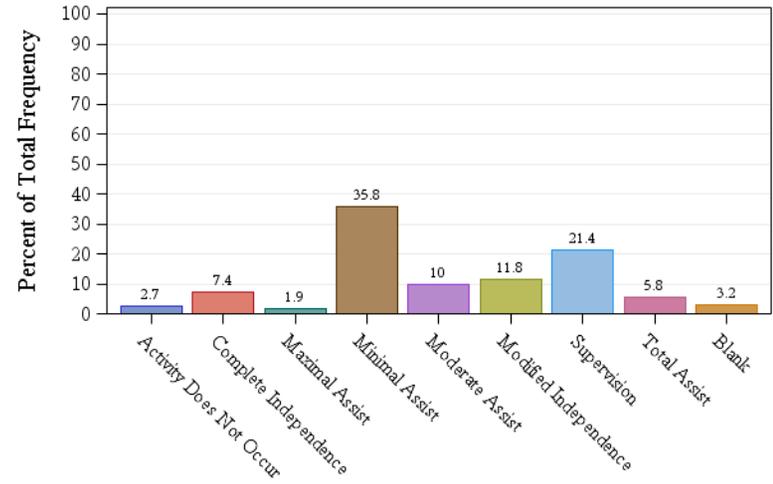


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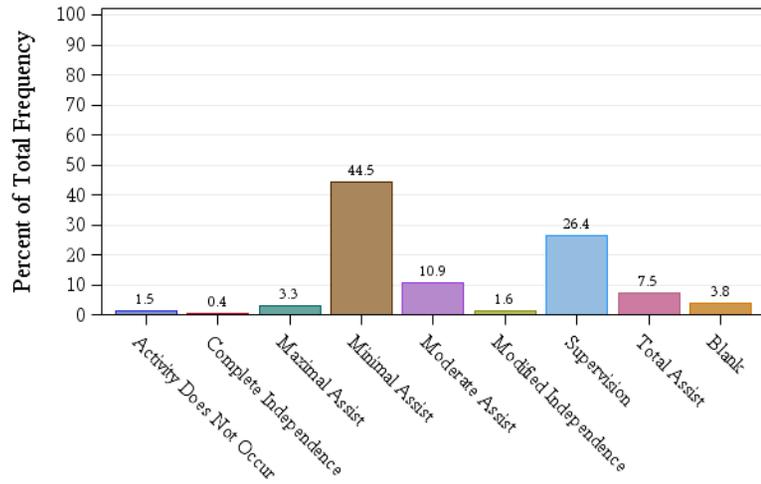
**Admission - Expression**



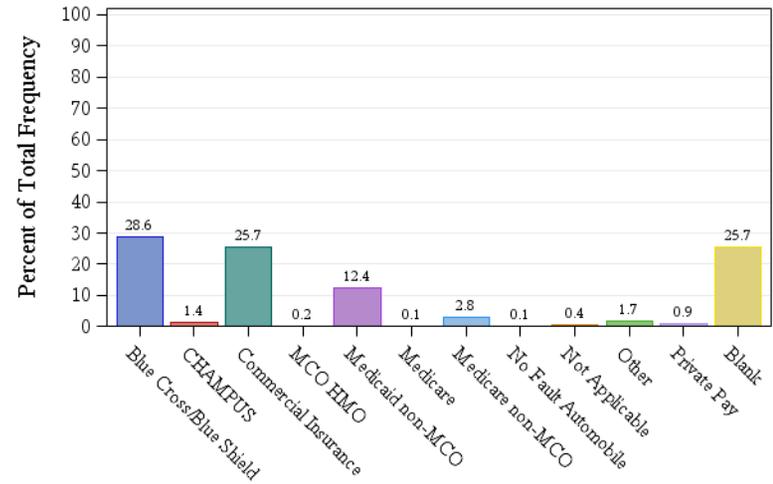
**Admission - Feeding**



**Admission - Grooming**

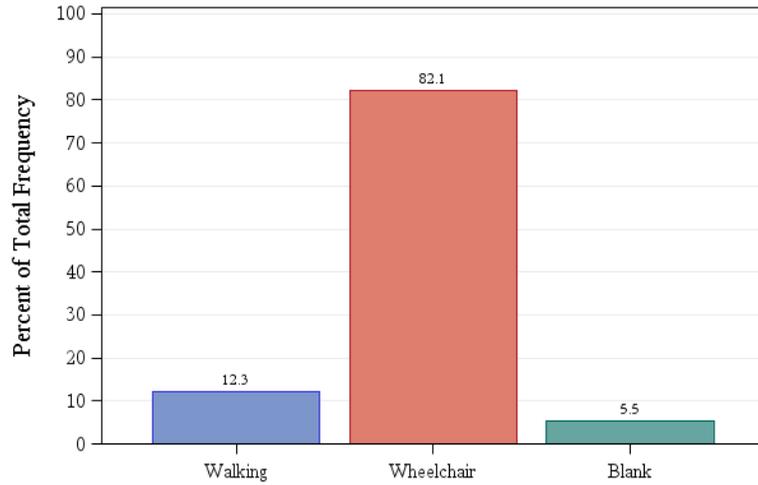


**Secondary Billing Info**

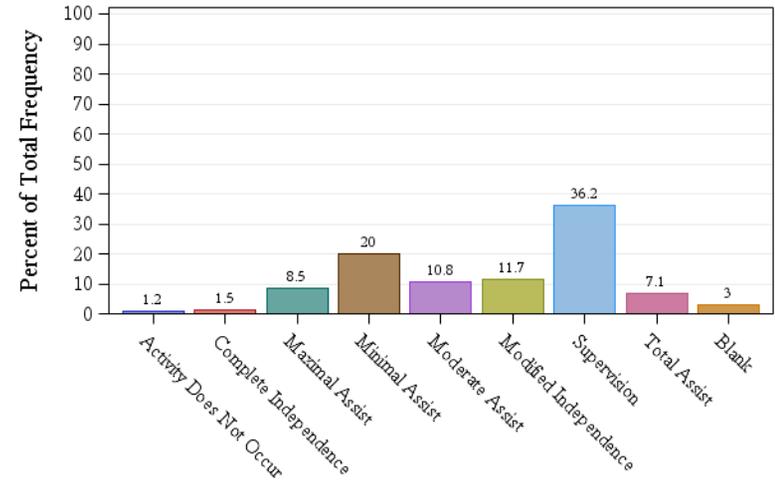


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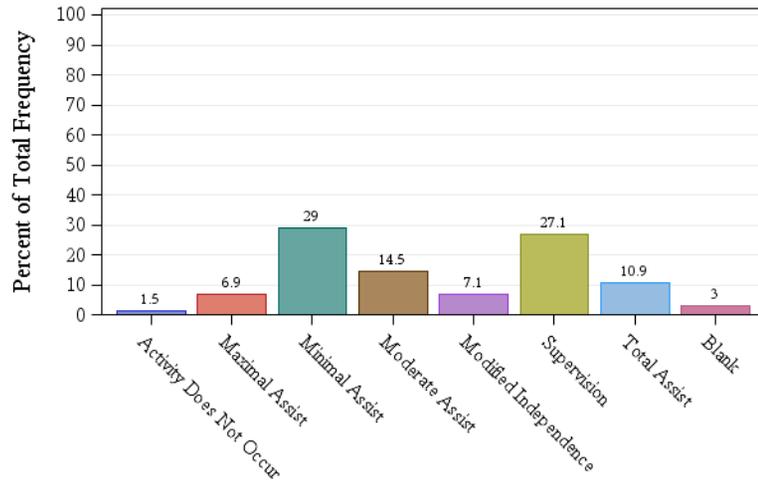
**Admission - Locomotion Mode**



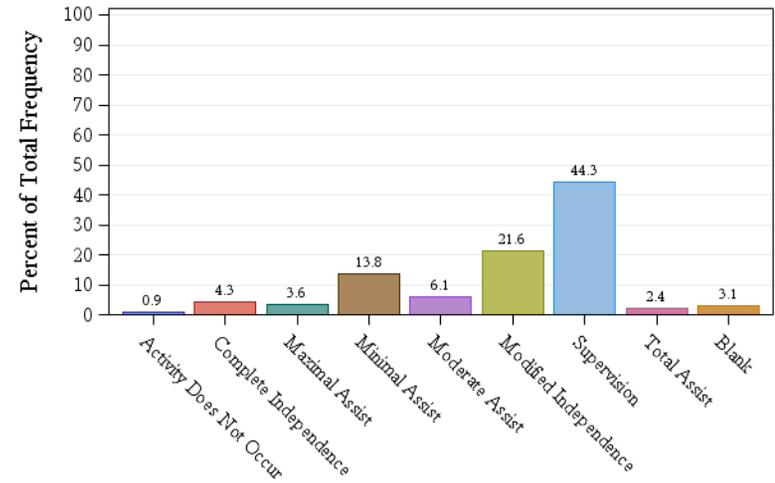
**Admission - Memory**



**Admission - Problem Solving**

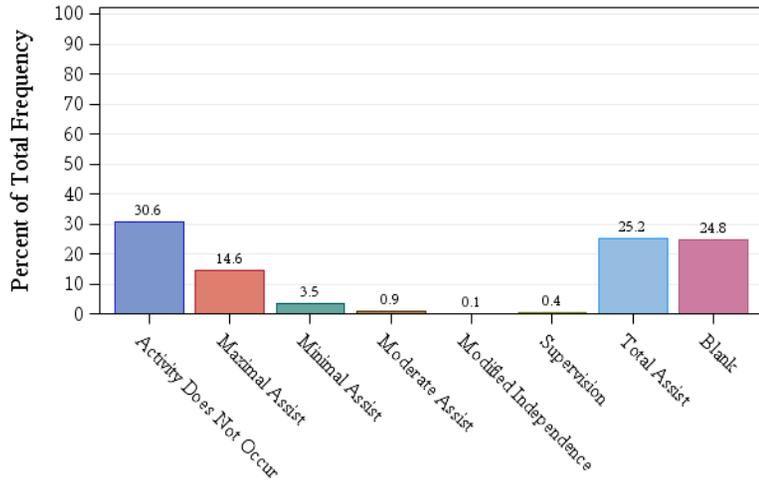


**Admission - Social Interaction**

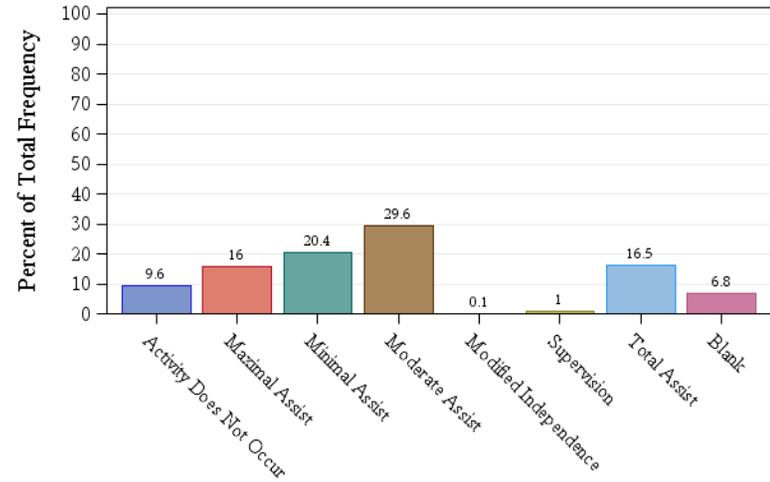


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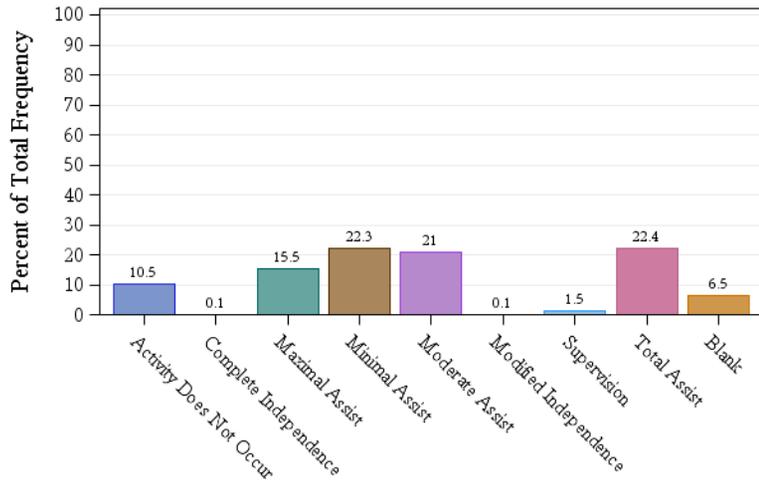
**Admission - Stairs**



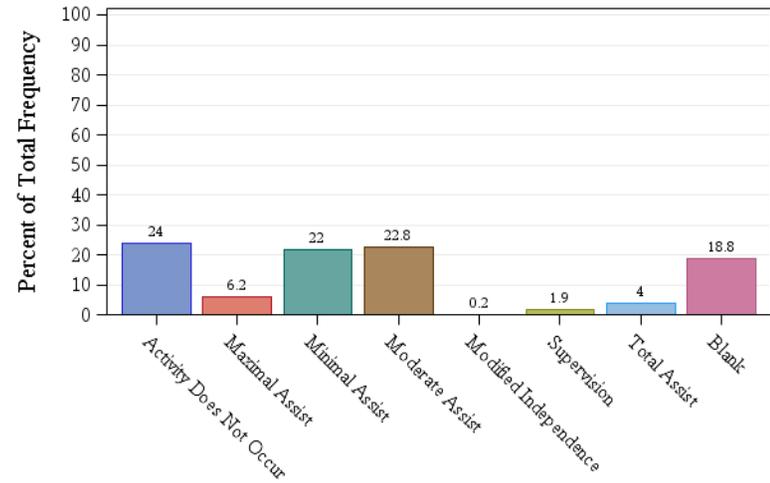
**Admission - Toilet Transfers**



**Admission - Toileting**

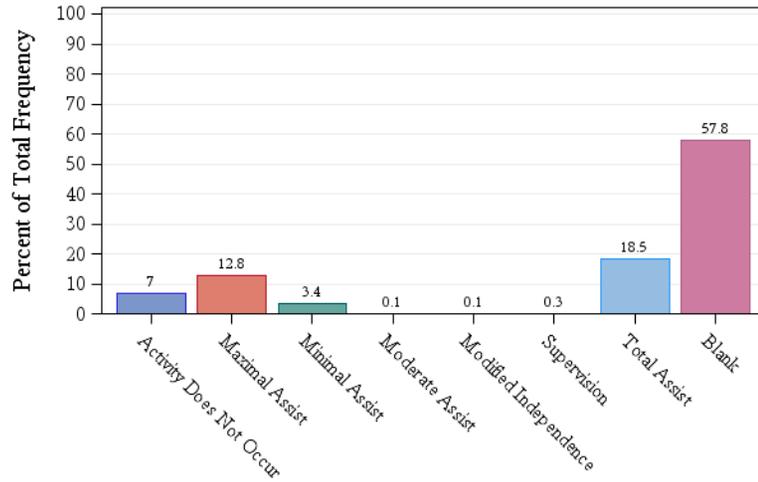


**Admission - Tub or Shower**

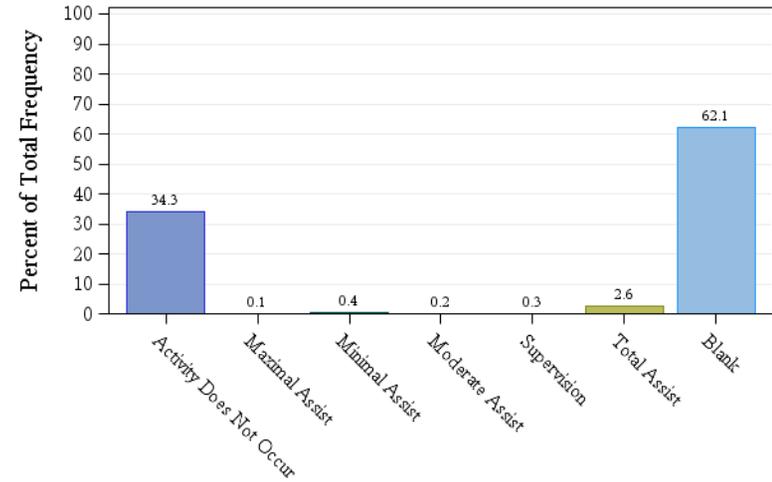


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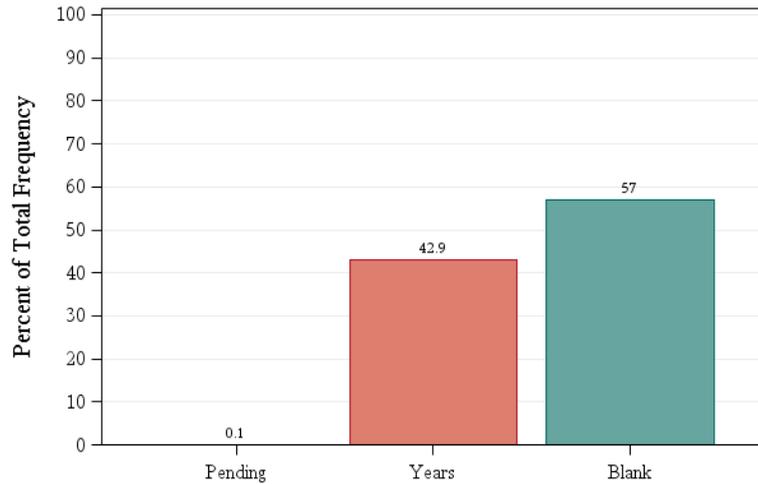
**Admission - Walking**



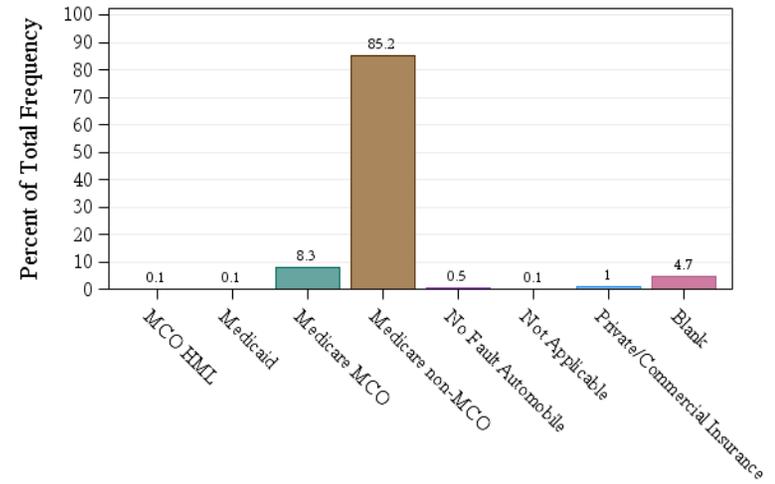
**Admission - Wheelchair**



**Admission - Age Units**

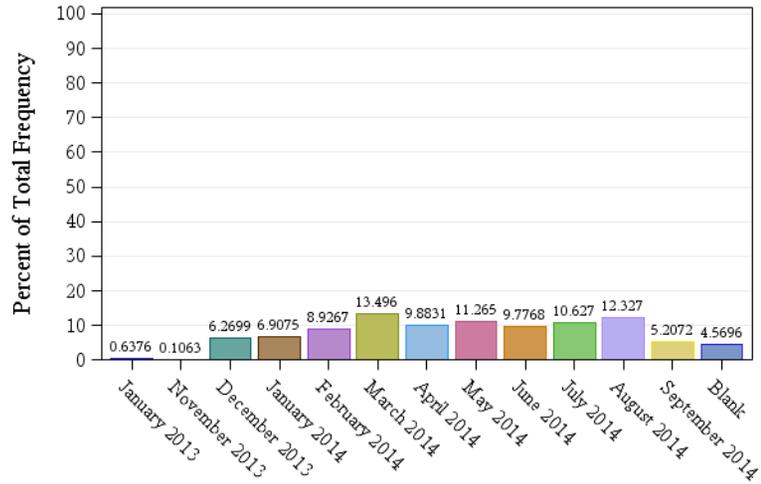


**Billing Info**

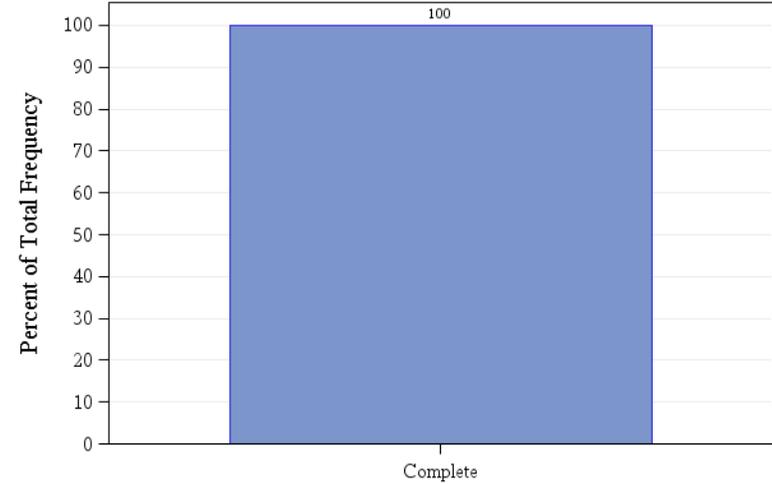


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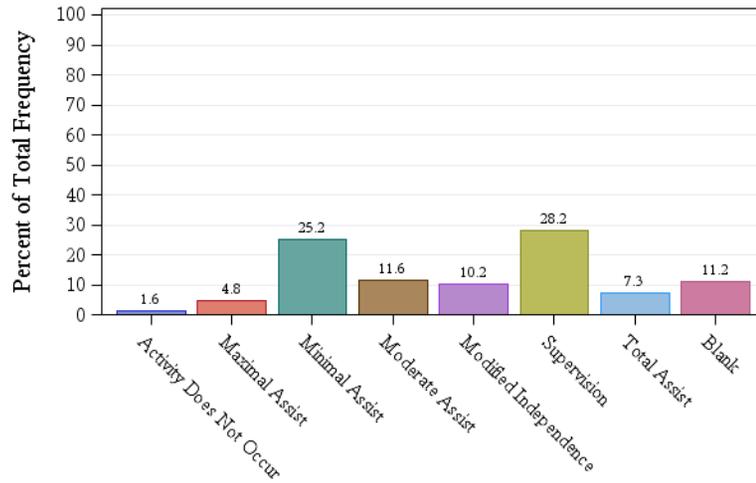
**Date Arrived**



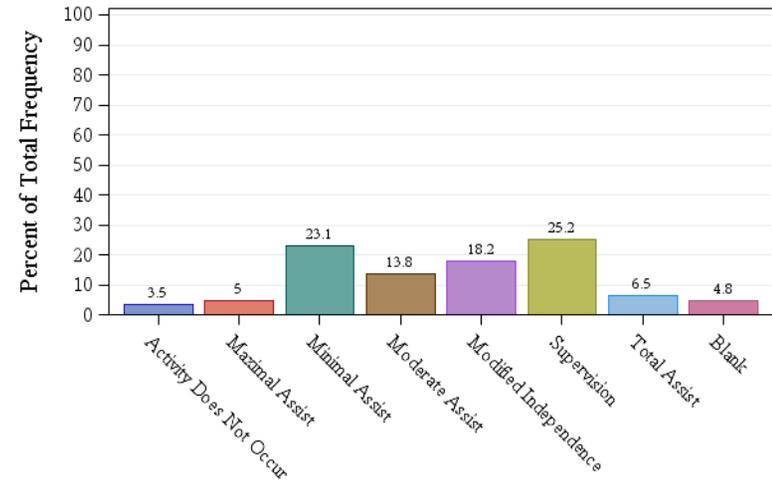
**Date Of Birth**



**Discharge - Bathing**

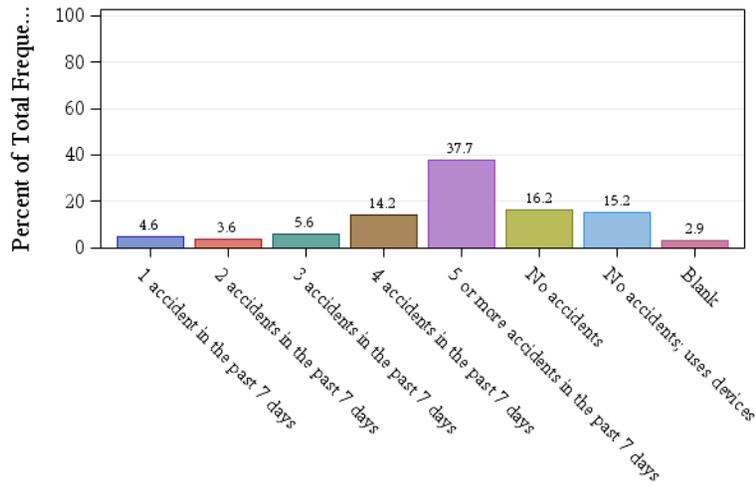


**Discharge - Bed to Chair**

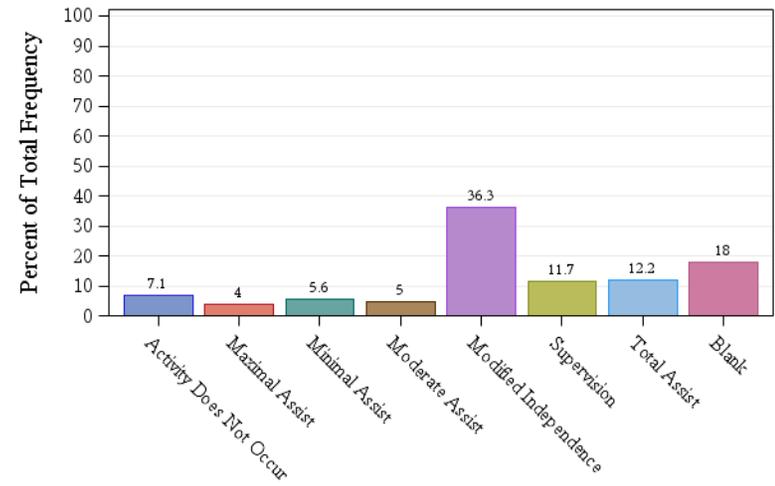


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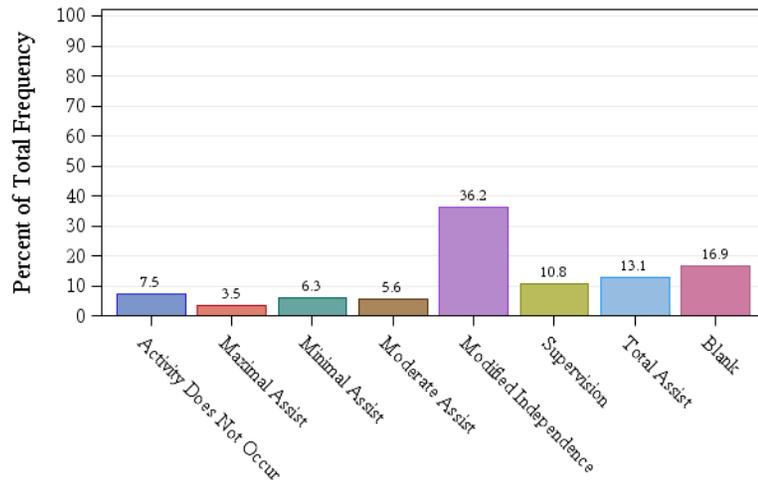
**Discharge - Bladder Frequency of Accidents**



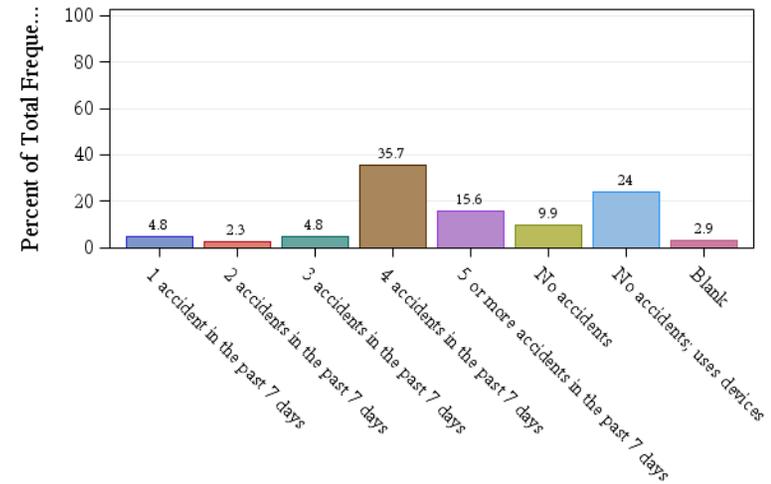
**Discharge - Bladder Level of Assistance**



**Discharge - Bladder Management**

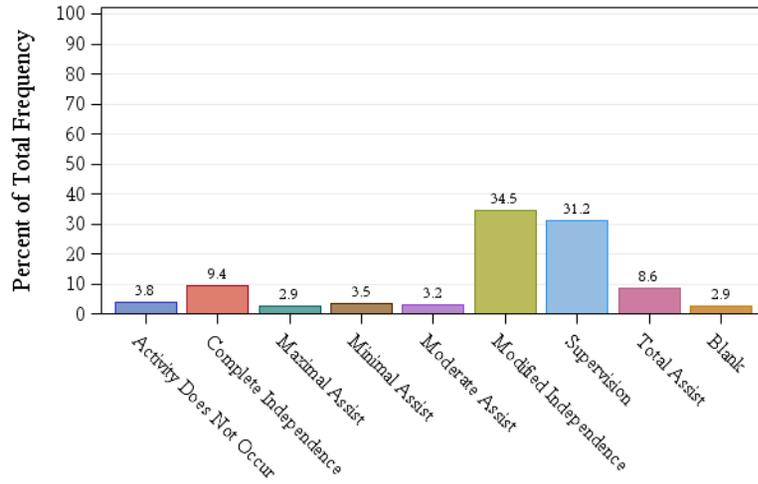


**Discharge - Bowel Frequency of Accidents**

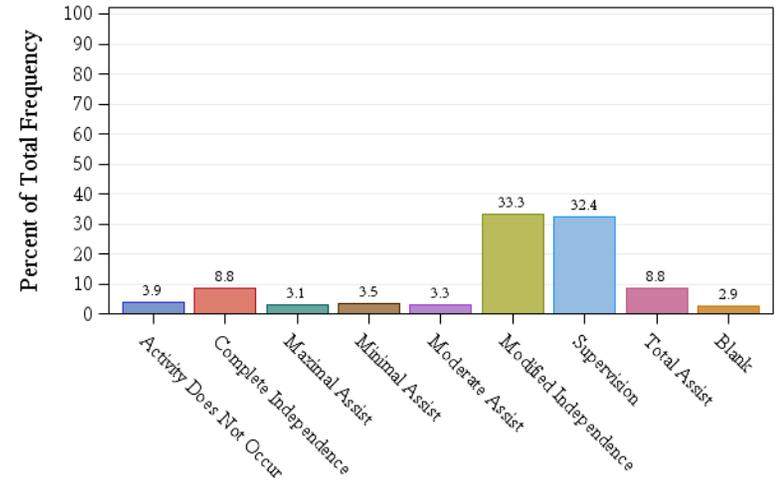


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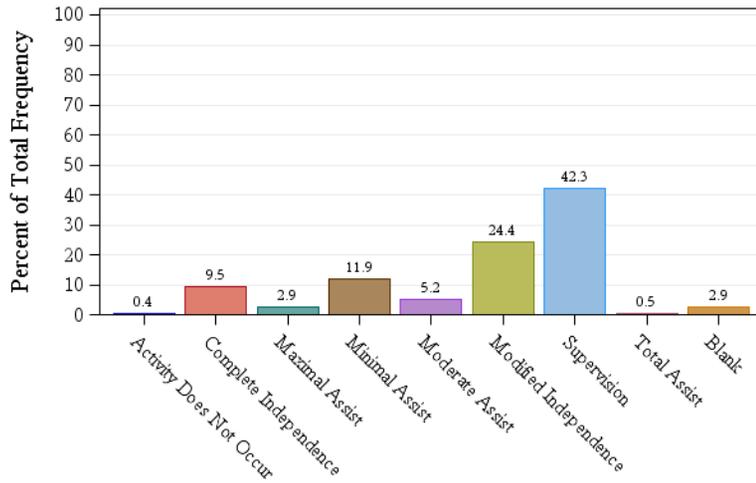
**Discharge - Discharge - Bowel Level of Assistance**



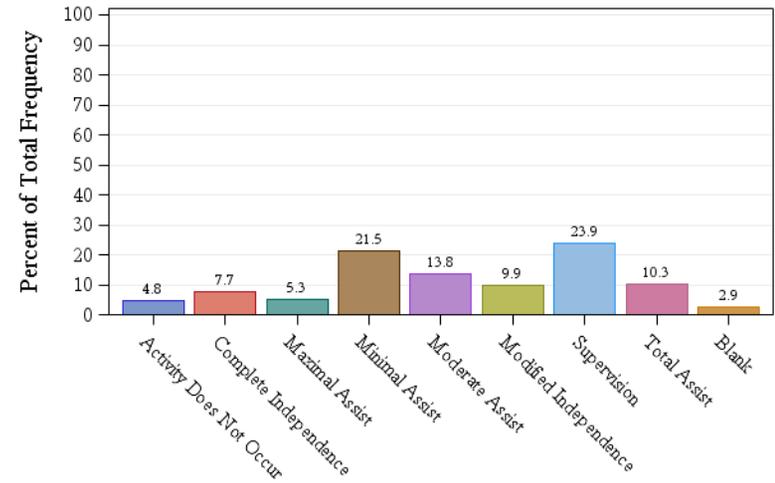
**Discharge - Bowel Management**



**Discharge - Comprehension**

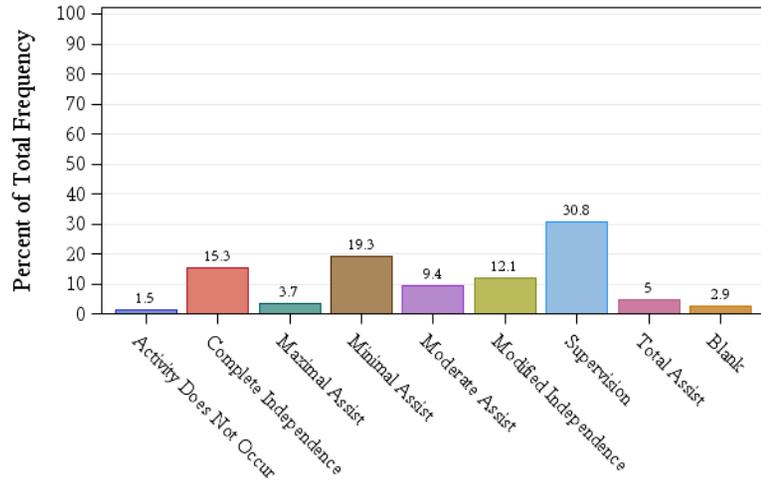


**Discharge - Dressing Lower Body**

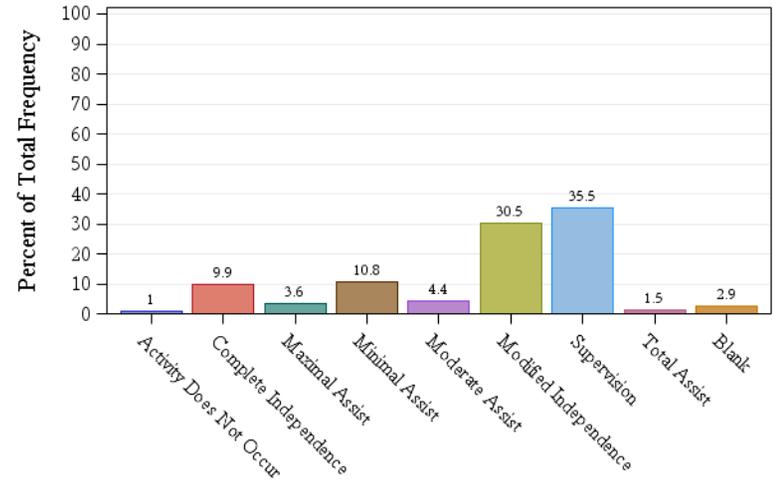


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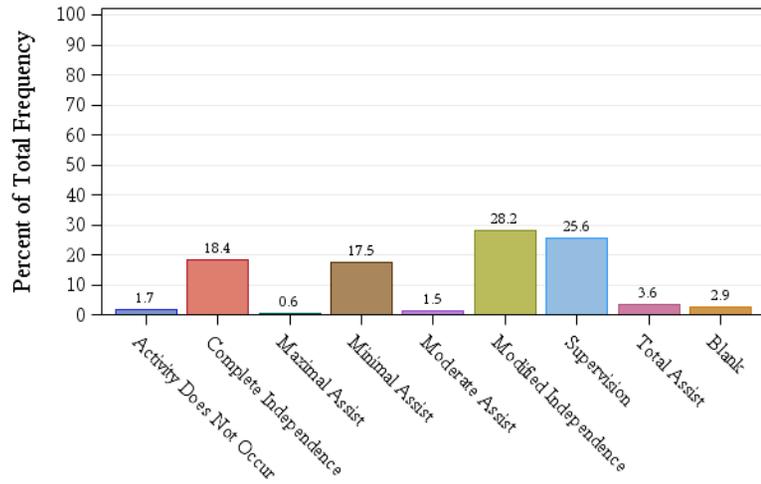
**Discharge - Dressing Upper Body**



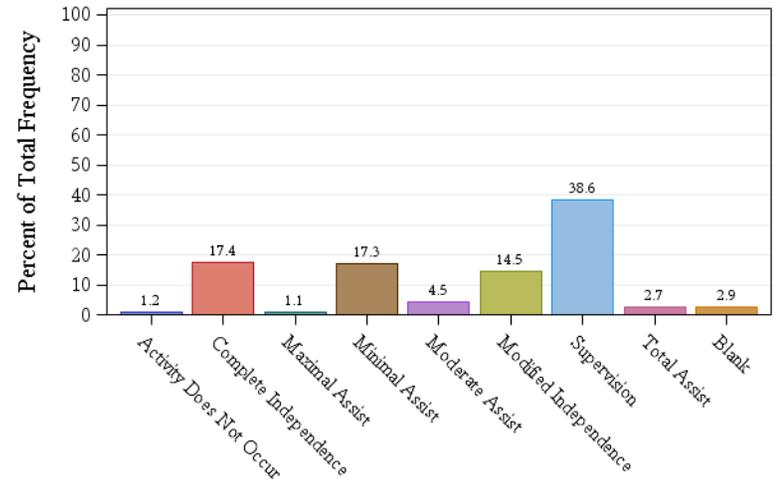
**Discharge - Expression**



**Discharge - Feeding**

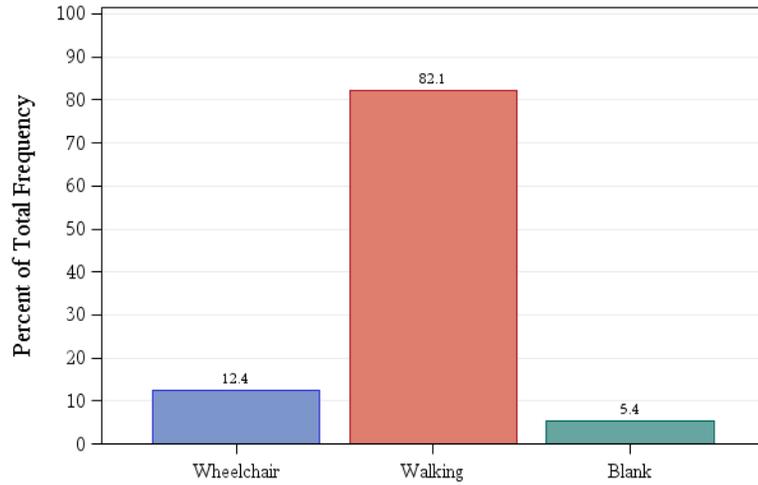


**Discharge - Grooming**

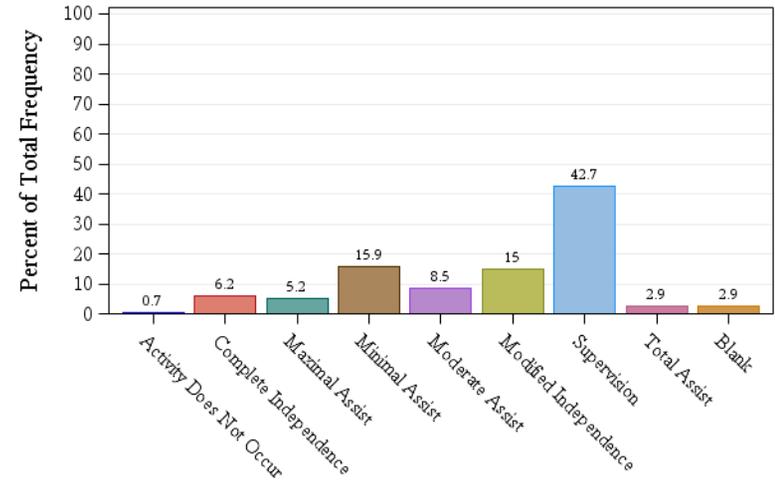


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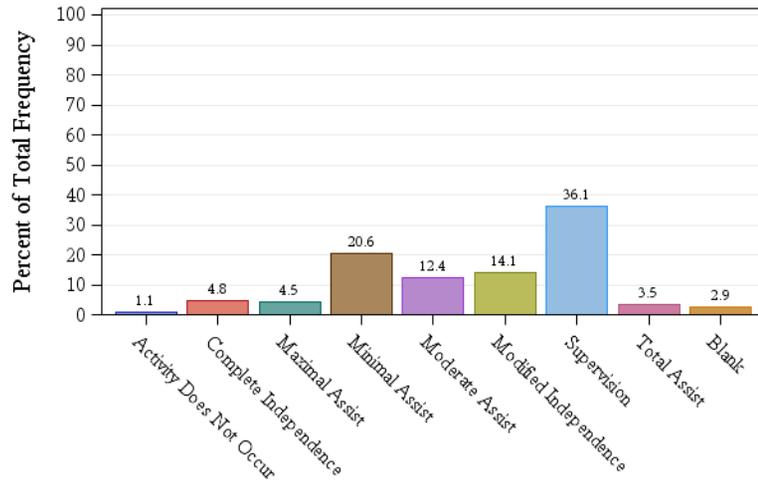
**Discharge - Locomotion Mode**



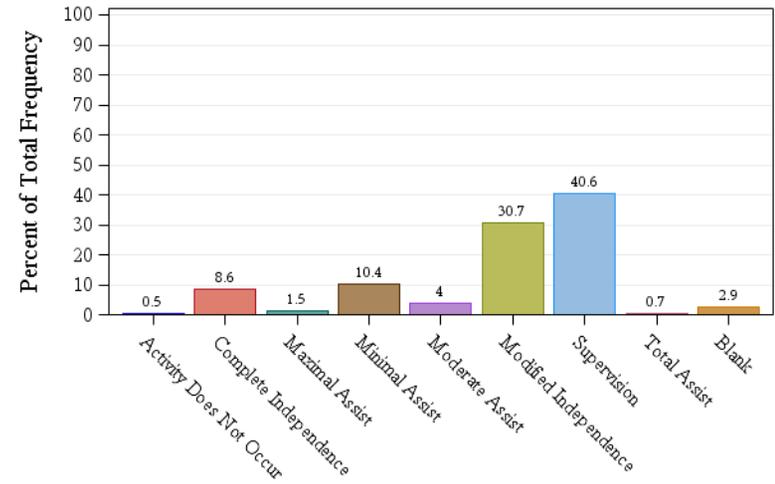
**Discharge - Memory**



**Discharge - Problem Solving**

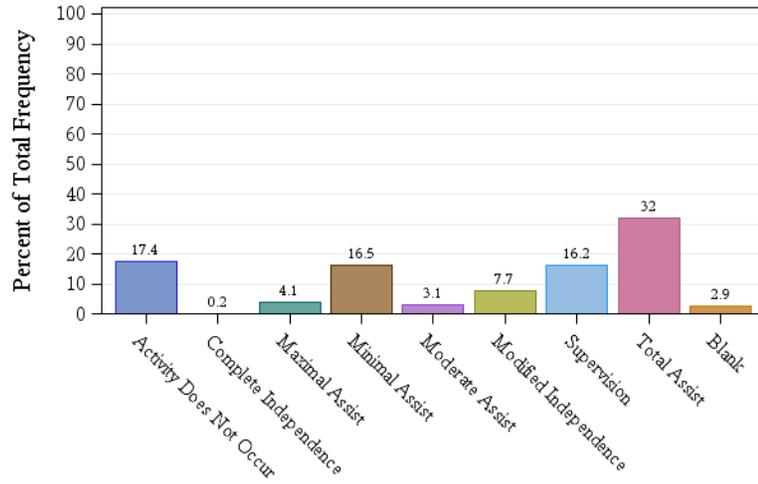


**Discharge - Social Interaction**

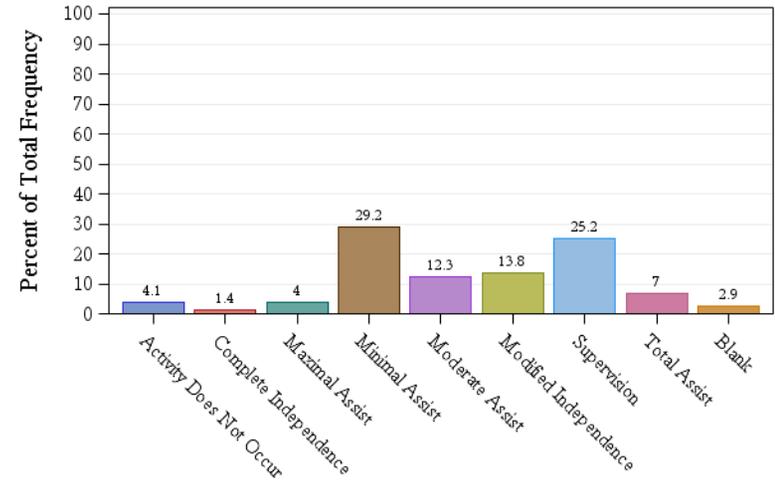


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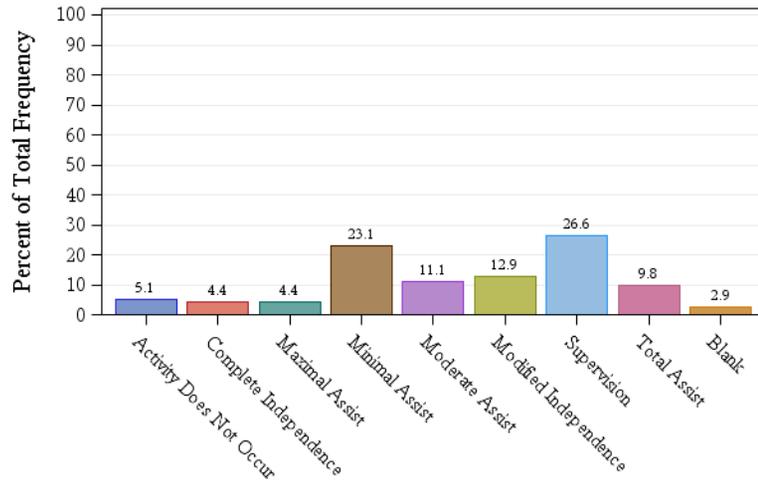
**Discharge - Stairs**



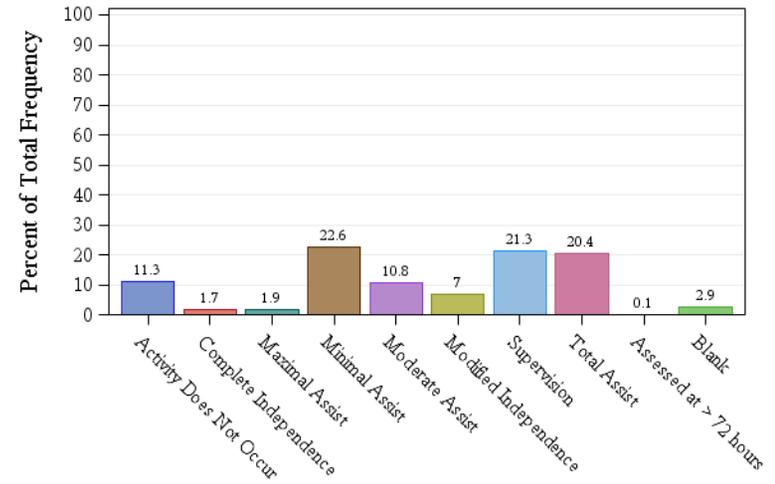
**Discharge - Toilet Transfers**



**Discharge - Toileting**

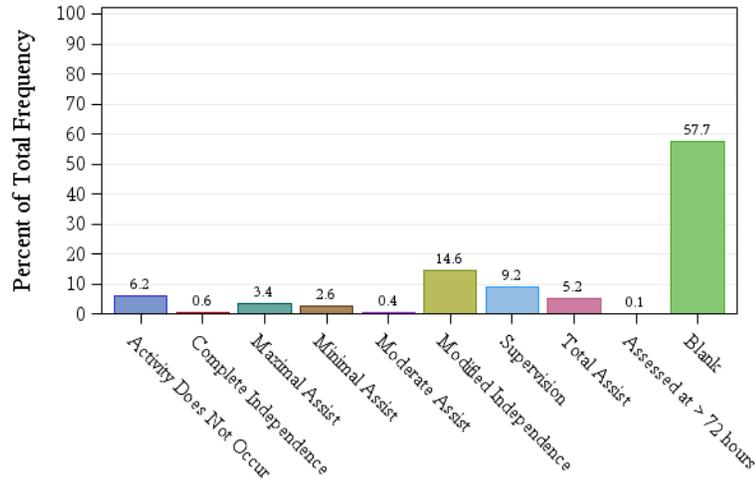


**Discharge - Tub or Shower**

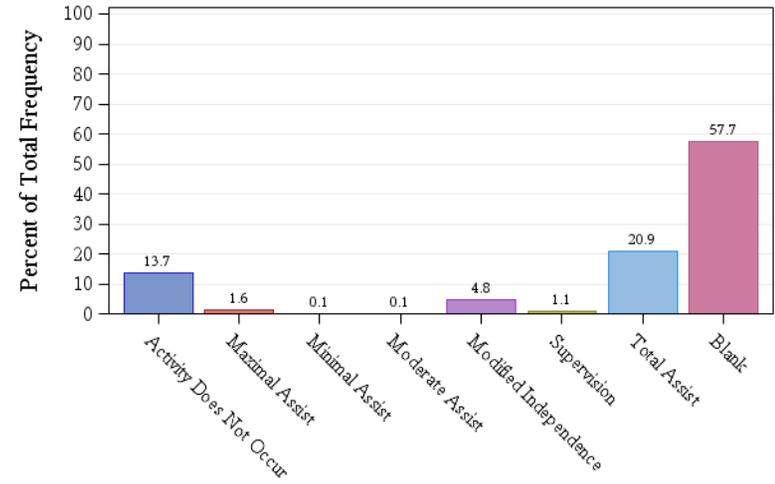


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**941 Incidents Statewide**  
**Data from September 2013 - September 2014**

**Discharge - Walking**

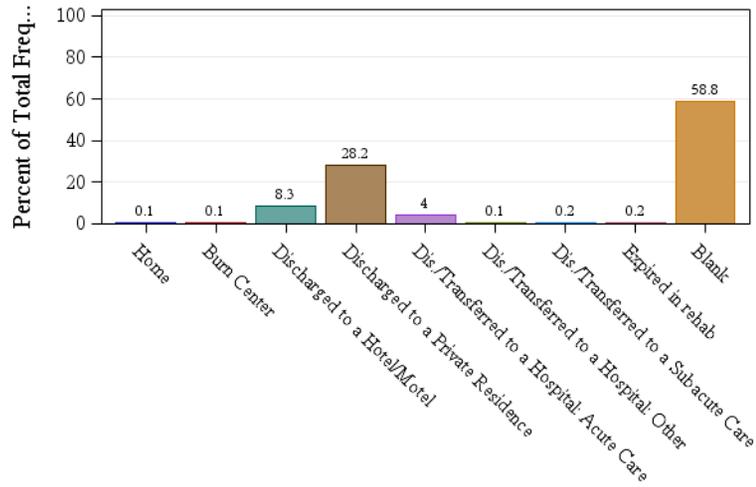


**Discharge - Wheelchair**

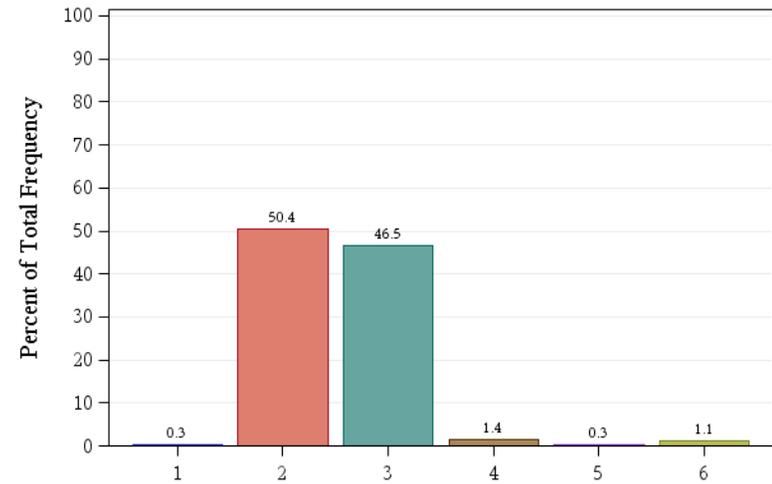


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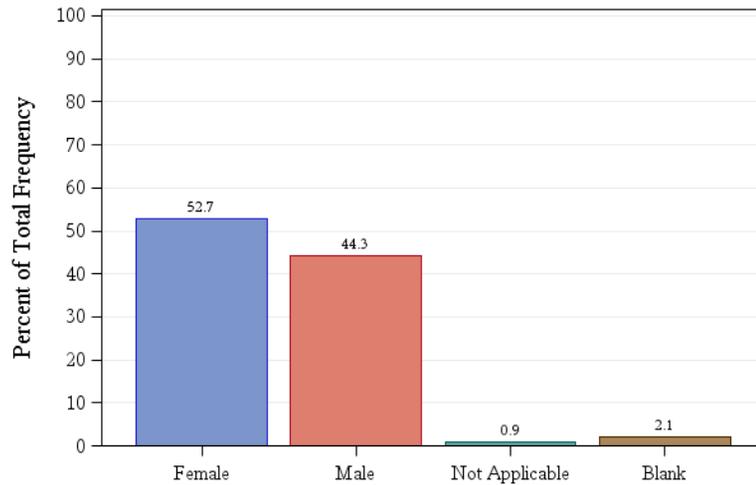
**Disposition from Rehab**



**Facility Name**



**Patient Gender**



**Date Discharged**

