

Pediatric Acute Rehabilitation

A specialized, compassionate rehab program for children recovering from serious injuries, surgeries, or medical conditions.

Our Mission

To restore independence, improve functional outcomes, and support each child's development through physician-driven family-centered care.

We Serve Individuals Recovering From:

- Traumatic Brain Injury (TBI)
- Spinal Cord Injury (SCI)
- Stroke & Neurological Injuries
- Polytrauma & Orthopedic Injuries
- Complex Medical Conditions
- Tumor & Post-Oncology Illnesses

Therapy Services

We provide intensive pediatric therapies 6 days per week, tailored to each child's developmental stage and medical needs.

- Physical Therapy (PT)
- Occupational Therapy (OT)
- Speech-Language Pathology (SLP)
- Feeding & Swallowing Therapy
- Cognitive Rehabilitation
- Respiratory Therapy (RT)

Therapy for Children on Ventilators

Our pediatric therapists and respiratory team collaborate to support mobility, activities of daily living, and communication abilities while maintaining respiratory stability.

Why Choose Us?

- Pediatric PM&R specialist
- Daily rounding by pediatric intensivists
- 24/7 nursing & respiratory support
- High success rates & excellent outcomes
- Child-friendly environment
- Family training throughout stay

Admission Criteria

- Ages: Newborns to 20
- Medically stable
- Capable of participating in therapy



Main: 714.289.2400
Admissions: 888.306.5121
Fax: 714.289.2367

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healthbridgekids.com



HealthBridge Children's Hospital is accredited by DNV-GL's NIAHO® and is ISO 9001:2008 certified.



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Inpatient Acute Rehabilitation



healthbridgekids.com

Why HealthBridge?

Functional Independence & Efficiency

- Inpatient acute rehab yields higher functional efficiency, especially cognitive gains, than outpatient or home modalities.

Johns Hopkins University

Severity Makes a Difference

- Children with severe impairments (e.g., GCS <13, total dependence) derive the greatest benefit, with improved GOS outcomes and partial independence achievable.

PMC

Specialized Pediatric Settings Matter

- Rehab in children's hospitals leads to shorter stays and superior gains compared to other rehab settings.

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Broad Diagnosis Applicability

- Gains aren't confined to TBI—children with Cerebral Palsy stroke, and encephalitis also benefit significantly from inpatient programs.

Johns Hopkins University, Thieme, et. al.



Several pivotal studies demonstrate the **clinical outcomes** of pediatric neurological patients receiving **inpatient acute rehabilitation** compared to those discharged home without such intensive rehab:

PIVOTAL STUDIES



Severe Pediatric TBI

Multinational Cohort (254 pts)
PMC

Design: 180 children received inpatient rehabilitation; 74 received outpatient or home-based care.

Outcome: Among children with Glasgow Coma Scale (GCS) <13 at discharge, inpatient rehab was associated with significantly better global function. No significant quality-of-life differences were detected between groups.



Pilot Study

Children with Total Functional Dependence (39 pts)
John Hopkins University

Design: Retrospective review of children entering rehab with the lowest FIM scores (total dependence).

Outcome: 59% achieved partial independence by discharge; gains correlated with faster command following and earlier rehab entry.



Facility Comparison

Children's Hospitals vs. Other Centers (28,793 pts)
PMC

Design: Large Uniform Data System for Medical Rehabilitation database comparing inpatient rehab at pediatric hospitals vs. other facilities.

Outcome:

- Shorter length of stay: 16 days vs. 22 days.
- Cognitive abilities for daily function increased by ~10% in pediatric centers.
- No direct comparison to home discharge, but underscores better outcomes with specialized, intensive inpatient care.



Neuropediatric Inpatient Rehab

German Cohort (738 pts)
Johns Hopkins University, Thieme, et. al

Design: Retrospective analysis of children with Cerebral Palsy BI, stroke in a neuropediatric unit.

Outcome: Significant improvements in motor, self-care, and social function across all diagnoses; longer stays correlated with greater gains.

