A PUBLICATION OF SUNNYVIEW REHABILITATION HOSPITAL

REHABILITATION IN SIGht

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Another Chance at Life

On May 19, 12-year-old Emily Simmons of Canastota, NY, was on her way home from a softball game when the car she was riding in with her mom and friend was struck by another vehicle. First taken to St. Elizabeth's Hospital in Utica, Emily's injuries were so critical that she was immediately transferred to Upstate University's Golisano Children's Hospital where she spent the next 13 weeks ... nine of them in a coma.

"It was a frightening 61 days," said her mother, Heather, who herself sustained injuries in the accident. "We had to just wait for her to wake up to see the extent of the injury to her brain."

On July 20, she finally did come out of the coma, uttering the words "that's my mom," a moment Heather says she will never forget. "Hearing those words after so many weeks ... it was even better than hearing a baby's first words."

Unfortunately, complications from a feeding tube and a subsequent surgery to remove a portion of her small intestine delayed Emily's discharge from the hospital for another four weeks. At long last, on August 17, she was transported to Sunnyview Rehabilitation Hospital and admitted to the hospital's inpatient Brain Injury Center of Excellence to begin the long road to recovery.

"As a parent, the last place you ever want to be is in a rehabilitation hospital ... but if you have to, the best place you can be is at Sunnyview," added Heather. "From the moment we walked in the door, the people were phenomenal, from Dr. Vincent Somaio, to the nurses and therapists, everyone treated Emily – and the entire family – with such care and love. It was really touching to see professionals



Emily Simmons leaving Sunnyview on August 29.

care so sincerely for their patients, often going above and beyond to make Emily feel 'special' and to create a fun atmosphere for her therapy."

When Emily arrived at Sunnyview, she had lost nearly 50 pounds due to the medical complications and was very weak. She was able to take only a few steps on her own and needed help with everything.

Brittany Harrison, DPT, physical therapist, said that when Emily was admitted, she was using a wheelchair and could walk only short distances with help. "Our goal was to help her build her endurance, strength and balance so that when she got home, she could walk on her own," noted Brittany. "She worked very hard and her progress was remarkable."

Peggy Mazza, MS, CCC-SLP, Emily's speech therapist, remembers meeting with Emily on the first day. "She was very tired the day she came in, but I met with her to let her know what to expect." At that initial meeting, Peggy noted that Emily had significant aphasia — difficulty finding the right word when communicating. "We worked on her awareness, and used techniques like 'fill-in-the-blank' to help her come up with the right word at the right time," she added. Over the course of the next two weeks, Emily worked with Peggy twice each day, and by the time of her discharge, Emily was making great progress ... even beginning to initiate communication. "Her personality began to re-emerge and we started to see her sense of humor, especially with her younger brother!"

On August 29, after two weeks of intensive physical, occupational and speech therapy, Emily was ready to leave ... traveling back to Canastota in style in a limousine and welcomed home with a big parade attended by hundreds of well-wishers.

This fall, Emily, who turned 13 in September, is able to do most everything on her own, with supervision, and is keeping up on her schoolwork at home with the help

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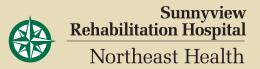
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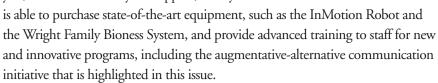
Rehabilitation Insight is a publication of Sunnyview Rehabilitation Hospital. The goal is to bring timely issues of acute medical rehabilitation, including updates and advances of the hospital and its foundation, to the forefront.



Welcome

At Sunnyview, we often talk about the multidisciplinary team of rehabilitation professionals who make such a tremendous difference in the lives of our patients – from physiatrists and therapists to rehabilitation nurses, social workers and neuropsychologists – all dedicated professionals who provide expert and compassionate care to patients and families at perhaps the most difficult time of their lives.

Yet, we would be remiss if we didn't include the other important members of that team ... you, our donors! With your support, Sunnyview



As a donor, your financial support of Sunnyview is invaluable and we thank you from the bottom of our hearts. But, you can help us in another way, too — by helping us spread the word about Sunnyview! Tell your neighbors, your coworkers and your family just how fortunate we are to have the only nationally recognized specialty rehabilitation hospital in upstate New York right here in our own community!

The mother of Emily Simmons, the young girl featured in our cover story, probably summed it up best when she said of her family's experience this summer — "… the last place you ever want to be is in a rehabilitation hospital … but if you have to, the best place you can be is at Sunnyview."

When you, or someone you love, needs the best rehabilitation care available, remember, you have a choice. We hope you choose Sunnyview.

ward Fiseman

Chip EisenmanChief Executive Officer

Address Change? Duplicate Mailings?

If your address has changed or if you receive more than one copy of our newsletter, please alert the Foundation office at (518) 382-4586 or **sunnyviewfoundation@nehealth.com** so that we can streamline our database.

Thank you!

Specialized Cardiac Rehabilitation ... Closer to Home

Until late December 2011, 64-year-old Edgar Seeley of Greenfield Center, NY, considered himself to be in good physical condition. But, after a three-month bout with shingles, his life took a drastic turn.

Several months after recovering from shingles,

Edgar was diagnosed with heart failure.

As the name suggests, heart failure means that the heart is so damaged that it "fails" to pump strongly enough to meet the body's needs.

The treatment of heart failure varies by patient, but for those patients with the weakest hearts, the use of a ventricular assist device (VAD) can help improve quality of life. Depending on the heart's condition, a ventricular assist device may be used as a "bridge to transplant," which helps patients like Edgar survive until a donor heart becomes available; or as a "bridge to recovery" to assist a patient with temporary heart failure for a few weeks or months as they gain strength and recover; or as a "destination therapy," to assist patients with advanced heart failure who are not eligible for a transplant.

Edgar received a left ventricular assist device (LVAD) at Mount Sinai Hospital. While an LVAD device is nothing short of a miracle for some heart failure patients, living with an LVAD can bring about potential medical complications, declines in endurance due to prolonged hospital stays, as well as difficulties with common everyday activities.

After being stabilized at Mount Sinai, Edgar needed to build his strength and endurance. He needed a rehabilitation program that would accommodate the complex medical needs of a VAD patient. Fortunately for Edgar, this specialized rehabilitation was



Edgar, center, with Karie Nasser, OT and Lisa Gennett, PT.

available close to home at Sunnyview Rehabilitation Hospital.

The program was developed by Sunnyview working in close collaboration with St. Peter's Hospital in Albany, NY, and Mount Sinai. "This was truly a team effort," stated Nancy Smith,

director of cardiopulmonary and orthopedics at Sunnyview, who noted that Sunnyview's program is the only dedicated acute VAD rehabilitation program in the Capital Region. "We are proud of our specialized and comprehensive program for VAD patients ... care that only Sunnyview is able to offer in this region," she added.

The program is designed to increase cardiac capacity, build physical endurance while both the patient and family receive extensive

education enabling them to transition safely and independently from acute rehabilitation to home. The program also provides 24-hour medical management, rehabilitation nursing, physical therapy, occupational therapy, speech therapy and other services, such as neuropsychology, social work, discharge planning, audiology and therapeutic recreation.

While at Sunnyview, patients are under the care of the physicians from the Schenectady Pulmonary and Critical Care practice.

Edgar regained his strength and made a good recovery and was discharged to his own home. He continues to receive therapy services at home through Eddy Visiting Nurse Association. He is still awaiting a heart transplant, but has regained his strength and mobility and is able to live comfortably at home until a donor heart is available.





Why a Wish List?

Sunnyview Rehabilitation Hospital maintains a capital budget to purchase muchneeded equipment. Every item from the wish list that the Sunnyview Foundation is able to fill is one less strain on our notfor-profit budget.

Thank you for helping us to fulfill our mission of improving lives of people with disabilities and their families!

Top priority items needed: Cardiopulmonary (5 Needed) \$130 each

Breathcalls are needed for vent and quad patients so that they have the ability to communicate with the clinical staff at any time.

Orthopedics (4 needed) \$420 each

Pulse Oximeter Tuff Sets are needed for therapy to monitor heart rate during treatment sessions.

Physical Therapy \$605

A pediatric corner climber and slide is needed so that therapists can work with children on their large motor skills, specifically climbing stairs.

Brain Injury Unit \$550

Portable wheelchair ramp for home visits by therapists.

Occupational Therapy

\$3,100

MyoBoy Myotester with Paula Software (Target Muscle Reinnervation Myoelectric UE Prosthetic) is needed to improve the function of prosthetic arms. This surgical technique called targeted muscle reinnervation (TMR) transfers residual arm nerves to alternative muscle sites. After reinnervation, these target muscles produce an electromyogram (EMG) on the surface of the skin that can be measured and used to control prosthetic arms.

Hospital-wide (many needed) \$4,516 each

Sunnyview has used low position beds successfully to minimize the potential for injury with patients at risk of falling. Increasing the number of beds will allow Sunnyview to meet peak demand when there is a large number of at-risk inpatients.

Radiology \$50,000

Sunnyview provides ultrasound services for both inpatient and outpatient populations. Portable ultrasound equipment will add to our existing ultrasound room to promote comfort, accessibility and decreased disruption time because providers will be able to perform bedside testing; there will be no need to move a patient.

Neuro Rehab Institute (2 needed) \$700 each

The ophthalmo/otoscope are instruments that allow staff to get a limited view inside the body. These non-invasive instruments use a combination of light and magnifying lens to peer into specific openings, particularly the eyes.

Recreation Therapy (5 needed) \$283 each

The Recreation Therapy department is in need of hospital grade TV/DVD combos for patient education and for activities while the patient is not in therapy.

Another Chance at Life

Continued from page 1

of a tutor who reports that the eighth-grader is working at eighth-grade level. She continues outpatient therapy that Sunnyview coordinated near Syracuse and expects to return to school in February.

"I truly believe it's a miracle ... I have no doubt that the rehabilitation Emily received at Sunnyview will enable her to live a happy, healthy, productive life. They gave my daughter back her life."

Auxiliary Fashion Show

The Sunnyview Auxiliary held its annual Auxiliary Fashion Show on September 10, 2012 at Glen Sanders Mansion. Fashions were by Chico's of Stuyvesant Plaza. The event was the largest ever, raising more than \$10,000 for the hospital!





Check out Sunnyview Rehabilitation Hospital Foundation on Facebook!

Alphabet Talk

In the mid-1960s, Emily Ross, a long-time Sunnyview Rehabilitation Hospital Foundation board member, moved to the Schenectady area where she met Susan Juster. Susan, a speech therapist, was interested in writing a book to be used as a teaching/therapy aid for speech therapists. With Susan's expertise and Emily's experience volunteering with children with speech difficulties, the two embarked on a partnership to help children learning to read and speak.

The result was Alphabet Soup, an easel-type tool for the classroom setting. On the front pages were the letters of the alphabet, along with illustrations, and on the back, a photograph for the teacher or therapist of how the mouth and tongue should be shaped when pronouncing the letter.

Emily reports that the project was reason-



Kim Salmon, MS, CCC-SLP

ably successful with several thousand copies of Alphabet Talk sold. She recently donated one of the copies to Sunnyview, noting that "perhaps the speech therapists at Sunnyview might enjoy a relic of the past ... a pre-elec-

tronic age teaching tool."

According to speech therapist Kimberly A. Salmon, MS, CCC-SLP, assistant director of outpatient rehabilitation services at Sunnyview, products such as Alphabet Talk continue to be a viable tool for use with pediatric patients, not only for those with speech issues, but to address the heavy emphasis on literacy in the preschool population.

She notes that the tool is a natural bridge to the current trend of using technology, such as computer programs,

IPADs, etc., to make learning new skills fun for children. "Materials such as Emily's, in addition to new technologies, are very motivating to young people and help provide a way for parents to follow-up with their child at home," she added.

Sunnyview Kicks-off New Augmentative-Alternative Communication Initiative

A new augmentative-alternative communication (AAC) initiative at Sunnyview promises to help individuals with complex communications needs gain more independence in their daily lives.

According to Heather Leyh, MA, CCC-SLP, augmentative-alternative communication (AAC) is a broad term that describes ways to permanently or temporarily compensate for severe difficulties in speech, writing or understanding of the spoken/written language. Such difficulties can be the result of deficits at birth, such as cerebral palsy or autism, or acquired from an illness or injury, such as strong acquired from an illness or injury, such as strong acquired from an illness or injury.

acquired from an illness or injury, such as stroke, traumatic brain injury or amyotrophic lateral sclerosis (ALS).

AAC systems are diverse, ranging from strategies that do not use any equipment, such as sign language and body language, to aided approaches that may include symbols, communication boards or



Heather Leyh, MA, CCC-SLP, demonstrates new technology for AAC.

computerized devices that speak messages at the touch of a button.

Use of augmentative communication began in the 1950s and expanded in the 1960s and 1970s with the use of graphic symbols and sign language to help support the inclusion of disabled individuals in mainstream society. However, it was not until much later in the 1980s that AAC became its own field and an area of specialization for speech-language pathologists.

Technological advances, including speech synthesis and microcomputers, have

opened new and exciting doorways for those unable to use their own voices. And, advances continue to grow and include smart phones, tablet computers and software applications all of which provide numerous options and possibilities for individuals with complex communication needs and physical disabilities.

Helen Steiner – A Forward-Thinking Philanthropist

Twenty-two years ago while riding her bike in Charlton, NY, Helen Steiner was hit by a car driven by a 16-year-old-boy just learning how to drive. The accident was devastating and Helen spent five weeks in an acute care facility with a broken arm and dislocated shoulder ... and had her left leg amputated below the knee.

Upon Helen's discharge from the acute care facility, she was admitted as an outpatient to Sunnyview. As a new amputee, Helen received physical and occupational therapy, neuropsychology and the services provided by the hospital's amputee clinic which helps people cope with the life change. Helen responded wonderfully.

Helen spent the next year working with outpatient therapist Connie Saburro, crediting Connie with her progress: "Connie was wonderful for me both for physical and mental support. She was always helpful and



Helen Steiner

worked with me in the Golub pool and the other areas Sunnyview has to offer."

In 2009, Helen became an inpatient at Sunnyview receiving occupational and physical therapy services following heart valve replacement surgery.

Helen was so thankful for the help she received that she became a volunteer at Sunnyview and also has showed her gratitude by naming Sunnyview in her will.

We are grateful to Helen for her forward-thinking philanthropy to support Sunnyview in its mission to "improve the lives of people with disabilities and the lives of their families."

By making a planned gift to the Sunnyview Rehabilitation Hospital Foundation in your will, you become a member of the Legacy Circle which entitles you to special hospital event invitations and programs! If you prefer to remain anonymous, your gift will be kept confidential. For further information, please contact Kathie Ziobrowski, executive director at (518) 382-4586, email ziobrowskik@nehealth.com, or go to www. sunnyviewfoundation.org/ways_To_Give/Gift_Planning.

Congratulations

Sunnyview Rehabilitation Hospital was recognized in a recent issue of *Rehab Management: The Journal of Rehabilitation*, a national publication. Sunnyview was among a number of nationwide nominees, many with very prestigious reputations, for Best of 2012 – Rehab hospitals, institutions and facilities, including: Brooks Rehabilitation, Florida; Craig Hospital, Colorado; Helen Hayes Rehabilitation Hospital, New York; MossRehab, Pennsylvania; Rehabilitation Institute of Chicago, Illinois; and TIRR Memorial Hermann, Texas (Gabby Gifford's facility).

7th Annual Bass Fishing Tournament



The Schenectady Permanent Firemen's Association organized the 7th Annual Bass Fishing Tournament held on June 18, 2012 to support the pediatric programs of Sunnyview Rehabilitation Hospital. Amount raised was \$4,764 for augmentative pediatric toys for the speech department. Pictured above is firefighter/paramedic TJ Dercole with his winning fish.

Art for the View – October 12, 2012

This year, nearly 500 artworks were submitted to Art for the View, a special juried art exhibition by artists with disabilities from around the world. More than 50 artworks by 34 artists were selected by jurors Jeanne Flanagan, director of the Esther Massry Gallery and adjunct art professor at The College of St. Rose, and Jim Richard Wilson, director of the Opalka Gallery and art history lecturer at The Sage Colleges.

Marsha Ras, board member and committee member, and her husband Steve Ras with James Nolan, steering committee chair and his wife Mary Mackrel. Over 100 people attended the benefit gala on October 12 that raised approximately \$60,000 to support purchase of the InMotion Robot for Rehabilitation, remarkable state-of-the-art technology that retrains the brain of stroke survivors and patients with other neurological conditions.



L to r, Kris Lowney, Ali Coan, Karen Lowney, and Joseelyn Clar



L to r, Barbara, Chris and Stephanie Roberts

Competition Winners

1st Place - Esther Anne Wilhelm, *Kailua, HI From the Inside Out,* sculpture, mixed media, 2010

2nd Place - Andrew Ortiz, *Arlington, TX Collection,* archival giclee print, 2011

3rd Place - Suzanne Olmstead, *Berkley, CA Rainbow's Edge,* two-plate poly gravure intaglio, 2012

Honorable Mention - Carol Es, *Alhambra, CA Separation,* oil on paper and embroidery on canvas, 2009

Inspiration Award - Stasia Wilson, Whitewater, WI

Stasia (pictured right) is a 29-year-old artist who has cerebral palsy. She uses a wheelchair and an augmentative communication device. It was an honor to have Stasia attend the exhibition with members of her family. Selected for this exhibit, "*Death's Door*" was inspired by her experiences fighting for her life after a serious complication from a gastrointestinal bypass operation in 2010.



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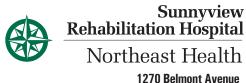








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Sunnyview's Day at the Races

Day at the Races was held in the quintessential historic setting at Saratoga Race Course on Wednesday, August 1. Proceeds from the event helped support the purchase of an InMotion Robot for the Neuro Rehab Institute.



L to r: Nancy Shultes, director of quality risk management; Roseann DeMeo, vice president of patient care services; Nancy Smith, director of cardiopulmonary and orthopedics; and Diane Ornston, patron.



Left to right include: Peter Semenza, vice president of philanthropy, St. Peter's Health Partners; Kathie Ziobrowski, executive director of Sunnyview Rehabilitation Hospital Foundation; Shannon Haughney Galuski, associate director of development, St. Peter's Hospital Foundation; and Chip Eisenman, CEO, Sunnyview Rehabilitation Hospital.