The following is a list of frequently asked questions regarding the Pediatric Rehabilitation Program. If you have additional questions, please feel free to call the Nurse Practitioner at 813-844-8951.

Q: What should I expect when my child enters the Pediatric Rehab Program?
The Pediatric Rehab Program is housed within a 43 bed pediatric unit on the 5th floor of Tampa General Hospital. If you are admitted before 3 pm, the Pediatric Rehab Team will meet with you and discuss your child’s prior medical history and goals for this admission. The team consists of a nurse practitioner, physical, occupational and speech therapists, neuropsychology, specially trained nursing staff and Hillsborough County school teachers. The evaluation by the therapy team typically takes two weekdays to evaluate your child. The team meets weekly to discuss goals for inpatient rehab and estimated length of stay. You are expected to attend training sessions with therapy and attend family meetings with the team.

Q: Can I stay with my child?
Yes. One parent is allowed to room in with their child 24 hours a day. You must obtain a security fast pass at the Information desk in the East Pavilion lobby. The Pediatric Unit has security doors that close and lock between 8:30 pm and 6 am. The fast pass ensures you will be able to leave and reenter the Pediatric floor after hours. Only 4 visitors are allowed at the bedside at one time. There is a parent lounge and waiting room on the unit for additional guests. These measures help ensure the safety and security of pediatric patients. Anytime your child leaves the Pediatric floor, you must sign them out in the transport log, so everyone knows they are accounted for and safe. Families can also stay at Ronald McDonald House located on the Tampa General Campus. Please call 813-254-2398 to request a room. A small fee is charged each day, but can be waived under certain circumstances.

Q: What kind of clothes and personal items will my child need?
Your child will need 7 days worth of loose fitting clothing, such as sweat pants and t-shirts. They will also need a light sweater, underclothes and a comb or brush. Other items may include a toy or stuffed animal. Please mark items with your child’s name.
Q: May my child bring electronic items with them?
You may want to bring a CD player or digital music player, handheld video game player or a parent may wish to bring their laptop (the hospital has WiFi). All electronics must be in good working order. The hospital cannot be responsible for these items and they should not be left unattended.

Q: Should I bring my child’s walker or wheelchair?
Please bring all assistive devices your child uses in the home and school environment including ankle foot orthotics, walkers, quad canes, wheelchairs and arm splints. If your child has not been fitted with any equipment in the past, he/she will be evaluated by the Rehab Team after admission. If you arrive at Tampa General Pedi Rehab after 3 pm, the Rehab Team will provide you with a wheelchair and other equipment after your child has been evaluated the following day.

Q: What types of therapy will my child receive?
Your child will be undergoing a comprehensive evaluation after admission. Therapies may include physical, occupational and speech therapies, child life therapy and neuropsychological evaluation. The school will also be involved with your child if they are admitted during the school year.

Q: Where will my child’s therapies be held?
Depending what the therapist's focus for the therapy session, your child will either have therapy in his/her room, the pediatric therapy gym on the 5th floor, adult rehab gym, pediatric gym in the adult rehab center, or in the community. I.e. Dressing, eating, grooming, bathing, or speech therapy sessions will be conducted in the patients room.

Q: How often will my child have therapy?
Most children receive three hours of therapy every weekday. Therapies may include physical occupational, and speech therapy, as well as childlife specialists, and neuropsychology. Therapies may occur one to one with a therapist or in a group session or outing. Therapy sessions may be broken into several short visits, depending on your child’s endurance. On weekends, children typically receive 30 minutes of therapy per day.

Q: When will I receive a therapy schedule?
Once the therapists have completed their evaluations, a therapy schedule will be posted on your child's door. If you arrive on Friday, your schedule may not be posted until the following week.

Q: Will we be able to leave the hospital with my child on a day pass?
When appropriate, families may go on a leave of absence for short periods after therapies are completed for the day and your child is cleared by the therapists and medical team. Family training (car transfers, eating, ambulation, or any other special needs) will need to be completed prior to your child being allowed to leave the hospital for the day. You must return to the hospital to sleep. You will need to sign the leave of absence form with your nurse before leaving for the day.

**Q: How will I be informed of my child’s progress?**
Once goals are established for your child, the team will meet with family members to discuss potential goals and estimated length of stay. A Rehab physician and/or nurse practitioner will see your child every weekday. A weekly written progress form will be reviewed with you by a member of the team, and you will be given a copy for your records.

**Q: What can I do to help my child recover?**
In most Pedi Rehab rooms, a daily activity schedule is posted on the wall. Please be sure your child awakens at an appropriate time to have breakfast before starting therapies. Children will typically have therapy sessions throughout the day. If you feel your child needs additional rest periods, nap times can be added to the schedule. Keep in mind all Rehab patients are at high risk for falling. Please use all safety equipment provided, such as slipper socks, safety belts and bed rails. Also, please help the nursing staff keep track of what your child is eating and drinking. Let them know if your child has used the bathroom or wet a diaper. This helps the team evaluate your child’s bowel and bladder function. Most of all, spend time learning about your child’s strengths and challenges, and learn about the home exercise program you will be performing at home after discharge. Parents that are actively involved in their child’s therapy programs feel more secure in their abilities when discharge approaches.