

Archives of Physical Medicine and Rehabilitation

Editors' Selections From This Issue: Volume 103 / Number 6 / June 2022

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INFORMATION/ EDUCATION

See *Return to Work for People With Aphasia*, by Gilmore, et al on page 1247. Information/Education Pages are designed to provide consumer-friendly information on topics relevant to rehabilitation medicine and may be reproduced for noncommercial use for health care professionals. Previously published pages are available at <https://www.archives-pmr.org/content/infoeducation>.

The Improving Medicare Post-Acute Care Transformation Act of 2014 (the IMPACT Act) required Centers for Medicare & Medicaid Services (CMS) to implement standardized data elements focused on function. A set of 5 papers by Deutsch et al in this issue elucidate the standardized self-care and mobility data elements and the post-acute quality measures developed using these data.

- In **A Postacute Care Function Process Quality Measure for the Collection of Standardized Self-Care and Mobility Data: Development, Implementation, and Quality Measure Scores**, the authors describe the development of the cross-setting function process measure, which was implemented to meet the requirements of the IMPACT Act. They also describe the process measure specifications, including the standardized data elements, and report summary quality measure scores for skilled nursing facilities, inpatient rehabilitation facilities (IRFs), long term care hospitals, and home health agencies. ■ SEE THE FULL ARTICLE AT PAGE 1061
- In **Inpatient Rehabilitation Facility Patients' Functional Abilities and Validity Testing of the Standardized Self-Care and Mobility Data Elements**, the authors use national IRF data to describe the abilities of Medicare patients at admission and discharge using the standardized self-care and mobility data elements in Section GG of the Inpatient Rehabilitation Facility Patient Assessment Instrument and examine content validity by comparing these data elements with those included in other functional assessment scales. ■ SEE THE FULL ARTICLE AT PAGE 1070
- In **The Change in Self-Care Quality Measure for Inpatient Rehabilitation Facilities: Exclusion Criteria and Risk-Adjustment Model**, the authors describe the exclusion criteria and the development of the risk-adjustment model for the Change in Self-Care quality measure that was implemented in the IRF quality reporting program. ■ SEE THE FULL ARTICLE AT PAGE 1085
- In **The Change in Mobility Quality Measure for Inpatient Rehabilitation Facilities: Exclusion Criteria and the Risk Adjustment Model**, the authors describe the exclusion criteria and the risk adjustment model for the Change in Mobility quality measure implemented in the CMS IRF quality reporting program. ■ SEE THE FULL ARTICLE AT PAGE 1096
- In **Inpatient Rehabilitation Facility Change in Self-Care and Change in Mobility Quality Measures: Development and Reliability and Validity Testing**, the authors describe the development, implementation, calculation algorithms and reliability and validity testing of two CMS IRF quality measures. ■ SEE THE FULL ARTICLE AT PAGE 1105

Effect of Time-Dose-Matched Virtual Reality Therapy on Upper Limb Dysfunction in Patients Poststroke: A Meta-Analysis of Randomized Controlled Trials

Li and colleagues investigated the efficacy of virtual reality (VR) therapy post-stroke. The results suggest that VR is superior to time-dose-matched conventional therapy (CT) in terms of recovery of upper extremity motor function, especially when virtual environment is used, or VR is mixed with CT. However, VR (VR only or mixed with CT) does not improve patients' daily activity performance and participation compared with CT. Overall, VR appears to be as safe and acceptable as CT. Large-scale definitive trials are needed to verify or refute these findings. ■ SEE THE FULL ARTICLE AT PAGE 1131

Physical Impairment and Function in Children and Adolescents With Sickle Cell Disease: A Systematic Review

Marchese et al examined physical impairments and physical function in children and adolescents with sickle cell disease (SCD). They identified 57 articles supporting the fact that children and adolescents with SCD present with physical impairments and physical function limitations. Rehabilitation scientists and clinicians should consider developing collaborative standards to define and objectively measure changes in physical impairment and function experienced by children and adolescents with SCD. ■ SEE THE FULL ARTICLE AT PAGE 1144

Effects of Electrical Stimulation Training on Body Composition Parameters After Spinal Cord Injury: A Systematic Review

Hassan et al studied the effect of electrical stimulation training on body composition after SCI. They found that Neuromuscular Electrical Stimulation/ Functional Electrical Stimulation (NMES/FES) is an effective rehabilitation strategy for muscle hypertrophy and increasing lean mass. Weekly training volumes were associated with muscle hypertrophy after NMES loading exercise. Furthermore, positive muscle adaptations occurred despite the applied stimulation parameters. ■ SEE THE FULL ARTICLE AT PAGE 1168