


# All Facility Diagnoses

## 2024 Annual Outcomes Data

Diagnosis	Number of Those We Served	Average Length of Stay (Days)	Discharge Rate to Home or Community Setting	Discharge Rate to Skilled Nursing	Unplanned Transfers to Acute Care	Functional Improvement Gain
Cardiac	49	9.7	79.6%	4.1%	16.3%	95 %
Multiple Trauma	50	11.4	84%	6%	10%	93.2%
Neurological	109	9.9	85.3%	3.7%	11%	91.7%%
Brain Injury	219	10.7	78.5%	7.3%	13.7%	90.6%
Orthopedics	263	11	87.8%	5.7%	6.5%	91%
Spinal Cord Injury	72	12	79.2%	1.4%	19.4%	94.8%
Stroke	273	12.5	76.2%	9.2%	14.7%	89%
Amputation – Lower Extremity	18	11.4	100%	0%	0%	100%
General Rehabilitation	121	10	88.4%	3.3%	8.3%	91.89%
All Patients and All Diagnoses	1,174	11.1	82.4%	6%	11.6%	91.3%

	Total Number of Patients Served	Average Age	% Male	% Female	Average Number of Treatment Hours/Day	Patient Satisfaction with Services
All Patients and All Diagnoses	1,174	75	45.9%	54.1%	6	91.9%

### Mercy Rehabilitation Hospital South

10114 Kennerly Road | St. Louis, MO 63128  
 314.948.2180 | 833.673.0139 fax | MO TDD/TTY# 866.735.2460  
[www.mercy.net](http://www.mercy.net)



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# Spinal Cord Injury Outcomes

## 2024 Annual Outcomes Data

**DISCHARGE  
DESTINATION TO  
COMMUNITY**  
(Greater is better)

79.2%

**NUMBER OF  
PERSONS  
SERVED**

72

**AVERAGE  
LENGTH OF  
STAY**  
(Lower is better)

12  
days

**RETURN TO  
ACUTE CARE**  
(Lower is better)

19.4%

**FUNCTIONAL  
CHANGE IN  
SELF-CARE**  
(Greater is better)

18.1

Patients' functional activities for self-care are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of self-care of more than 15 points, greater than national averages.

**AVERAGE  
NUMBER OF  
HOURS OF  
TREATMENT  
PER DAY**

6

**FUNCTIONAL  
CHANGE IN  
MOBILITY**  
(Greater is better)

46.7

Patients' functional activities for mobility are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of mobility of more than 35 points, greater than national averages.

**SATISFACTION  
OF THE PERSONS  
SERVED WITH  
THE SERVICES  
RENDERED**

100%

**FUNCTIONAL  
EFFICIENCY**  
(Greater is better)

5.81

Patients' progression for self-care and mobility are measured per day of their rehabilitation stay to gauge progress made within the efficiency of the program. By the time patients leave the rehab program (discharge), we expect functional efficiency to measure more than 4.70, greater than national averages.

Source: MedTel® and UDS 2024

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# Amputation Outcomes

## 2024 Annual Outcomes Data

DISCHARGE  
DESTINATION TO  
COMMUNITY  
(Greater is better)

100%

NUMBER OF  
PERSONS  
SERVED

18

AVERAGE  
LENGTH OF  
STAY  
(Lower is better)

11.4  
days

RETURN TO  
ACUTE CARE  
(Lower is better)

0%

FUNCTIONAL  
CHANGE IN  
SELF-CARE  
(Greater is better)

15.9

Patients' functional activities for self-care are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of self-care of more than 15 points, greater than national averages.

AVERAGE  
NUMBER OF  
HOURS OF  
TREATMENT  
PER DAY

6

FUNCTIONAL  
CHANGE IN  
MOBILITY  
(Greater is better)

37.2

Patients' functional activities for mobility are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of mobility of more than 35 points, greater than national averages.

SATISFACTION  
OF THE PERSONS  
SERVED WITH  
THE SERVICES  
RENDERED

95.5%

FUNCTIONAL  
EFFICIENCY  
(Greater is better)

4.87

Patients' progression for self-care and mobility are measured per day of their rehabilitation stay to gauge progress made within the efficiency of the program. By the time patients leave the rehab program (discharge), we expect functional efficiency to measure more than 4.70, greater than national averages.

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# Brain Injury Outcomes

## 2024 Annual Outcomes Data

**DISCHARGE  
DESTINATION TO  
COMMUNITY**  
(Greater is better)

**78.5%**

**NUMBER OF  
PERSONS  
SERVED**

**219**

**AVERAGE  
LENGTH OF  
STAY**  
(Lower is better)

**10.7  
days**

**RETURN TO  
ACUTE CARE**  
(Lower is better)

**13.7%**

**FUNCTIONAL  
CHANGE IN  
SELF-CARE**  
(Greater is better)

**14.8**

Patients' functional activities for self-care are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of self-care of more than 15 points, greater than national averages.

**AVERAGE  
NUMBER OF  
HOURS OF  
TREATMENT  
PER DAY**

**6**

**FUNCTIONAL  
CHANGE IN  
MOBILITY**  
(Greater is better)

**40.4**

Patients' functional activities for mobility are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of mobility of more than 35 points, greater than national averages.

**SATISFACTION  
OF THE PERSONS  
SERVED WITH  
THE SERVICES  
RENDERED**

**91.1%**

**FUNCTIONAL  
EFFICIENCY**  
(Greater is better)

**5.30**

Patients' progression for self-care and mobility are measured per day of their rehabilitation stay to gauge progress made within the efficiency of the program. By the time patients leave the rehab program (discharge), we expect functional efficiency to measure more than 4.70, greater than national averages.

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# Stroke Outcomes

## 2024 Annual Outcomes Data

**DISCHARGE  
DESTINATION TO  
COMMUNITY**  
(Greater is better)

76.2%

**NUMBER OF  
PERSONS  
SERVED**

273

**AVERAGE  
LENGTH OF  
STAY**  
(Lower is better)

12.5  
days

**RETURN TO  
ACUTE CARE**  
(Lower is better)

14.7%

**FUNCTIONAL  
CHANGE IN  
SELF-CARE**  
(Greater is better)

14.8

Patients' functional activities for self-care are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of self-care of more than 15 points, greater than national averages.

**AVERAGE  
NUMBER OF  
HOURS OF  
TREATMENT  
PER DAY**

6

**FUNCTIONAL  
CHANGE IN  
MOBILITY**  
(Greater is better)

39.7

Patients' functional activities for self-care and mobility are measured when they arrive (admission) and throughout their rehabilitation stay. By the time patients leave the rehab program (discharge), we expect an increase in functional quality measures of mobility of more than 35 points, greater than national averages.

**SATISFACTION  
OF THE PERSONS  
SERVED WITH  
THE SERVICES  
RENDERED**

95.1%

**FUNCTIONAL  
EFFICIENCY**  
(Greater is better)

4.91

Patients' progression for self-care and mobility are measured per day of their rehabilitation stay to gauge progress made within the efficiency of the program. By the time patients leave the rehab program (discharge), we expect functional efficiency to measure more than 4.70, greater than national averages.

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