



MEDICAL PARK  
SCHLAGANFALLZENTRUM BERLIN

Partnerklinik der





## A cordial welcome

Approximately 200,000 Germans suffer a stroke each year with growing tendency. For this reason, amongst others, Medical Park AG decided to open the Schlaganfallzentrum Berlin within the Specialty Clinic Medical Park Berlin Humboldtmühle.

In my capacity as Medical Director of this centre equipped with state-of-the-art technologies, I have the opportunity to put expertise into practice, which I gathered through decades of professional experience in the field of neurological rehabilitation.

We specialize in providing targeted and high quality early rehabilitation services in an optimum setting beginning with the intensive care unit and ending with the classical inpatient rehabilitation programmes, which have proven to be

most beneficial particularly to patients with severe forms of neurological disorders. Our research and teaching activities at the Berlin Charité University Hospital and the Berlin Humboldt University and our active membership of Stroke Alliance, which was initiated by Berlin Charité University Hospital, support our standard in high quality rehabilitation care. In the environment of the Schlaganfallzentrum Berlin we bundle medical expertise, implement research results promptly and develop innovative technologies – for the great benefit of our patients.

With Regards,

Prof. Dr. med.  
Stefan Hesse (M. D.)



Prof. Dr. med. Stefan Hesse (M. D.)  
Chief Consultant of Neurology



The Schlaganfallzentrum Berlin addresses primarily patients which are referred from acute hospitals requiring in-patient early rehabilitation. The Schlaganfallzentrum Berlin begins to provide their high quality early rehabilitation services for patients in the intensive care unit setting already, which has proven to be most beneficial to patients with severe forms of disorders. Therapy in the intensive care unit setting is followed by uninterrupted further treatment

providing a seamless transition from injury to returning home, all under one roof. The Schlaganfallzentrum Berlin excels in sophisticated treatment programmes and diagnostic services including patient oriented research to optimize rehabilitation outcomes. We provide specialty therapy programs for patients with chronic conditions to improve the ability to walk for instance, arm-hand function including communication.



## Professional competence

The Schlaganfallzentrum Berlin has committed itself to provide the most sophisticated medical rehabilitation services to patients with acute or chronic conditions. Its Medical Director, Professor Dr. med. Stefan Hesse (M.D.), is a distinguished research scientist in the field of post-stroke rehabilitation of motor functions. With the objective to intensify treatment, he can take credit for the implementation of locomotion therapy, the treatment of spasticity and the development of therapeutic equip-

ment and therapeutic robot systems. In shared decision-making with the patient, his multiprofessional teams consisting of physicians, therapists and nursing care providers call on comprehensive and many years of experience pursuing their primary goal to achieve the best possible functional outcomes for their patients. The patient-oriented research setting helps to translate the latest scientific discoveries into action and to develop new methods of treatment.





## Intensive care unit

The clinic Medical Park Berlin Humboldtmühle is proud of having a modern Intensive Care Unit. Acute hospital intensive care units transfer patients to our intensive care unit. These most severely affected patients will be weaned from mechanical ventilation while they receive intensive early rehabilitation. The intensive care unit is equipped with the latest state-of-the-art technology.

Interdisciplinary teams of neurologists and cardiologists mutually provide care services and professional advice for patients, with the objective to cover all aspects of clinical treatment. Several beds are equipped with mechanical ventilation systems, while the remaining beds are designed for use as intermediate care beds (IMC). A portable mechanical ventilation system is provided for temporary treatments outside

the intensive care unit, for instance for preparation of computed tomographic imaging. There is also a portable digital X-ray system available for bedside X-ray screening of the lungs and any other procedures. Performance of X-ray images and their interpretation will always be provided for by Radiology.



## Diagnostics

Basis for each therapy is the collection of a comprehensive anamnesis, and in addition by the application of apparative diagnostics. Our diagnostic technologies, in particular the CCT (cranial computed tomography) providing services 24 hours a day, meet all requirements of a modern intensive care unit, the high quality intensive diagnostic study and determination of risk factors. Individual therapeutic targets will be

defined on the basis of the collected results.

Diagnostic systems available include:

- Computed tomography (CT)
- Computed nuclear spin resonance tomography
- Conventional X-ray imaging
- Diagnostics of dysphagia (endoscopic evaluation methods of dysphagia)
- Bronchoscopy

- Cardiac diagnostics including transesophageal echocardiography in the intensive care unit
- Ultrasonics including extracranial and transcranial Doppler sonography
- Electroencephalography
- Electrophysiological measuring station (EMG, VEP, AEP, SEP, nerve conduction velocity)
- In-house laboratory testing in case of emergencies
- Routine and specialty laboratory tests in cooperation with the Berlin Charité University Hospital.

In addition, patients and their relatives have the option to call upon specific counseling services with the objective to optimize secondary prophylaxis in order to investigate their potential risk factors for stroke, and to have their risk assessment card issued.





## Therapy

The Schlaganfallzentrum Berlin conceptually provides preferably early and intensive rehabilitation programmes complying with modern scientific demands. As a consequence, not only the classical phases B, C and D in in-patient rehabilitation are concentrated under one roof, this also includes an intensive care unit with the option of mechanical ventilation.

The major focus is put on seamless rehabilitation starting in the intensive care unit and ending after returning home.

Individual targets are specified in mutual decision-making together with the patients and their relatives. Top priority is to restore activities and participation in accordance with ICF classification model.

As a consequence, treatment exclusively follows a functional approach. For the different phases this implies:

- **In intensive care unit:**  
Weaning from mechanical ventilation,  
Promoting consciousness, Primary mobilization





- **In intermediate care unit:**  
Continue with promoting consciousness,  
Management of tracheal cannula,  
Initiation of swallowing
- **In early rehabilitation ward phase B:**  
Wheelchair mobilization, advancement  
for the competence to manage ADL  
(Activities of daily living), initiation of  
motor function, cognitive function and  
communication skills
- **In early rehabilitation ward phase C:**  
Rehabilitation to carry out activities of  
daily living, cognitive function and  
communication skills, including gait  
training and functional arm and hand  
motor training



- **In early rehabilitation ward phase D:**  
Continuous expansion of activities  
including activities of daily living to the  
greatest possible extent, active dis-  
charge management, with the objective  
to obtain best possible dovetailing of  
inpatient therapy with subsequent out-  
patient treatment

Therapeutic priorities:

- Locomotion studio for repetition of  
gait and stair climbing practices with  
the gait trainer GT I and the robot  
“G-EO-System” for wheelchair-bound  
patients, and for the improvement of gait  
speed and endurance for ambulant



- patients through aerobic treadmill  
training
- Mechanically guided and robot assisted  
arm training studio to intensify arm-hand  
rehabilitation
- Training of communication skills and  
cognitive function to carry out activities  
of daily living are specific treatment  
services available for patients with  
speech disorders and impaired mental  
abilities
- Specific outpatient services for  
investigation and diagnostics of dy-  
sphagia, of spasticity and for the supply  
of medical aids and supplies

## Relearning lost movement patterns

Many patients struggle to regain mobility after experiencing a stroke. The robot „G-EO-System“ supports and gently leads the patients in the continuous practice of walking situations. The wheelchair-bound patient is attached to a steel frame in a type of harness, their feet on plates whose trajectories can be fully programmed and imitate everyday walking situations: walking on a level, tripping, slipping or walking up and down the stairs. It is essential for mobility in everyday life to reacquire these abilities. Objective is to try to practice these exercises as naturally as possible. As a result of artificial foot movement the slack muscles between toes and hips are forced into action again.

## Back to everyday life with the ADL course

Crossing a pedestrian crossing, mounting a pavement, refuelling a car? Patients who suffer from neurological disorders, after a stroke for instance, frequently encounter considerable problems in trying to perform these operations. The „ADL course“ at the Schlaganfallzentrum Berlin is a valuable tool that teaches patients how to conquer these problems. The ADL course includes a multi-disciplinary integrative therapy

concept to attain and improve competence in everyday life for patients with neurological disorders. Patients should learn to participate in everyday life again, as independently as possible. Principal issues of this concept comprehend training the arm function for instance, gait training including the domains of living at home and participation in road traffic.



## Service and ambience

The Schlaganfallzentrum Berlin is the place for you to recover, and it is designed to give their residents a sense of home and well-being. In addition to its medical and therapeutic competence, the clinic provides the stylish ambience of a first-class hotel. Both, the high quality equipment features including comfortable amenities and courteous and attentive service are a contributing part of this.

The Schlaganfallzentrum Berlin is located amidst the green lung of Berlin,

there, where the River Tegel joins Lake Tegel and vast forests begin – on the northwest shore of the lake, on the edge of Tegel Forest and next to Humboldt Castle. This is the place, where you can experience rural tranquility in a setting of natural ancient forests that have been growing for hundreds of years – in the urban area of Berlin.

The clinic Medical Park Berlin Humboldtmühle provides of 267 spacious rooms measuring from 20 to 35 m<sup>2</sup> which significantly differ from traditional patient

rooms. All rooms including 7 suites and 11 junior suites are barrier-free and located in lovingly restored historic buildings which in part have listed building status. Stylish furnitures and features are in full harmony with elegant accessories. Standard amenities include height-adjustable beds, direct dial telephone, free LCD TV and ensuite safe including spacious and wheelchair friendly bathrooms and showers.



## Certification



### Information and service\*

Phone 0 800/1 22 37 00

Fax 0 800/1 22 38 00

\* domestic calls are free of charge

### Physical address:

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the clinic Medical Park Berlin Humboldtmühle is located in the northwest of Berlin city and is easily accessible from all directions – including private car, railway or airplane.

There is a bus stop in front of our clinic, the underground station Alt-Tegel (U6) is only a 5 minutes walk away. For detailed travel directions, please refer to our website [www.medicalpark.de](http://www.medicalpark.de).



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Recovery and an overall sense of well-being in a dream location