

REHABILITATION FOR PATIENTS WITH COVID-19

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Abstract

The COVID-19 pandemic has posed new and complex challenges to healthcare systems around the world. This article examines the organization of medical rehabilitation for patients infected with COVID-19, the stages of the rehabilitation process, existing problems, and solutions to overcome them. The goal is to improve the quality of life of patients and restore their ability to work through effective medical rehabilitation.

Keywords: COVID-19, rehabilitation, pandemic, medical staff.

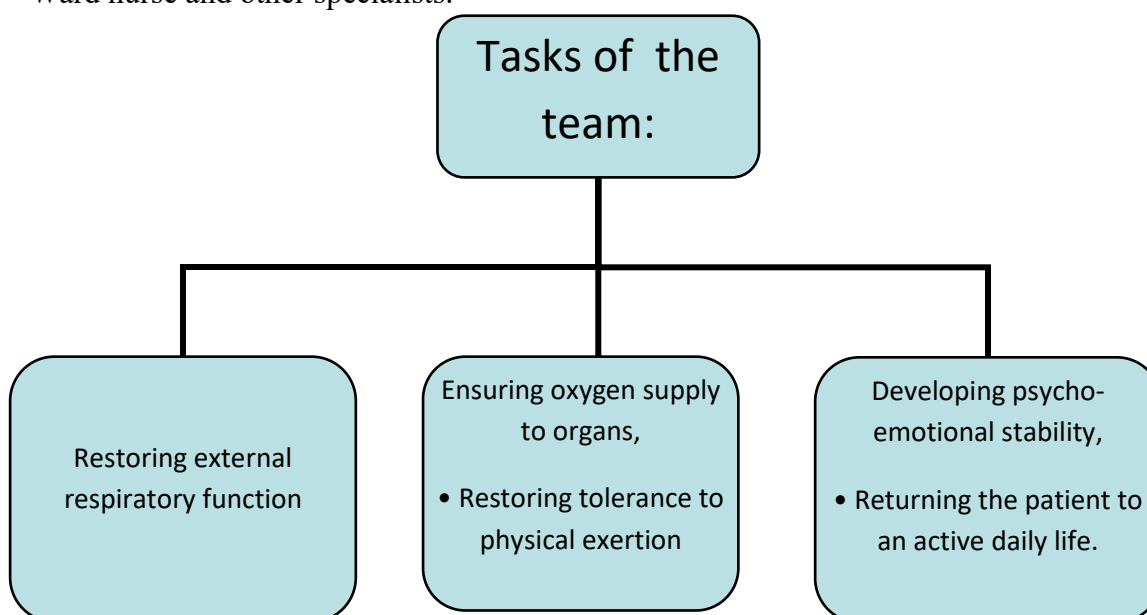
Introduction

Medical rehabilitation is essential for full recovery in patients with coronavirus pneumonia. Rehabilitation should begin after the patient's condition stabilizes. It is initially continued in intensive care units, then in hospitals, at home, and in sanatorium-resort institutions.

Organization of the rehabilitation process

A multidisciplinary rehabilitation team (MDR) should be formed to provide rehabilitation services to patients with COVID-19. This team should include:

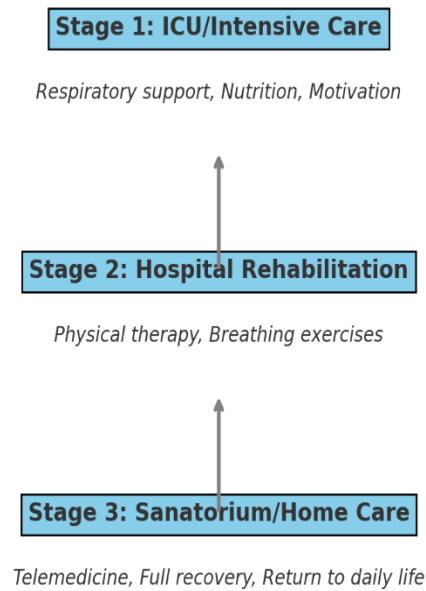
- Attending physician,
- Physiotherapist,
- Physical therapy doctor,
- Instructor-methodologist,
- Ward nurse and other specialists.



Problems and solutions

- The isolation period during the recovery period (14 days) can delay rehabilitation.
- Lack of specialists involved in rehabilitation.
- Mental and physical fatigue of medical workers working in the “red zone”.

COVID-19 Rehabilitation Algorithm for Patients



Solutions:

- Organization of training via telemedicine.
- Acceptance of rehabilitation as an integral part of treatment.
- Scheduling of work activities and psychological support for medical workers.

Scientific and practical results

During the study, a 3-stage rehabilitation system was introduced, and active recovery was achieved in patients with COVID-19, who also had problems with the central and peripheral nervous system, cardiovascular system, and musculoskeletal system. A multidisciplinary approach served to increase efficiency.



Stages of rehabilitation

3. Stage 3: Carried out in sanatorium-resort institutions or at home, based on a roadmap. At this stage, the use of telemedicine tools is

Stage 1: Begins in the intensive care unit. In patients with a stable general condition, respiratory rehabilitation, after

2. Stage 2: Continues in therapeutic and special rehabilitation units. Here, physical exercises and respiratory gymnastics are intensified.

Conclusion

COVID-19 has become a serious test for the world's healthcare system. A complete cure for this disease requires not only getting rid of the virus, but also complete rehabilitation. Through targeted and systematic rehabilitation measures, it is possible to improve the quality of life of patients, return them to a healthy lifestyle, and restore their ability to work. Therefore, specialists must develop a medical rehabilitation algorithm for patients infected with COVID-19.

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