

## Who we serve...

**Our SCI System of Care provides a full spectrum of care to Veterans and Service Members who have sustained a spinal cord injury or have a stable neurologic impairment of the spinal cord. This includes:**

(1) All traumatic spinal cord injuries due to such events as motor vehicle accidents, falls, and acts of violence; and

(2) Non-traumatic, non-progressive spinal cord disorders (SCD)

- **Examples include:**

- Benign spinal cord or vertebral tumors with significant spinal cord dysfunction.
- Spinal cord involvement (myelopathy) due to spinal stenosis, herniated disc, or other vertebral column degenerative changes
- Arterio-venous malformation that results in myelopathy.
- Demyelinating disease primarily involving the spinal cord and of a stable nature
- Epidural abscess that results in spinal cord dysfunction.
- Other vascular, inflammatory, or infectious etiology with significant involvement of the spinal cord

- **The following principles and conditions describe the SCD population served.**

- The condition results in significant problems with mobility, activities of daily living, and/or visceral/autonomic deficits (e.g., neurogenic bladder or bowel problems).
- Any level of the spinal cord, conus medullaris, or cauda equina is involved.

### **Exceptions and qualifiers to the SCI/D population served**

**Although the clinical presentation may be similar in appearance to an SCI/D, Veterans with the following pathologic entities are not routinely admitted to SCI Centers:**

- a. Neurological impairment due to intracranial or peripheral nerve disorders.
- b. Multiple sclerosis that is progressive, in active relapse, and/or with extensive cognitive, swallowing, and visual impairments.
- c. Veterans with diagnoses that do not affect the spinal cord.

Note: Veterans with other etiologies that result in spinal cord dysfunction, e.g. Multiple sclerosis (MS) with significant extra-spinal involvement or Amyotrophic Lateral Sclerosis (ALS) may be accepted on a case-by-case basis for initial rehabilitation, or focused consultative management and follow-up on the SCI service when the SCI staff has particular, specialized knowledge that is needed to provide quality care to these Veterans. In such cases, the scope of SCI services is typically limited, and ongoing primary care, admissions for medical or surgical management, and long-term care services are provided outside of SCI Service.