

Geriatric Assessment and Management

Chapter 33

General Principals

- Never assume altered mental status is normal.
 - May have to rely on family or caregiver to establish patient's baseline LOC
- The average geriatric patient takes four or more medications
 - Ask about medications recently started or stopped
 - Use of Blood Thinners may effect care
- Normal aging may affect physical findings
 - Increased BP, respiratory changes
- Chronic changes can mask acute problems
 - Ongoing assessments will help determine changes
 - Geriatric patients have decreased ability to compensate

Traumatic Injuries

- Common mechanisms of injury
 - Falls
 - Motor vehicle trauma
 - Pedestrian accidents
 - Burns
- Confounding factors:
 - Dentures or other dental implants
 - Decreased ability to compensate
 - Medical conditions or previous injuries
- Osteoporosis is a contributing factor to spinal injuries
- Hip Fracture- Pelvic ring disruption can lead to hemorrhage or internal organ injury
 - Maintain leg in static position to prevent further injury



Medical Emergencies

- Determining chief complaint is challenging.
 - Multiple conditions and complaints
 - Ask what bothers them most today.
- Sensation of pain may be diminished.
- Fear of hospitalization
- Conditions may present differently
- Many have “silent” heart attacks.
- Common signs and symptoms
 - Difficulty breathing
 - Toothache
 - Arm pain
 - Back pain
- **Septicemia**- Results from presence of microorganisms or their toxic products in bloodstream

Response to Nursing and Skilled Care Facilities

- Important information to know from staff:
 - What is the patient's chief complaint today?
 - What initial problem caused the patient to be admitted to the facility?
- Ask the staff about the patient's overall condition.
- Obtain any type of transfer papers