Chapter 33 Geriatric Emergencies

Geriatrics (1 of 2)

- Geriatric patients are individuals older than ________ years of age.
- In 2000, the geriatric population was almost 35 million.
- By 2020, the geriatric population is projected to be greater than ________ million.

Geriatrics (2 of 2)

- Older people are major _______________________ of EMS and health care in general.
- Effective treatment will require an increased _______________________ of geriatric care issues.

Risk Factors Affecting Elderly Mortality

- Age greater than 75 years
- Living ______________________
- Recent death of significant other
- Recent ______________________
- Incontinence
- ______________________
- Unsound mind

Communications (1 of 2)

- Show the patient ______________________.
- Position yourself at eye level in front of the patient facing the patient
  - Allows for reading of lips
- Speak slowly and distinctly.
- Ask only one _______________________ at a time
- Give the patient time to answer.
- Be ______________________.
Communications (2 of 2)

- Older patients may need a little more _______________ to process your question.
- Show patience and _______________.

The GEMS Diamond (1 of 4)

- Created to help you remember what is _______________ about older patients
- Not intended to be a _______________ for the approach to geriatric patients
- Not intended to replace the ABCs of care
- Serves as an acronym for the issues to be considered when assessing every older patient

The GEMS Diamond (2 of 4)

- _______________ patients: Normal aging, atypical presentation
- _______________ assessment: Safety, neglect
- _______________ assessment: Past history, medications
- _______________ assessment: Basic needs, social network

The GEMS Diamond (3 of 4)

- Geriatric patient
  - Older patients may present _______________.
- Environmental assessment
  - The environment can help give clues to the patient’s condition and the cause of the emergency.
- Medical assessment
  - Obtain a thorough medical _______________.
10 **The GEMS Diamond (4 of 4)**
- Social assessment
  - Older people may have ________________ of a social network.
  - They may also need assistance with activities of daily living.
  - Consider obtaining information pamphlets about some of the ________________ for older people in your area.

11 **Leading Causes of Death**
- Heart disease
- ________________
- Stroke
- COPD and other respiratory illnesses
- ________________
- Trauma

12 **Common Stereotypes**
- Common ________________ include mental confusion, illness, sedentary lifestyle, and immobility
- Older people can stay fit; most older people lead very ________________ lives.

13 **Physiologic Changes (1 of 3)**
- Skin
  - Susceptible to injury; longer ________________ time
- Senses
  - ________________ of the senses
- Respiratory system
  - Decreased ability to exchange gases
Physiologic Changes (2 of 3)
- Cardiovascular system
  - Increased risk of cardiovascular disease
- Renal system
  - Decline in __________________________________ function
- Nervous system
  - _______________________ impairment, decreased psychomotor skills, shrinkage of brain

Physiologic Changes (3 of 3)
- Musculoskeletal system
  - Decrease in muscle _______________________ and strength
- Gastrointestinal system
  - Decrease in ability of body to digest food properly
- Respiratory system
  - Very prone to respiratory illness
  - _______________________ is the leading cause of death in geriatrics

Dementia (1 of 3)
- _______________________ onset of progressive disorientation, shortened attention span, and loss of cognitive function
- Chronic, generally irreversible condition that causes a progressive loss of:
  - _______________________ abilities
  - Psychomotor skills
  - Social skills

Dementia (2 of 3)
- Dementia is the result of many neurologic _______________________ , and may be caused by:
- Alzheimer disease
- Cerebrovascular accidents
- _______________________ factors

18  **Dementia (3 of 3)**
On assessment, patients may:
- Have short- and long-term memory loss
- Have a decreased _______________________ span
- Be unable to perform daily routines
- Show a decreased ability to _______________________
- Appear confused or angry
- Have impaired _______________________
- Be unable to vocalize pain

19  **Delirium (1 of 3)**
- _______________________ change in mental status, consciousness, or cognitive processes
- Marked by the inability to focus, think logically, and maintain attention
- Affects 15% to 50% of hospitalized people aged 70 years or older
- Acute _______________________ may be present.

20  **Delirium (2 of 3)**
- This condition is generally the result of a reversible _______________________ ailment, such as tumors or fever, or metabolic causes.
- In the history, look for:
  - Intoxication or withdrawal from alcohol
  - Withdrawal from _______________________
  - Certain medical conditions

21  **Delirium (3 of 3)**
- In the history, look for (cont’d):
- Psychiatric disorders such as 
  _______________________
- Malnutrition/vitamin deficiencies 
- Environmental emergencies 

● Assess and manage the patient for:
  - _______________________
  - Hypovolemia 
  - _______________________

22 Geriatrics and Trauma (1 of 2)
● An older patient may have ________________________ ability to localize even simple injuries.
● Assessment must include all past medical conditions.
● _________________________ are the leading cause of trauma death and disability in the elderly.

23 Geriatrics and Trauma (2 of 2)
● Motor vehicle trauma is the ________________________ leading cause of death.
● The body’s ability to ______________________ simple injury decreases.
● Medical conditions can result in falls or MVCs.

24 Cardiovascular Emergencies
● _______________________
  - Interruption of blood flow to the brain 
  - Many underlying causes 
● Heart attack 
  - Classic ________________________ often not present

25 Acute Abdomen (1 of 3)
● Acute abdominal _______________________
  - Walls of the aorta weaken. 
  - Treat for shock and provide prompt transport.
● Gastrointestinal bleeding
  - Blood in _______________________
  - May cause shock

26 Acute Abdomen (2 of 3)
Bowel obstructions:
● Vagus nerve is stimulated and produces ______________________ syndrome.
● Vasovagal syndrome can cause dizziness and ______________________ .
● Patient requires transport to rule out other conditions.

27 Acute Abdomen (3 of 3)
Older patients with abdominal pain have higher chances of hospitalization, ______________________ , and death than younger patients.

28 Altered Mental Status
● ______________________
  - Recent onset
  - Usually associated with underlying cause
● ______________________
  - Develops slowly over a period of years

29 Psychiatric Emergencies (1 of 2)
● ______________________ is common among older adults.
● Physical pain, psychological distress, and loss of loved ones can lead to depression.
● ______________________ are more likely to suffer depression.

30 Psychiatric Emergencies (2 of 2)
● Older men have the highest ______________________ rate.
● Older patients use much more lethal means.
● EMT-Bs should consider all suicidal thoughts or actions to be _______________________.

**Advance Directives**
● Do not resuscitate (DNR) orders give you permission not to attempt to resuscitate.
● DNR orders may only be valid in the health care facility.
● You should know state and local protocols regarding advance directives.
● In Texas, only the DSHS ______________________ DNR can be honored by EMS
● When in doubt, initiate _______________________.

**Elder Abuse (1 of 2)**
● This problem is largely ________________________ from society.
● Definitions of abuse and neglect among older people vary.
● Victims are often ________________________ to report an incident.
● Signs of abuse are often overlooked.

**Elder Abuse (2 of 2)**
Nursing home residents who receive no ________________________ have a higher likelihood of abuse and neglect.

**Assessment of Elder Abuse (1 of 2)**
● ________________________ visits to the emergency room
● A history of being “accident prone”
● Soft-tissue injuries
● Vague ________________________ of injuries
• Psychosomatic complaints

35 Assessment of Elder Abuse (2 of 2)
• Chronic _______________________
• Self-destructive behavior
• Eating and sleeping disorders
• Depression or a lack of energy
• Substance and/or _______________________ abuse

36 Signs of Physical Abuse
• Signs of abuse may be obvious or
  _______________________.
• Obvious signs include bruises, bites, and burns.
• Look for injuries to the _______________________.
• Consider injuries to the genitals or rectum with no
  reported trauma as evidence of abuse.

37 Assessing the Geriatric Patient

38 Scene Size Up (1 of 2)
• Be keenly aware of the _______________________ and
  why you were called.
• Scene safety should include looking for unsafe
  conditions.
• Look for _______________________.
  – Steep stairs, missing handrails, poor lighting, other fall
  hazards

39 Scene Size Up (2 of 2)
• The general condition of the _______________________ will provide clues.
  – Cleanliness, heat, lighting, food
• Look for signs of activities of
  _______________________ living.
- Personal hygiene, getting dressed, food preparation

- Scene size-up continues throughout call.
- Does someone else live there who could help answer questions?

40 Primary Assessment

- Never assume altered mental status is ____________________ .
- May have to rely on family or caregiver to establish patient’s baseline LOC
- Assess the patient’s chief ____________________________ and ABCs.

41 History Taking (1 of 2)

- ____________________________ is usually the key in helping to assess a patient’s problem.
- Patience and good communication skills are essential.
- Treat the patient with respect.
- ____________________________ the patient and speak in a normal tone.

42 History Taking (2 of 2)

- Obtain a list of medications and ____________________________
- Often have multiple medication
- Ask about ____________________________ recently started or stopped.
- Determine if the patient has taken other medications.
- Meds may alter S/S
- Sensation of ____________________________ may be diminished

43 Medication Use

The average geriatric patient takes
or more medications.

**Polypharmacy**
- Polypharmacy refers to the use of _______________ prescriptions by a single patient.
- Older people account for a large portion of overall medication usage.
- Many medications can have interactions or _______________ actions when taken together.

**Secondary Assessment: Physical Exam (1 of 2)**
- Very beneficial in assessment of geriatric patients
- Be aware that elderly are more prone to _______________ during assessment.
- Remove only necessary clothing during the examination.
- Look for bruising or other signs of _______________

**Secondary Assessment: Physical Exam (2 of 2)**
- Many times, geriatric patients do not realize that they have _______________ or other symptoms
- Can help to clarify vague complaints
- ALWAYS check _______________ sounds
- Check vital signs

**Reassessment (1 of 2)**
- Repeat the primary assessment.
  - A geriatric patient has a higher likelihood of _______________ after trauma.
- Interventions
  - Broken bones are common and should be splinted.
  - Do not force a patient with joint flexion or curved
Reassessment (2 of 2)

- Normal _______________________ may affect physical findings.
  - Increased BP, respiratory changes
- Chronic changes can mask acute problems.
- Reassessments will help determine changes.
  - Geriatric patients have decreased ability to _______________________.

Common Complaints

1. _______________________
   - Chest pain
   - Altered mental status
   - Dizziness or weakness
2. _______________________
   - Trauma
   - Falls
   - Generalized _______________________
   - Nausea, vomiting, and diarrhea

Trauma Assessment (1 of 2)

Common mechanisms of injury:

- _______________________
  - Motor vehicle trauma
  - Pedestrian accidents

Trauma Assessment (2 of 2)

- Priorities in rapid scan are the same.
- Confounding factors:
  - Medical conditions or _______________________ injuries
- _________________ or other dental implants
- Decreased ability to compensate
- _________________ associated with aging

**Injuries to the Spine**
- Classified as stable or unstable
- _________________ is a contributing factor to spinal injuries.
- Prompt spinal immobilization can reduce further damage and pain.
  - _________________ void spaces.

**Head Injuries**
- Assume a significant injury in older patients who have signs and symptoms of head injury.
- Suspect _________________ injury in patients who take blood thinners and who suffer head injury.
- Maintain oxygen delivery to _________________.

**Injuries to Pelvis and Hip Fractures**
- Often present as hip or _________________ pain
- Pelvic ring disruption can lead to hemorrhage or internal organ injury.
- Hip fractures:
  - Common debilitating injury
  - Maintain leg in _________________ position to prevent further injury.

**Hip Fracture**
- _________________ rolls maintain the leg in a static position so that further injury does not occur.

**Medical Emergencies**
- Determining chief complaint is challenging.
- _______________________ conditions and complaints
- Ask what bothers them most today.
- Sensation of pain may be diminished.
- Fear of _______________________ 
- Conditions may present _______________________.

57 **Cardiovascular Emergencies**
- Classic _______________________ are often not present.
- Many have “_______________________ ” heart attacks.
- Common signs and symptoms
  - Difficulty breathing
  - _______________________
  - Arm pain
  - Back pain

58 **Dyspnea**
- Related to many causes
  - _______________________
  - COPD
  - Congestive heart failure
  - _______________________
- Provide oxygen for all patients experiencing dyspnea.

59 **Syncope**
- Can occur for many reasons in geriatric patients
  - Standing up too fast
  - _______________________
  - Myocardial infarction
  - Diabetic shock
  - _______________________

60 **Altered Mental Status**
• _______________ onset is not normal in any patient.
• Most sudden changes are caused by a reversible condition.
• _______________ is a common cause of AMS in the geriatric patient
• Evaluate and treat for hypoxia or hypoglycemia if present.

61 Acute Abdomen
• Complaints of abdominal pain in older patients usually indicate a serious event.
• Nervous system response to pain is lessened.
• Consider gastrointestinal problems or abdominal aortic aneurysm.

62 Septicemia
• Results from presence of microorganisms or their _______________ products in bloodstream
• Patients may present with:
  - Hot, flushed appearance
  - Tachycardia and tachypnea
  - _______________
  - Chills, cough

63 Response to Nursing and Skilled Care Facilities
• Important information to know from staff:
  - What is the patient’s chief complaint _______________ ?
  - What initial problem caused the patient to be admitted to the facility?
• Ask the _______________ about the patient’s overall condition and normal LOC.
• Obtain any type of transfer _______________
Dying Patients

- More patients are choosing to die at home rather than in a hospital.
- Dying patients receive _______________________ care.
- Be understanding, sensitive, and compassionate.
- Determine if the family wishes for the patient to go to the hospital or stay in the home.
- Caution with legal issues; follow _______________________ 

Key Points  (1 of 2)

- Don’t ________________________ , most geriatrics are healthy.
- Aggressive history taking.
- May or may not have classic C/C.
- Medication history is very important. Take medications to ER.
- Treat patient with _______________________ .

Key Points  (2 of 2)

- Be aware of special needs
  - Eye _______________________
  - Hearing aide
  - Walker
- See that patient’s husband or wife is cared for
- See that patient’s _______________________ are secured