



March 2012

Parents in the ER - Are They Getting the Right Care?

Dad went into the hospital – What do I need to do?

“What do you mean you didn’t give him the medication that he’s been taking for two years and it was on his admitting list?” “How did you lose her teeth?” “Why didn’t the ER send their records to the floor when Mom was admitted?” “You think she should drive, when she can’t remember 15 minutes after being given an instruction? Oh, you didn’t know she had a dementia!”

I value the dedication, the skills and the often heroic efforts made by the professionals in hospitals. However, without an advocate, care can fall between the cracks since the medical staff can only act on the information that they have on hand. This newsletter will give you ideas of what families or surrogate family members need to do when a family member is admitted to a hospital. I will explore five suggestions from a list of ten: “Checklist for When Your Aging Family Member is Hospitalized.” If you would like the complete checklist, just email a request to info@Eldercareanswers.com and we will send it to you.

As we age, our bodies fail us. As family members, we are often called upon to support our parent’s frail or failing health status. The reality of longer lives is that we don’t just die; we have events or chronic issues that need the skills and treatments that acute care hospitals can provide. Below are five items of the ten on the checklist to make sure your parent is receiving the right care:

1. Medications: It is extremely important to get to the ER as soon as possible so that you can give history, a current list of medications and the names of doctors that your family member sees regularly. Keep this list current; know the purpose of each medication and for how long it has been



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taken. If your parent is in assisted living, ask the facility to print out their current Medication Administration List (MAR). Review it against what the ER has received. Wrong lists may be sent to the ER. Follow and cross-check that med list. Don’t assume this information went to the floor and that the ER takes your list to the receiving unit in the hospital. When medications are discontinued or changed, ask why. It is possible a drug is being given that was not tolerated in the past and you need to communicate that to the professionals treating your family member.

2. History: Give the admitting doctors as much of your parent’s health history as possible. They will be making decisions and treatment plans based on the presenting problem and the history. Be prepared to do this multiple times.

3. Valuables and removable items: (teeth, hearing aids, glasses, wedding rings) Be sure to list these items on admission. I recommend taking jewelry home – because many tests require that they be taken off. Ask that they check for dentures, hearing aids and glasses after every change of bedding, clothing, bath or meal.

4. Diet: If your family member is put on a special diet – such as pureed foods, ask for a speech evaluation to see if they can return to a regular diet or the previous diet enjoyed. Sometimes a special diet must

continue, but at other times it is based on a decision made on an admitting diagnosis – ask questions.

5. Treatment Plan: Because most hospitals now have Hospitalists who are not the primary doctor and they change every few days – orders and treatments might not get communicated clearly to the next on duty health care professional. Ask to speak to the attending physician so you can be up to date on the plan of care and can be prepared for the next level of care.

I have needed to fall back on this checklist myself. I value the interventions and the willingness of the professionals treating my mother to give us hope for a better outcome thanks to new procedures, medications and treatments – some just approved by the FDA. Just because she is 89, they have not given up on her and neither will I. Aware that she has finite days with us, as do all our parents, I am realistic that at some point we just might have to embrace Hospice to make her life more comfortable as she gets closer to the end of her life.

If you don’t live close to a parent or you are a busy professional, having a certified Geriatric Care Manager to be your parent’s advocate might make a huge difference on the outcome of any hospitalization.

If you want the ten point “Checklist for When Your Aging Family Member is Hospitalized,” call or send us an e-mail. And remember, discharges can be scary when all the pieces don’t fall together!

Eldercare Services provides Counseling, Support Groups, Home Care and Care Management to aid Family Caregivers. If you or someone you know could benefit from self-care, give us a call at **(866) 760-1808** or email us at Info@EldercareAnswers.com.

Eldercare Services works with Seniors and their families in Walnut Creek, Alameda County, San Francisco, Marin County and the Tri-Valley, CA.

Visit us on the web at www.EldercareAnswers.com for more information.

Community Classes

Walnut Creek

Dementia: 101

For Families Experiencing the Challenge

3rd Friday of every month from 10 AM to Noon

1808 Tice Valley Blvd., Walnut Creek, CA 94595

Cost for Classes: None

Class Registration:

Please call at least 3 days ahead

For more information regarding classes and support groups, visit us at www.EldercareAnswers.com or call (925) 937-2018 or email us at Info@EldercareAnswers.com

Support Groups

When concerns for aging family members are part of every day life, or when they interfere with work, your health or other relationships, you need to join a support group.

Caring for An Aging Family Member

2nd Thursday of every month from 7 to 8:30 PM

1808 Tice Valley Blvd., Walnut Creek, CA 94595

1st Tuesday of every month from 6 to 7:30 PM

605 A Chenery St., San Francisco, CA 94131

Cost for Support Groups: None

Support Group Registration: Not required

More Info: (925) 937-2018 or (415) 469-8300



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Advocacy, Care, and Education

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