

10 Commandments of Care for the Hospitalized Elderly

- 1) Bed rest is for dead people (and a few others). Get people moving! - 1 day in bed = 5% total strength loss, takes 3 days of intense rehab to erase; Hospital Associated Functional Decline → inability to care for self developing during acute illness, affects 30% of older inpatients!
- 2) The fewer drugs, the better. Review & tailor meds daily. Hospitalization is an opportunity to reduce inappropriate outpatient meds; don't be shy about talking statins, BP meds!
- 3) Curate tethers (legami): remove IVs, catheters ASAP (aspiration catheter kit). Make a case for adding tethers in the first place.
- 4) Delirium is a medical emergency. Assess cognitive status daily, prevention is KEY.
- 5) Treat with antipsychotics only when necessary; start with low oral doses for dangerous or refractory behaviors.
- 6) Treat restraints as a last resort.
- 7) Watch for and address depression.
- 8) Pay attention to food & fluids consumed. Ask early if intake declines. Remember taste and thirst thresholds are higher in older adults!
- 9) Discharge planning starts on admission!
- 10) Be proactive discussing goals of hospitalization.