

# Five tips for bringing your elderly loved one to the emergency department

July 7 2015, by Kevin Biese And Jan Busby-Whitehead

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Getting old is tough. Taking care of an aging loved one is tough, too. And the difficulties of navigating health-care systems do not help. Sadly, many older adults are chronically ill and frail, resulting in many trips to the doctor for gradually worsening medical conditions. It can be difficult to get appointments with your primary care doctor, doctor's assistant or nurse practitioner on short notice, so patients, and particularly older adults, often end up repeatedly needing care in Emergency Departments (ED). Though the doctors and nurses working in EDs are well trained, hard working, and leaders in critical care, EDs are usually not well designed for frail older adults and the doctors in the ED are unlikely to know your loved one's medical history. However, there are some important steps you can take to help the older adult you are caring for get the care they need and deserve.

## **Always have an updated list of medications and medical conditions available**

It is very important that the [doctors](#) taking care of your loved one know what medications they are on and what health issues they have, so they can make sure the treatments and medications they prescribe are the right ones. In a perfect health-care system, the doctors would have your loved one's medical records on hand. Now, however, a patient's medical records are only available in the hospitals in which they have been seen before, or, sometimes, those hospitals that use the same electronic health record. For this reason, it is important that you bring a list of current

medications, the actual pill bottles for the medications, and a list of health conditions every time your loved one goes to the ED. Insist on showing the lists and pill bottles not just to the nurse or technician who initially checks the patient in, but to every doctor who sees the patient. Every doctor who cares for your loved one needs to know this information.

## **Ask the ED provider to call your primary care provider whenever possible**

Your loved one's primary care doctor knows the health-care plan and conditions of his or her patients. The ED doctor is often trying to take care of patients with many medical problems and a complex history without having enough information. Connecting the ED doctor with your doctor is the best way to ensure good care when your loved one is in the ED and also to prepare a smooth and safe transition for when he or she leaves the hospital.

## **Ask to stay with your loved one**

EDs are full. Too full. As a result, some EDs limit the number of guests allowed to stay with a patient. However, when [older adults](#) are in the ED, particularly those with dementia or confusion, it is very important that at least one loved one stay with them. People with dementia are likely to become acutely confused (delirious) and agitated or withdrawn when sick or in a new environment. Having a loved one with the patient who can reassure and comfort them is incredibly valuable. The loved one can help represent the patient's wishes to all the doctors and nurses and help make sure the patient gets food whenever possible or is able to use the restroom when needed. Delirium is dangerous. Helping your loved one not become confused is more than just helping them be comfortable – it is keeping them safe.

## **Talk to your loved one about their wishes for end-of-life care/resuscitation measures (Advance Directives and POLST/ MOST forms)**

While your loved ones are still able to tell you their health-care wishes, be sure you understand the care they want when they are too ill to advocate for themselves. Learning which medical treatments your loved one desires is a tough conversation to have but an important one. Most of us will one day be in a situation where these decisions have to be made, and the team of doctors will likely turn to the family to help make them. Being prepared is critical to knowing that you can advocate for your loved ones on these tough days. Working with your loved one to create an advance care directive which describes what future medical treatments they want and appoints a Health Care Representative is an important step to being prepared.

Physician Orders for Life – Sustaining Treatment (POLST) and Medical Orders for Scope of Treatment (MOST) forms provide medical orders for current treatment. These forms are only recommended for patients whom a health-care professional would not be surprised if they passed within one year. They help make sure that all health-care providers, including ED doctors and nurses, are able to act in accordance with your loved one's wishes.

## **Prepare for your loved one's discharge from the ED**

Older adults sent home from the ED are at high risk of getting sick again and having to return to the ED or be admitted to the hospital. Yet, since many older adults actually get sick, confused, and weak in the hospital, it is still often the best decision to not admit your loved one to the hospital but rather send them home when possible. Safely discharging older adults from the ED requires careful planning.

1. It is always good to have at least two people listen to the discharge instructions. There is a lot of critical information given to the patient and/or caregiver from the person sending the patient home (often the nurse) from the ED in a short period of time. It is best to repeat the information you are told back to the nurse to make sure you understand it correctly. Also be sure it is all written down in the discharge instructions so you can share this with your doctor.
2. If your loved one lives at a skilled nursing facility, make sure the nurse calls the facility and speaks with the nurse taking care of your loved one. This will allow those who care for your family member to take the right care of him or her after they return from the ED.
3. Be sure that your family member sees their own doctor soon after leaving the ED, and bring the paperwork and all medicines given from the ED visit. This will ensure that the [primary care](#) doctor knows all that happened in the ED, double checks all the medications that are given, and then can keep your loved one on the track to getting better.

Finding the way through the health-care system with a frail older adult is challenging. While the system continues to improve, taking the steps above can go a long way towards helping your loved one have a safe, healing experience when and after seeking care in the ED.

Provided by University of North Carolina at Chapel Hill School of Medicine

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