





Emergency Medical Responder

# GERIATRIC CONSIDERATIONS



When dealing with the elderly

- ✓ Always treat them with respect
- ✓ Never assume they can not hear you
- ✓ Explain who you are and what you are doing
- ✓ Seek information from family members only after questioning the patient





**TABLE 15-1**  
PHYSICAL AND FUNCTIONAL CHANGES IN THE OLDER ADULT

Body System	Changes	Complications
Skin	Decreased perspiration Decreased oil secretion Loss of fat and weakening of supportive structures beneath the skin	Heat-related illnesses Masked signs of shock Decreased resistance to infection Easily torn skin Bedsore
Sensory organs	Diminished vision Diminished hearing Diminished pain sensation Diminished taste and smell	Falls, motor vehicle crashes Unable to read directions for medication Unable to hear warnings such as smoke alarms or sirens May be unaware of injury or seriousness of injury Decreased appetite, malnutrition Unable to smell smoke or leaking gas

*(continued)*

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**TABLE 15-1** Continued

Respiratory system	Weakened chest muscles Less lung capacity	Less able to compensate when the body needs oxygen
Circulatory system	Decreased strength of heart contraction High blood pressure Blockage of blood vessels	Cannot meet higher demands for blood flow Heart attack, stroke, poor circulation to extremities Masked signs of shock
Digestive system	Ulcers, tumours Dental problems	Gastrointestinal bleeding Malnutrition Choking on poorly chewed food
Urinary system	Incontinence	Catheterization, possibly leading to infection
Musculoskeletal system	Diminished muscle strength Weakened bone structure	Minor falls or bumps, possibly leading to broken bones
Nervous system	Fewer nerve fibres Alteration in chemical balance	Decreased sensory perception Depression Impaired sleep
Immune system	Diminished functioning	Diminished ability to heal Infection Cancer

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## Psychological and Economic Factors

- Depression
- Substance Abuse
- Physical and psychological abuse
- Neglect
- Loneliness
- Poverty



## **Older adults are most at risk when they:**

- Require assistance with daily activities
- Have trouble sleeping
- Have lost bladder control
- Exhibit bizarre behaviour due to alerted mental status





### The most common medical complaints in older adults:

- 1) Chest pain
- 2) Breathing difficulty
- 3) Fainting or near fainting
- 4) Altered mental status

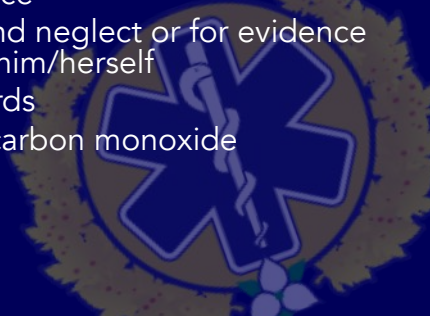
### The most common mechanisms of injury in older adults:

- 1) Burns
- 2) Falls
- 3) Vehicle crashes



### Scene Assessment

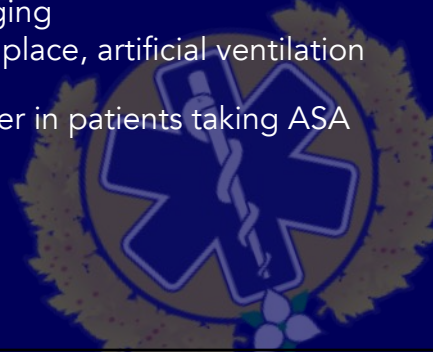
- Keep in mind the following:
  - 1) Substance abuse problems, mental illness, and mental conditions can produce violence
  - 2) Stay alert for signs of abuse and neglect or for evidence that the patient can't care for him/herself
  - 3) Observe potential home hazards
  - 4) Look for potential sources of carbon monoxide poisoning





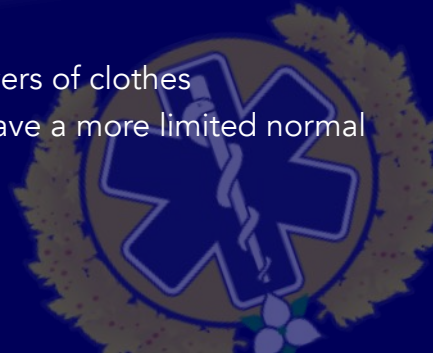
## Primary Assessment

- 1) Observe whether stroke patient has difficulty chewing, swallowing, or clearing airway secretions
- 2) Correct head positioning for airway care may be difficult due to spine curvature with aging
- 3) If patient's dentures remain in place, artificial ventilation with a mask may be easier
- 4) Bleeding control may be harder in patients taking ASA or blood thinners



## Secondary Assessment

- Perform a secondary assessment as you would for any other patient, remembering that an elderly patient
  - may be wearing several layers of clothes
  - may respond slower and have a more limited normal range of motion





## Patient History

- Bystanders should be questioned only if it becomes apparent that your patient is not a reliable source of information.

