

Focused Assessment in the Care of the Older Adult

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KEYWORDS

- Focused older adult assessment • Geriatric assessment tools • Critical care

KEY POINTS

- Assessment of the critically ill older adult is focused and based on knowledge of the distinct, defining features of this population.
- Nursing practice is guided by evidence-based methods and is individualized according to the elder's unique health condition and requirements.
- Effective communication is fundamental in acquiring accurate and relevant information about the older adult's history.

INTRODUCTION

The focused assessment approach for the older adult differs markedly to that for the younger adult. Irrespective of the number and severity of diagnoses, the process demands a high degree of detail and greater concentration of time. This approach presents challenges for the critical care nurse in the rapid-paced care setting where economy of time is essential.

While acknowledging that this population is widely heterogeneous, there are common themes that occur when an older adult is afflicted with a change in health status. The interplay of normal aging changes with individual functional abilities and the commonly high prevalence of underlying chronic comorbidities define the complexity of the elder's response to illness. Diminished physiologic reserve attributable to aging and commonly associated lower resilience pose a high risk for complications of both critical illness and hospitalization.

In the setting of critical illness, the older adult characteristically presents atypically and subtly when decompensation occurs. One decompensating system affects another, often resulting in a rapid cascade of deterioration in an older adult. These factors compel that the critical care nurse's assessment skills are astute and have an anticipatory focus.

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This article describes the focused subjective and objective assessment of the older adult, with the emphasis on the geriatric specific domains that delineate the assessment of the older from the younger adult. Relevant evidence-based screening tools that the nurse can use in assessing the critically ill older adult are discussed.

FOCUSED ASSESSMENT

A traditional description of the focused assessment highlights the application of skills appropriate to the urgency and pertinence of the primary concern, typically confined to the body system.¹ For the critically ill older adult, the assessment must be collective yet focused. While acuity of the assessment is prioritized to the disease-specific organ system, nursing assessment must consider the elder in the context of the whole person and the environment, and their interactions. Assessment of older adults also integrates a focus on function. The idiom of function relative to the older adult broadly comprises the physical, cognitive, psychological, and social domains.² An appraisal of actual or potential geriatric-specific problems within the functional domains will aid in identification of risk for decompensation. Deficiencies and deteriorations, whether singular or in combination, raise the risk for poor outcomes.

A framework for nursing assessment and care pertinent to the older adult is presented in The American Nurse Association (ANA) *Scope and Standards of Practice for Gerontological Nursing*.³ The ANA acknowledges the unique defining characteristics of the aging process and specific domains in the care of the older adult, which are outlined as the physiologic, developmental, psychological, economic, cultural, and spiritual.

The standards are intended to reflect the priorities of gerontological nursing, and are a model for care across settings, including critical care. The first of the 6 Standards of Practice, Assessment, includes authoritative statements outlining the expectations for the distinct actions that nurses should competently perform. The Assessment Standard captures the unique considerations of the older adult for nurses to include in the assessment.³

Nursing practice is guided by evidence-based methods, and is individualized according to the elder's unique health condition and requirements. The focused assessment of the critically ill elder is divided into 2 components: assessment of preadmission baseline information and ongoing individualized assessment.⁴ Establishing a baseline of information allows for comparison in gauging changes, identification of risks, and uncovering signs of complications. This information then guides the planning of care for the individual. Baseline assessment data are gathered within the domains as described earlier.^{2,3} Ongoing individualized assessment is aimed at identification of change from baseline, whether deleterious or improved, and from within organ systems and the geriatric-specific domains, for appraisal of new superimposed illness and complications.

Many assessment tools are available for use by the nurse to obtain baseline data, monitor trends that indicate change in condition, and monitor response to plans of care. The Hartford Institute of Geriatric Nursing of New York University, College of Nursing, has produced the *"Try This" Assessment Series*. This compilation of geriatric assessment tools, each with a description of its use, can be accessed directly from the care unit at <http://consultgerim.org>.⁵ Several of the tools in the series, which are relevant to specific domains of the focused assessment of older adults, are referred to throughout the remainder of this article. Individual variations in level of consciousness and severity of illness will predict the suitability of using the assessment tool at any given time.

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