

Hospital Visits

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Did you know that hospitalized persons with dementia are more likely to develop delirium (acute or severe confusion) than others? The effects of an unfamiliar environment, just being “sick,” and new medications or treatments will all contribute to an increased likelihood of becoming severely confused. If your loved one is going to or is in the hospital, here are some helpful tips to reduce their likelihood of delirium.

If you have a planned hospitalization for elective surgery there are things you can do before entering the hospital:

- Talk to your surgeon about dementia and ask if there are any alternatives to anesthesia or medications that affect memory that can be used to decrease delirium.
- Ask the surgeon to write everywhere in the chart that your loved one has dementia and to please talk clearly and slowly to him/her, and to use as low a dose of pain killers as possible to keep him/her from developing delirium.

If you have an emergency or planned hospital admission:

- Never leave the person with dementia alone except during surgery.
- Ask for a cot/comfortable chair to spend the night.
- Every time your loved one wakes up, remind him/her who you are, where they are, and why e.g.: “Hi Dad, this is Liz, your daughter. You are at Sacred Heart Hospital. You broke your hip. You had surgery; everything is okay.” Reassure “Dad” that he is safe; all is okay.
- Try to anticipate his/her needs; “Are you thirsty?”; offer sips of water (if the nurse says it is okay to drink). Put lip balm on his/her lips, apply lotion to back or arms and legs; help with shaving, brushing teeth, washing face with a warm washcloth.
- Ask for blankets warmed in the blanket warmer if restless.
- If able and allowable, help to sit on the side of the bed to urinate or assist to the bathroom.
- Bring pictures of your family, a personal quilt. Turn the T.V. off if upsetting—same with lights.
- Be your care partner’s advocate; if signs of pain (grimacing, more restless, rubbing wounded area, crying), ask the nurse for more pain medications. If a pain medication worked in the past, ask for that one; ask for a low dose to try first and to be given frequently if the condition is known to be painful (e.g. new hip fracture, stomach surgery, bladder surgery, etc.).

- Try to keep visitors down to one or two at a time; more is too overwhelming.
- Try music (IPOD, Walkman) if you know music is generally soothing/relaxing.
- Make a schedule of family and friends to have someone with him/her throughout their hospital stay. DO NOT expect to do this alone—24 hours as a visitor/caregiver is exhausting!

When you are not the personal caregiver, GO HOME and GO TO BED, relax, eat a real meal. Tell your family you've been given explicit instructions to REST, so don't start calling everyone. Appoint a communications person (family member who sends out e-mails or starts the phone tree).