

Recognizing Acute Deterioration in the Older Adult

Older adults may show infections or changes to health in unusual ways (this is called atypical presentations). Residents in long-term care may have atypical presentations because of age related changes, chronic complex health conditions, disease related changes, general frailty and vulnerability.

Age related changes include:

- Low immune response
- Higher risk for infection because of thinner skin and changes in the bladder and respiratory systems
- Reduced immunity (decrease in T-cell function)
- Delay in release of white blood cells to fight infection
- Less able to regulate heat
- Higher risk for adverse drug reactions due to use of more medications, chronic disease conditions, and age-related changes effecting how the body uses and eliminates medications

Changes from dementia, stroke and other neurological changes will make it difficult for residents to communicate any new changes they may have from an acute illness.

Older adults can become very ill quickly because they may not have the physical strength and mental ability to fight and prevent further decline in their health.

Therefore, it's important to do the **3Rs**:

RECOGNIZE 'soft' and 'acute' changes in the person that are different from their usual way of being.

REFLECT on what you can do to keep the person safe until you get support and help from the nursing staff

RESPOND by giving the nursing teams the information about your concerns..

This checklist is provided to help you recognize the changes in an older person that may be a sign of acute deterioration in health. |
 Orange = more urgent

Some Atypical Presentation – non specific	
Confusion – new onset, increasing or worsening or change in behaviour	
Falls	
Anorexia – change in intake of food or/and fluids	
Change in output (urine or /and bowels)	
Change in appearance	
Generalized pain or myalgia	
Cognition, Pain, Mood & Behaviour	
Any changes in:	
Face – weakness, droop	
Arms – weakness	
Speech – disturbances (slurring)	
Sudden change in level of consciousness e.g more lethargic, tired, weak, faint, non-responsive	
Sudden confusion	
Anxiety	
Fearfulness	
Sudden behaviour change	
Irritable	
Restless	
Seizure	
Soft changes may include:	
Resisting or refusing care	
More withdrawn or talking more than usual	
Less interaction and participation	
Breathing & Lungs	
Sudden or increased effort to breath at rest or with activities- breathing faster or harder	
Needing more pillows to sleep or sitting up during sleep	
Coughing, sneezing, wheezing, congested	

Heart & Circulation	
New or unrelieved chest pain, chest tightness, pressure, discomfort [could also have discomfort in neck, jaw, shoulder, left arm or back]	
More swollen (limbs, sacrum, eyes, scrotum, abdomen)	
Clothes are tighter	
Skin & Touch	
Gray, blue colour	
Diaphoretic, sweating too much, night sweats	
Skin breakdown	
Skin warm or hot to touch	
Oral, Digestion & Elimination	
Rapid onset of abdominal pain, distention, weight gain	
Changes in intake pattern or decrease oral intake over 24 hours	
Coughing before, during or after swallowing	
Gurgling, wet voice	
Bleeding significantly from vagina	
Change in urine output (amount, colour, signs of blood)	
Pain on urination	
Change to continence level	
Muscles & Bones	
Dramatic decline in muscle strength	
Sudden onset of one sided weakness of face, arm, trunk, leg, - limited to one side	
Falls	
Activities of Daily Living and Activity Level	
Sudden change in function	
Activity intolerance, participating less	