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Making Hospitalizations the Best They Can Be

By Linda Fodrini-Johnson, MA, MFT, CMC

esearch shows that a large portion of individuals over the age of 70 leave hospitals deconditioned – losing muscle tone can happen within two days – and occasionally, with other hospital-acquired problems. So, if you have a scheduled hospital procedure, or if you or a family member has a health crisis or accident, this article will help you or your family member maintain their current level of functioning and have a successful experience.

If the person being hospitalized has a diagnosed dementia, there are additional safety measures you can take to ensure their experience is without incident. Those with dementia become more confused and disoriented in unfamiliar surroundings. Those who might have been doing fair at home become more confused in a hospital setting, increasing their risks for falls, wandering, or removing IV's or other medically necessary equipment.

Helpful hints for a family member with dementia (such as

Alzheimer's) going to the hospital: 1) Provide a family or paid companion for those with dementia who are brought to the ER or hospitalized for any reason. The medical team needs history - it is good to have a pre-written health history for these family members. This should include current medications, any problems with medications in the past and allergies to drugs, environment or foods. 2) If the person is prone to wander or is anxious and you can't be there, a Medic-Alert bracelet or Alzheimer's Association Safe Return bracelet should be on your family member at all times.

3) Have an activity kit that has things to fiddle with – playing cards, pictures of family that are laminated, finger puzzles or anything that brought comfort in the home. Even a stuffed animal can be a comfort – as long as it looks real and not scary.

Hints for anyone going into the

1) Bring a water bottle that is easy to open, easy to use and fits the patient's hands, as dehydration can be a big problem. Please ask if the patient is allowed to drink fluids – because some medical procedures will require nothing by mouth for a period of time. 2) Bring an appropriate pair of nonskid slippers with a back – no slip-ons because they can come off and cause

3) Medical history and list of current medications should accompany the patient.

4) Family members should ask for an orientation to the floor: Where can you get warm blankets? Where to refill water bottles? And, any other professional care managers, or to find comfort measure to support you or your family member's stay.

5) Ask your doctor (again, if appropriate) for some type of conditioning orders – like walking the halls two or three times a day, bedside strength training, balance training, etc.

6) If the patient needs to use the bathroom frequently, be sure there is adequate staff or family to assist so as to avoid falls.

7) Be sure to bring assistive devices like hearing aids and batteries, glasses, walkers and/or canes with

The discharge process is a critical part of a positive hospital experience. Be sure to start working with a discharge planner days before discharge to arrange for any medical equipment, special foods, oxygen or other supplies you will need before you arrive home. If possible have a home safety evaluation before the discharge.

On the day of discharge, have a list of "red-flags" to watch for and what to do if you experience any of them. Ask for a medication reconciliation – that means looking at all the old medications the patient was on and the new medications (some of the new ones can be just a change of dosage), so be very clear and ask questions. Know what every medication is prescribed for and be sure to order before leaving the hospital.

Have the discharge planner or your family set up a follow-up appointment with your primary care physician and any specialist as directed on your discharge orders before you leave. Tell the physician you or your family member is being discharged and needs to be seen in the next week to 10 days.

If you are going to need home care, a call to an agency you have vetted prior would be best. Also, using the services of a professional geriatric care manager for that important transition back to home and optimal health could prove invaluable.

For further information about a care manager in your local area, contact Aging Life Care Association (ALCA), formerly known as the National Association of Professional Geriatric Care Managers (NAPGCM) at: www.ALCA.org. The staff at Eldercare Services has 15 Professional Care Managers who provide guidance, consultations and comprehensive plans for families living in the San Francisco Bay Area. For information, visit www.EldercareAnswers.com



Linda Fodrini-Johnson is the founder and executive director of Eldercare Services, a licensed marriage, family and child counselor, and a certified care manager. For information about Eldercare Services, visit www.EldercareAnswers.com or call (925) 937-2018.

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Family Focus

Mind Your Manners

By Margie Ryerson, MFT

ther in life than any college degree." ding – sort of). -Marian Wright Edelman

Traveling to different countries can broaden our horizons in so many ways. On a recent trip I noticed how polite children and teens are to all adults in certain cultures. Then I thought how some of our children could use an upgrade in this area. For example, there were several incidents last month in our community where students on their way home from high school shouted "F... you" and other choice words as they drove by people walking their dogs or gardening in their front yards.

Of course, there are etiquette classes offered for children to teach them proper table manners and social conduct. But learning begins at home, and classes can only help so much. It's crucial for parents to instill good manners in their children as they are growing up. The hope is not only that your child will extend proper courtesy to you, but that he will treat other adults, as well as his peers, with respect and consideration.

Research suggests that practicing good manners and being kind to others increases personal happiness. In addition, good manners tend to lead to the development of strong social skills. People respond more favorably to those who treat them respectfully. So, practicing good manners is not only important for others in your child's life, but for his own sake as

Here are some pointers:

1) Practice "please," "thank-you," and "excuse me" with your child, starting when he is pre-verbal. Say the words at appropriate times so your child will begin to learn the concepts. As soon as he can, have him say the words himself. Praise him for using polite words. And, of course, be sure

peing considerate of others to use these words yourself. Continue writing a note (after possible initial rewill take your children fur- prompting him until he is 30 (just kid- sistance, that is). And experiencing

> 2) As your child becomes older, train him to respect adults by using Mrs. and Mr. in front of their names, unless asked to be called by first names. Encourage him to make eye contact with an adult who is speaking to him.

> 3) Don't let your child succeed in addressing you disrespectfully. Avoid inadvertently reinforcing this behavior; respond each and every time. It's best to have your child apologize, and then offer you a corrected version of his comment. In other words, do not just reprimand him by saying, "Don't speak to me like that." Make him perform the necessary repair.

> 4) Don't accept the correction if it is said in a flat, unconvincing tone. Have him adjust his attitude or invoke a consequence. Also, if your child refuses to comply when you request a correction, be prepared with a consequence and implement it quickly and calmly. Younger children can receive a time-out for several minutes. Older children can have a privilege removed, such as a cell phone or other screen time, for the rest of the day or the next day – or longer if the disrespectful behavior persists.

> 5) Along these lines, do not respond when your child whines at you. Ask him to restate his comment or request in a different tone before you respond. 6) Do not respond to your child when he interrupts you. Train him to say, "excuse me," and then wait his turn. I see many parents, mid-conversation with others, automatically turning to their child when he speaks. This sends the message that he is more important than you or other adults, and that he should have priority at all times.

> 7) Insist that your child write a thankyou note after receiving a gift or special treat. Children actively practice gratitude when they go to the effort of

gratitude contributes to being a hap-

pier person. 8) Have family dinners as often as possible. These are perfect opportunities for training your child to use good manners. To make family meals enjoyable, the emphasis needs to be on relaxing and enjoying each other's company. Meals are not the time to bring up disciplinary matters or subjects that your child doesn't want to discuss. Intermittently encourage proper etiquette in a positive, calm, and light-hearted manner. If a child is being rude, he needs to be excused from the table until he apologizes. If he doesn't apologize, he needs to receive a consequence after the family finishes their meal. The family dinner experience should not be undermined by one disrespectful child. Of course, it is never this simple to instill and regulate good manners in a child, but parental efforts will eventually pay

As a parent, you know it's important to pick your battles in handling situations with your child. Hopefully, training your child by requiring him to practice good manners will be one of the battles you choose.



Margie Ryerson, MFT, is an author and a marriage and family therapist in Orinda and Walnut Creek. Contact her at (925) 376-9323 or margierye@yahoo.com.

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