

Dementia Caregivers When to Call the Doctor

Did you know...

In most states, facilities are required to notify the doctor of the following issues:

- Change in condition or behaviors
- Aggressive or violent behavior
- Significant weight loss (5% or more in 1 month < 7.5% in 3 months, 10% in 6 months)
- Lack of bowel movements or excessive diarrhea with signs of dehydration
- Abdominal distension, hypoactive bowel sounds, or vomiting for >24 hours
- An accident, fall, or injury
- Skin breakdown, severe skin tears, open areas, reddened or blackened skin
- Uncontrolled pain, swelling, or bleeding
- Refusing medications more than 2 days in a row or 2 times a week
- Vital signs change, such as the following:
 - BP top number >150 or < 90 bottom number >90 or < 50
 - Pulse >50 or > 110 or Increase in pulse by 20 beats per minute
 - Breathing >24 or < 10 breaths per minute or wheezing or gurgling sounds, or Oxygen saturation less than 90%
 - Temperature >101

These nursing home guidelines should also guide you, the in-home caregiver, to know when to call the doctor.

Dementia progression must also be re-evaluated quarterly in the nursing home; the doctor reviews this information during his visits. As the changes are identified, the doctor can adjust medicines and the facility can change the type of care needed or add necessary equipment.



If you are a caregiver caring for a loved one at home, you will need to step into nurse-like shoes to help manage your loved one's medical needs. You need to become their patient liaison also.

The Patient Liaison is the go-between for the patient and the doctor. They catch minor issues, and report them to the doctor before they become severe or life-threatening.

Often this role includes detective work. You will need to find the clues and share them with your doctor to help solve the problem, especially when your loved one can't tell you what is going on with them.

If your loved one were in a nursing home, the nurses in the facility would track the data and report it to the doctor, so he knows what is going on and can provide directions to what care is needed.



To Become A Better Patient Liaison, You need to start by gathering data.



Nursing Homes Track The Following On All Of Their Patients, And These Are Areas Caregivers In The Home Should Be Tracking Also.

Medications are documented when they are given, but they are also tracked when they are refused. As the disease progresses, they may refuse their medicine and spit them out. The doctor will need to know about this. He may be able to eliminate some medicines or change them to a different form.

Meal Intake is tracked mainly to help prevent weight loss, but another reason is for changing tastes. Some people will no longer eat food they have eaten for years, it helps to track what they are eating and you can change up their menu when you see the changes.

Pain is often not treated appropriately in those with Dementia because they may not recognize what is wrong and can't tell you. This is another area where you need to wear your detective hat. They may be irritable, angry, withdrawn, sleep more, pace, rock back and forth, or show other behaviors. Most people over 60 have aches and pains. If your loved one has signs of pain, talk to your doctor about scheduling Tylenol. It is much easier to give Tylenol 2-3 times a day around the clock to keep them comfortable than to deal with behaviors.

Bowels must be tracked, especially as your loved one becomes less active. The bowels slow down and can become constipated, impacted, or develop a bowel obstruction. All of these are uncomfortable and can be painful. You will need to work with your doctor to have a bowel protocol to prevent this from happening. Diarrhea is also something to watch out for and track; it can lead to dehydration, increased confusion, or even Delirium.

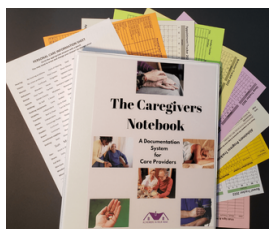
Vital signs are once a month unless they are on blood pressure or heart medicine; then, they may be taken daily or weekly.

Behaviors are one of the most challenging issues that can accompany Dementia. This is another detective hat area. Behaviors should be tracked for a couple of reasons. Try to identify the cause- the trigger for the behavior. What helps stop the behavior? How often is the behavior happening? Is the behavior worsening? Is the behavior becoming aggressive or violent? There are many behavior-controlling medicines on the market. It is much easier for your doctor to prescribe the appropriate medicine for behaviors if he clearly understands the behaviors.

Sleep is monitored when problems, such as excessive sleeping or insomnia, begin to appear.

Activities are also monitored. Depression often accompanies dementia, and one of the signs of depression can show when they no longer participate in activities they enjoy.

Unfortunately, many caregivers at home have yet to be taught how to be patient liaisons for their loved ones. They don't know what information to collect for the doctor or why and need a tracking system. But, the good news is, I can help you solve this problem you didn't even realize you had.



If you don't have a system and would like one already set up, I have created one for you. It is available as a download, 3-ring binder, or the ALZlog Caregiver Notebook app. You can find more information [HERE](#)

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