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Conference Learnings

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CONFERENCE LEARNINGS

16th Annual NICHE Conference

Philadelphia, PA

4/11/13 – 4/12/13

Sarah Scholl BSN,RN

Unit Report Out



A PASSION FOR BETTER MEDICINE.™



Conference Topics

'Pearls of Wisdom' shared by Sarah!

Sarah's key learnings from the conference she attended follow:

- Delirium is very common in elderly patients who are hospitalized.
- 20-80% of elderly patients will develop delirium.
- Up to 40% of these cases are preventable.
- Most patients who develop delirium will never return to their baseline.
- Approximately 25-33% of patients who develop delirium will die within 6 months.
- There are two types of delirium:
 - Hypoactive – lethargy, somnolence
 - More common and often undiagnosed.
 - Associated with higher mortality rates.
 - Hyperactive – agitation, hallucinations
- Key points of delirium:
 - Evaluate patient's medications (benzos, tricyclic antidepressants, anticholinergics, sedative hypnotics could actually worsen delirium).
 - Pharmacologic interventions should only be used in patients with severe agitation (when patient is at risk for hurting themselves or others). Try to find the cause of the behavior, rather than medicating. All human behaviors have meaning and never occur without reason.
 - Non-pharmacologic approaches should be attempted before meds (make sure patient has assistive devices, implement toileting schedule, avoid waking the patient during the night or for morning labwork, assure patient is OOB during the day with blinds open and lights on, provide activities for patient, provide music and extra blankets at night to promote sleep).
 - Numerous studies have shown that non-pharmacologic interventions are more effective than pharmacologic interventions.

ACTION ITEMS

Where the rubber meets the road



Learnings to Consider for LVHN

- Educate nurses that medications are often not the best treatment for delirium.
- Use non-pharmacologic interventions for the patient with delirium (as noted on previous slide).

Questions??



Talk to Sarah who attended this very interesting conference.

**** Ask Sarah about meeting the person who developed the CAM delirium assessment tool!!! She was at this conference.*