

CHAPTER 29

GERONTOLOGY

Overview

Medical assistants help with the care of the geriatric patient on a regular basis. With the population aging, students are expected to identify the changes that the elderly undergo in their bodies and minds, along with the social stigma attached to the older adult in society. Communication skills are stressed to the student, who will be instrumental in assisting the geriatric patient in the ambulatory care setting.

Lesson Plan

I. LEARNING OUTCOMES	ABHES	CAAHEP
A. Define, spell, and pronounce the key terms as presented in the glossary.		
B. Identify expected physiologic changes that can occur as part of the aging process.	MA.A.1.2.b MA.A.1.5.f	I.C.10
C. List five common functional changes that can occur as part of the aging process.	MA.A.1.2.d; MA.A.1.5.f	I.C.10
D. Describe prevention techniques for complications arising from age-related disorders.	MA.A.1.9.r	IV.P.5
E. Explain two myths about aging.		
F. Explain the importance of communication with older adults.	MA.A.1.8.y	IV.A.10
G. Identify several techniques or strategies to communicate with visually and hearing impaired older adults.	MA.A.1.9.q	IV.A.7
H. Describe strategies for healthy and successful aging.	MA.A.1.9.r	IV.P.5
I. Analyze the professionalism questions and apply them to this chapter's content.		

II. PROFESSIONALISM QUESTIONS

- A. Communication
 1. Did you listen to and acknowledge the patient?
 2. Did you speak at the patient's level of understanding?
 3. Did you provide appropriate responses/feedback?
 4. Did you display appropriate body language?
 5. Did you respond honestly and diplomatically to the patient's concerns?
 6. Did you demonstrate empathy in communicating with patients, family, and staff?
 7. Did you maintain eye contact with the patient during communication?
 8. Did you accurately and concisely update the provider on any aspect of the patient's care?
 9. Did you include the patient's support system as indicated?
- B. Presentation
 1. Did your actions attend to both the psychological and the physiologic aspects of the patient's illness or condition?
 2. Did you attend to any special needs of the patient? Did you first ask if assistance was needed, rather than taking charge?
 3. Were you courteous, patient, and respectful to the patient?
 4. Did you display a calm, professional, and caring manner?

- C. Competency
 1. Did you display sound judgment?
 2. Were you knowledgeable and accountable?
 3. Did you recognize the importance of local, state, and federal legislation and regulations in the practice setting?
- D. Initiative
 1. Did you direct the patient to other resources when necessary or helpful, with the approval of the provider?
- E. Integrity
 1. Did you demonstrate an appreciation for the patient's attitude toward illness or condition?
 2. Did you protect and maintain confidentiality?
 3. Did you report situations that were harmful or illegal?
 4. Did you maintain your moral and ethical standards?
 5. Did you do the "right thing" even when no one was observing?

III. REFERENCES

- A. Lindh, Wilburta Q., Pooler, Marilyn S., Tamparo, Carol D., Dahl, Barbara M., & Morris, Julie A. *Delmar's Comprehensive Medical Assisting: Administrative and Clinical Competencies*, 5e
- B. Text Chapter 29, References/Bibliography
- C. Information about geriatric advocacy (http://www.americangeriatrics.org/advocacy_public_policy/)
- D. Hints for successful geriatric health history interviews (<http://www.olderadultfocus.org/Assess/suggest.htm>)
- E. Any other teacher-preferred reference material

IV. VISUAL AIDS

- A. Computer access to identified Internet resources
- B. Any other teacher-preferred visual aids (PowerPoint, etc.)

V. EQUIPMENT AND MATERIAL

- A. Computer, TV monitor, and Internet access
- B. See IV: Visual Aids

VI. SAFETY

- A. Establish basic classroom procedures.

VII. PREPARATION

- A. Arrange for visual aids equipment.
- B. Collect materials.
- C. Review Chapter 29 in the text, the Study Guide, and the Instructor's Manual.

VIII. INTRODUCTORY REMARKS/ACTIONS

- A. Read Learning Outcomes in the text with students to introduce the chapter.

IX. PRESENTATION

- A. Societal bias
 1. Systematic stereotyping and discrimination because of age
 2. Elderly viewed as sick, frail, powerless, sexless, and burdensome
 3. Factors such as good nutrition, regular exercise, stress reduction, yearly physical examinations, nonsmoking, and new technology to suppress the aging process (discuss the Critical Thinking box)
- B. Facts about Aging
 1. Aging is progressive and universal
 2. Interest, personal and financial resources, family structure, genetics, and attitude play parts in how one ages
 3. Lifestyle is a factor
 - a. Smoking, misuse of chemicals such as alcohol and drugs, type of diet, and lack of exercise
 - b. Greater variability among older people than younger groups
- C. Physiologic Changes
 1. Not all individuals age the same
 2. The body produces smaller amounts of various hormones and other chemicals
 3. Every body system undergoes changes, both physiologic and psychological

4. Senses
 - a. Vision
 - (1) Pupil size diminishes, lens may become cloudy
 - (2) Cataracts, glaucoma, and macular degeneration are common in older people
 - b. Hearing (discuss the Critical Thinking box)
 - (1) Hearing loss is not uncommon
 - (2) Individuals may be thought to be mentally weak or senile
 - (3) Presbycusis is normal hearing loss in elderly
 - c. Taste and smell diminish
 - (1) Reduced ability to taste could lead to decrease in appetite
 - (2) Detecting odors becomes difficult and could be dangerous because of the inability to smell smoke or gas
- D. Integumentary System
 1. Aging skin is more fragile
 2. Sunlight exposure is a major cause of wrinkled skin, “liver spots,” leathery looking skin, and cancer (see Case Study)
 3. Hypothermia and hyperthermia are serious problems
- E. Nervous System
 1. The brain may shrink in size
 2. Some memory loss or delay in memory can be expected
 3. Transient ischemic attacks (TIAs) can cause sudden loss of memory and confusion
- F. Musculoskeletal System
 1. Muscle strength decreases and results in decreased mobility
 2. The body is less flexible, and joints can stiffen
 3. Arthritis and osteoporosis are not unusual in older people
- G. Respiratory System
 1. Breathing capacity diminishes
 2. Lungs lose their elasticity, and older people are prone to pneumonia
- H. Cardiovascular System
 1. Heart disease and blood vessel disorders are major causes of death
 - a. Blood vessels lose elasticity
 - b. Myocardium may lose the ability to pump blood around the body
 - c. Congestive heart failure or myocardial infarction are possibilities
- I. Gastrointestinal System
 1. Stomach secretions and peristalsis slow
 2. Pernicious anemia can occur
 3. Poor eating habits, poor nutrition, and overeating or undereating can lead to dental problems
 4. Poor dental hygiene leads to gum disease and loss of health; this makes chewing food difficult
- J. Urinary System
 1. Kidneys can decrease in size and urine production and output may be less
 2. Levels of medication may rise dangerously due to poor filtration
 3. Bladder wall becomes more inelastic
 - a. Ability to empty the bladder completely is more difficult
 - b. Residual urine remains in the bladder and can lead to cystitis
 4. Urinary incontinence can result from many factors
- K. Reproductive System
 1. Women experience menopause at about age 55
 2. Men continue to produce sperm well after 50 years of age
 - a. Testosterone levels diminish and may lead to benign hypertrophy of the prostate
 3. Aging men and women can maintain sexual desires
- L. Prevention of Complications
 1. Older people are at risk for complications as a result of body systems undergoing change
 2. Accidents happen because of impairments in vision, sense of smell, and hearing
 3. Malnutrition and anemia can develop because of poor diet
 4. Elderly have decreased sensitivity and lack the ability to feel pain
 - a. Heat and cold applications can injure the aging

5. Impaired nervous system function may lead to loss of balance, to disorientation, and to confusion
 6. Because of osteoporosis, bones break more easily
 7. Respiratory infections are not unusual
 8. Urinary infections are common
 9. Circulatory problems are common
 10. Enlargement of the prostate makes urination difficult
- M. Psychological Changes
1. There is great variation in psychological functioning of older people
 - a. People who maintain their health are better able to maintain their intelligence
 2. Dementia affects memory and cognitive functioning
 3. Depression in older people is not uncommon
- N. The Medical Assistant and the Geriatric Patient
1. Elderly people may suffer from many factors coupled with physiologic changes and are a special challenge to the medical assistant
 - a. Empathize with the patient's situation
 - b. Do not talk to older people as if they were children
 - c. Speak slowly and clearly, and make eye contact
 2. Older people with impairment of memory
 - a. Geriatric care poses a challenge when attempting to communicate
 3. Older people with visual impairment
 4. Older people with hearing impairment
 - a. Do not approach individual until you make your presence known
 5. Abuse of older people
 - a. Physical or emotional
 - b. Abuse must be reported by "mandated reporters"
 - c. Department of Elder Affairs has abuse hotline
 - d. List of signs and symptoms of elder abuse
- X. APPLICATION
- A. Use the Learning Outcomes at the beginning of Chapter 29 in the text as the basis for questions to assess comprehension.
 - B. See the Classroom Activities section below for numerous application activities.
 - C. Assign students to complete Chapter 29 in the Study Guide.
- XI. EVALUATION
- A. Evaluate any assigned application activities.
 - B. Evaluate student participation during presentation.
 - C. Grade responses to Chapter 29 in the Study Guide.

Classroom Activities

1. Arrange for an older individual with hearing or visual impairment to speak to the class about how he or she is treated when visiting the office or clinic for checkups or other physical problems. Ask how medical assistants can best communicate.
2. Invite a professional from the city Department of Elder Affairs to talk about types of abuse students should watch for. Have the professional discuss the medical assistant's responsibilities and how to report suspected abuse.
3. Arrange for the class to visit a seniors' center, and have them talk to the older people about how they are still contributing to society. Let students discover how the older people get their exercise, stay positive, and stay involved with other people.

Answers to Critical Thinking Boxes

What do you consider common myths about older adults? What are your thoughts about these myths?

Students will have their own personal ideas and answers.

Describe strategies for communicating with hearing-impaired patients.

Some strategies for communicating with hearing-impaired patients are: Face the hearing-impaired person directly. Keep your hands away from your face while talking. Reduce background noises while talking. Get the person's attention before beginning to speak. Speak in a normal voice, and do not shout. Be prepared to use written communication.

What are some strategies that older adults can do to keep mentally and physically stimulated?

Mental stimulation for older adults can include activities such as playing cards, doing crossword puzzles, learning a new language, learning to play an instrument, reading, and taking college courses. Physical stimulation for older adults includes activities such as walking, gardening, cross-country skiing, snow shoeing, playing tennis, practicing yoga, doing Pilates, and dancing.

Answers to Case Studies

Case Study 29-1

Refer to the scenario at the beginning of the chapter.

1. Describe five strategies older adults such as Mrs. Johnson can use to help slow the aging process.

Five strategies older adults can use to help slow the aging process are: (1) regular exercise, (2) a healthy diet, (3) not smoking, (4) wearing a seatbelt, and (5) keeping a social network with friends and relatives. (See pages 739-740 for more strategies.)

Case Study 29-2

Adelaide Robinson, 83 years old, has an appointment Thursday morning for a recheck of her most recent complaint. She tells you that she is moving slower than she did just 6 months ago, and she has noticed less flexibility as well.

1. What are the possible causes of Mrs. Robinson's complaints?

Slower movements and decreased flexibility are due to changes in the muscles and joints. The muscles become weaker, and muscle fibers decrease in size and number. Loss of neurons that control muscle function results in slower movements. The wear and tear of everyday living causes worn-out joints. Synovial fluid decreases, leading to stiffness and immobility.

2. What effect will these problems have on Mrs. Robinson's daily routine?

Activities of daily living (ADLs) are affected by Mrs. Robinson's problems. It will be difficult or impossible to brush her teeth, comb her hair, use the toilet, feed herself, or bathe herself.

3. What might Dr. King suggest Mrs. Robinson do to help alleviate symptoms?

Dr. King might suggest some passive and active exercises to help increase her flexibility and decrease muscle stiffness. He may also prescribe an anti-inflammatory medication.

Case Study 29-3

Sally Donovan, 92 years old, is in the gerontology clinic today. She currently lives with her 65-year-old son. You notice that she has lost 30 pounds since her last visit 2 months ago. Her demeanor is submissive and she looks to her son to answer any direct questions from the medical assistant and the provider. At checkout, her son opens her checkbook and writes the check for her co-payment, including signing her name on the signature line.

1. What are the alarm signs for potential elder abuse with Ms. Donovan?

Alarm signs include weight loss, submissive demeanor, and evidence of financial influence.

2. What are your next steps in reporting suspected elder abuse?

A report must be made to the local designated protective service agency. Check your local laws to determine who the report must be directed to.

Answers to Certification Review

1. a. arteriosclerotic heart disease
2. d. glaucoma
3. a. cartilage erodes in the joints
4. c. Pneumonia
5. c. amount of urine left in bladder after voiding
6. d. all of the above
7. c. macular degeneration
8. d. a and c
9. d. a and b
10. c. osteoporosis

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