Geriatric Syndromes and Their Implications for Nursing
Patricia Brown-O’Hara, RN PhD

Geriatric syndromes are common clinical conditions that do not fit into specific disease categories but have substantial costly and quality of life implications for functionality and life satisfaction in older adults. A focus on geriatric nursing competence, with emphasis on the complexities of caring for older adults, is crucial in nursing practice. Understanding the unique features of common health conditions in older people is essential. In evaluating geriatric cases, the Legal Nurse Consultant must be aware and knowledgeable about the issues and relevant clinical recommendations based on evidence-based best practice.

Clinical Evaluation of Swallowing Function for Institutionalized Elderly: Balancing the Scales for Safety and Quality of Life
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The clinical swallowing examination (CSE), or clinical/bedside examination, is administered by a certified speech-language pathologist. It is often confused with a “dysphagia screen,” and its utility for assessing and treating individuals with swallowing impairment is poorly understood. The CSE is a critical assessment of cognitive and functional abilities in the context of oral feeding and swallowing. With increasing emphasis on patient preferences, oral intake, health status, and quality of life in institutionalized elderly, the CSE’s role in comprehensive assessment of swallowing is particularly valuable. Other instrumentation methods of assessment are briefly described.

Resident and Patient Elopements: An Overview of Legal Issues and Trends
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When the National Institute for Elopement Prevention and Resolution was founded in 2001, literature was limited on the issue of resident or patient elopement. Elopement is self-reported and it is hard to get accurate information on its prevalence. Smith (2012), points to the International Association for Healthcare Security and Safety’s 2009 membership survey on elopement incidents. Of the member facilities, 11% reported no elopements, 70% reported from one to fifty elopements, and 10% reported between 50 and 300 elopements for the year. As a legal issue, elopement affects long term care, assisted living communities, hospitals, inpatient rehabilitation centers, inpatient mental health hospitals, inpatient drug and alcohol treatment centers, and adult day care facilities. To provide effective support to these cases, Legal Nurse Consultants must be knowledgeable in the specifics and details of elopement.
Palliative Wound Care and End of Life Wounds

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The following sites provide online resources for clinical practice, education and research and for legal nurse consultant reference. This listing is not intended to be all inclusive of resources available. No endorsement is made of any listed sites or services. Online sources change and should be confirmed prior to using as a reference.

Falls and Fall Prevention in Older Adults

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KEY WORDS
Falls, Fall Prevention, Older Adults

Patient falls have a tremendous financial effect on our healthcare system resulting from increased healthcare needs and decreased reimbursement issued by insurers. More important is the devastating effect falls with serious injuries inflict on patients and their families. With increased focus on falls and fall prevention in our healthcare and legal system, it is important to know the various definitions of what constitutes a “fall,” as these depend on the setting and the corresponding regulatory body. Although the definitions are similar, considerable weight is given to interpretation. Great emphasis is placed on fall assessment tools, reflected by the number available to identify those at highest risk. Post-fall huddle tools are also available to identify system failures and areas for additional prevention strategies. Clinicians should use one that best fits the facility. Knowing about various types of falls helps nurses identify and implement the most effective, patient-specific fall prevention strategies. Education incorporating members of the expert interdisciplinary team and including proper fall risk assessment tool training provides the most comprehensive and effective prevention strategy possible.

Legal Issues Involved in “Do Not Resuscitate” Orders

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KEY WORDS
Informed Consent, Resuscitation, Advance Directive, Futility, Surrogate, DNR, DPOA

This article discusses 1) a brief overview of health care decision-making legal principles, including surrogate decision-making; 2) health care decision-making legal principles specific to life-sustaining treatment; 3) “medical futility” principles and laws; and 4) the role of “do not resuscitate” (DNR) orders in the perioperative setting. Life-sustaining treatment decisions implicate the same principles of health care decision-making and informed consent as other treatment plans and orders do, but also have some unique aspects. These decisions often are made by surrogates, who should approach the decision from the patient’s perspective. If that does not occur, or if treatment disputes otherwise arise in this context, the question of “medical futility” is frequently involved. There is no well-established national definition or process regarding medical futility; however, there is some guidance available from various state and “uniform” laws as well as from professional organizations such as the American Medical Association.
Nursing Home Medical Record Standards: Part 1: Nursing Liability

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The medical record provides an important means of communication with other providers involved in a resident's care, and whether an electronic or paper record, must be maintained according to applicable regulations and standards. Liability may be incurred as a result of a nurse's failure to adhere to standards of practice. Professional standards, regulatory demands, and the ever-increasing volume of litigation mandate accurate, timely, and comprehensive documentation. This article reviews federal and state regulations, professional standards and facility policies that set the criteria nurses need to familiar with to avoiding liability when documenting in nursing home medical records. Issues in liability and components of litigation are also reviewed.

Nursing Home Medical Records: Part 2: Documentation Review

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The medical record provides an important means of communication with other providers involved in a resident's care. Nurses are responsible and accountable to properly assess and monitor a resident and institute appropriate treatments and precautions, to document and report/communicate pertinent information, to perform nursing procedures correctly, and to report known deviations from practice. This article reviews the importance of the adhering to documentation criteria in the medical record in nursing home litigation cases.