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Hospital Hazards Four practices that can harm older people

hospital stay can be risky, especially for older people. For example, many seniors who could walk on their own and care for themselves before entering the hospital lose these abilities during their stay. They may also develop delirium (sudden, intense confusion). As part of the Choosing Wisely series, the American Academy of Nursing has identified four over-used hospital practices. These practices are usually unnecessary, and they may harm you.



Question these hospital practices. If you notice doctors or nurses using any of these practices, ask why. Explain your concerns to the nurse. Nurses can often stop these practices.

BED REST

The problem: Usually, older people spend most of their time in bed during a hospital stay. This is because we used to think that bed rest helped the body recover. But research now shows that walking helps older patients recover faster. They get out of the hospital sooner, and they can walk farther when they get home.

Bed rest can be harmful: When you're not active, your leg muscles get weaker. You're also more likely to become dehydrated. This can make you dizzy and lead to falls. These are serious issues because older people already have problems with dizziness and balance.

Some older patients grow so weak that they:

- Need help dressing and bathing.
- Need to go to a nursing home before they go home.

Bed rest: recommendations

- Be active as soon as you can.
- Tell the nurse how active you were before you entered the hospital. Ask the nurse to help you keep active.
- If you feel weak and unsteady, ask the nurse or doctor if you can get physical therapy.
- Try to move around even when you're lying or sitting in bed. Make circles with your ankles, or tighten and release your fists.
- Ask the nurse if you can wear your own shoes.
- Be sure to drink plenty of fluids.

If you're caring for a family member, encourage the patient to be active. Ask a nurse how you can help the patient walk safely.

You may need bed rest for a few hours after surgery. And you may need bed rest if you have injuries that keep you from walking, such as a fractured pelvis.



PHYSICAL RESTRAINTS

The problem: Restraints keep patients from moving freely or getting out of a bed or a chair. They might include wrist or ankle ties, waist belts, hand mitts, or bed rails. Nurses may use them to help protect older patients who may harm themselves or disrupt their treatment. But restraints can be harmful, too.

While restrained, patients may struggle and injure themselves. They can suffer serious falls and broken bones. In some cases, these injuries can be fatal. Restraints can also increase emotional stress.

Physical restraints: recommendations

If a patient is confused or agitated, ask the doctor or nurse to look for possible causes. Often, these symptoms are caused by an infection, dehydration, or side effects from medicines.

These tips can help reduce the patient's confusion and distress. They can reduce the need for restraints.

- Tell the nurse how the patient usually shows discomfort, hunger, or the need to use the toilet.
- Also tell the nurse what makes the patient calm or brings enjoyment.
- Arrange for someone the patient knows well to stay overnight for the first few days in the hospital. This may help the patient feel safe.
- Bring a few familiar objects from home, such as family photos.
- Also bring the patient's eyeglasses, hearing aid, and dentures.
- Ask that IV lines, catheters, monitors, or other devices be removed from the patient's body as early as possible.

Patients may need restraints if they are likely to harm themselves. The hospital should use the restraint that allows for the most movement and remove it as soon as possible.

INTERRUPTED SLEEP

The problem: Hospital patients complain of poor sleep even more than they complain about the food. Many things can disturb a full night of sleep including noise, pain, and side effects. Nurses often wake patients late at night to check pulse and blood pressure, turn them over, and give baths. Finally, other hospital staff often come to draw your blood or check glucose levels very early in the morning.

Interrupted sleep can be harmful: When your sleep is interrupted, your body doesn't fight infection or deal with pain as well. You have less energy, and are less able to be active. Poor sleep can be very dangerous for older patients—it can lead to dizziness and falls. All of these problems can slow down healing and keep you in the hospital longer.

Interrupted sleep: recommendations

- Ask the nurse to let you get as much uninterrupted sleep as possible by scheduling your care around it.
- Ask the nurse if you can take your medicine during waking hours.
- Ask if your monitors can be kept silent while you sleep.
- Ask to have your door and blinds kept closed at night.
- Be as physically active as you can during the day.
- Avoid coffee and tea at night (except decaf).

You may need care and monitoring at night if you are in intensive care or your condition changes quickly.



URINARY CATHETERS

The problem: A urinary catheter is a tube placed in the bladder to drain urine into a bag. This can be helpful for a short time after certain operations. But catheters are sometimes used longer than necessary.

Sometimes catheters are used just because they are convenient. For example, they may be used for patients who leak urine or need help getting to the bathroom.

But catheters are risky. They should be used only if there is a medical reason. And they should be removed as soon as possible.

Urinary catheters can be harmful: Germs can enter through the catheter and cause a urinary tract infection (UTI). A UTI is usually treated with antibiotics. These can cause side effects, such as diarrhea. Antibiotics can also cause new infections that may be difficult to cure.

Catheters also limit walking and being active. And they can increase confusion and distress.



Urinary catheters: recommendations

- If you have a catheter, ask the nurse every day if it can be removed. If you feel you can go to the bathroom on your own or use a bedpan, say so.
- Make sure hospital staff wash their hands with soap and water or an alcohol-based hand rub before and after touching the catheter. If you don't see them clean their hands, ask them to do so.
- Check that the catheter is secured with a leg strap and the bag is emptied regularly.
- Watch for signs of infection, including fever or sudden confusion. If you think you have an infection, tell your nurse.

You may need a catheter if:

- You can't urinate.
- You had surgery on your urinary system.
- You are very ill and a catheter is needed to measure the amount of urine you make.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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