Hospitalization has risks and benefits. The decision to go to the hospital should be based on residents’ overall goals of care. If the main goal of care is to keep the resident comfortable, it may be possible to avoid going to the hospital and receive supportive care in the nursing home.

If the goals of care include aggressive medical care or intensive comfort care that cannot be safely provided in the nursing home, the hospital may be the best option. Some of the most common reasons a resident may go to the hospital are to treat infections like pneumonia or manage symptoms like difficulty breathing, swelling, or heart irregularities that could result in harm or death if untreated. Hospitals are able to provide services such as CT scans and access to specialty medical care that are not available in a nursing home. The hospital can also manage severe pain as well as treat broken bones, cuts that need stitches, and other symptoms that cannot be safely managed in the nursing home.

Going to the hospital exposes the resident to a new environment and schedule which may be stressful. For older adults, hospitalization may also result in other harms including drug reactions, delirium (sun-downing or confused thinking), falls, hospital-acquired infections, loss of independence due to being bed-bound, malnutrition and/or dehydration, declines in one’s ability to do self-care, and pressure ulcers/bed sores among others.

The benefits of staying in the nursing home include being in a familiar environment with personal belongings, receiving care from staff and clinicians who know the resident well, and avoiding hospital-associated medical problems. A resident may be able to stay in the nursing home and receive tests and treatments, including lab tests, x-rays, oxygen, antibiotics, monitoring with measuring vital signs (such as blood pressure) we well as medical care. A decision to decline hospitalization “right now” can always be changed, if needed.
How can family members help?

**What are the risks of staying in the nursing home?**

Hospital clinicians have access to some tests and treatments that are not available in the nursing home. For example, neither CT scans nor surgery can be performed in the nursing home. These tests and therapies may be necessary to diagnose and treat certain conditions, such as a hip fracture. A resident’s condition may worsen without hospital-level treatment.

**How can family members help?**

**While the resident is in the nursing home:**

- Have regular discussions about goals of care.
- Alert staff to physical or behavioral changes (even little changes). This can help staff identify and treat health problems earlier.

**If the resident is hospitalized:**

- Make sure the resident has his/her glasses and hearing aids to reduce confusion.
- Make sure the resident has his/her dentures to help with communication and dining.
- Regularly orient him/her to the hospital to decrease distress and confusion. You can do this by:
  - Reminding the resident where they are.
  - Keeping to a daily schedule.
  - Making sure there is good lighting in the room during day hours and dimming the lights at night.
  - Bringing familiar objects or clothing for them to use and wear.
- Encourage and help the resident walk or move as soon as medically possible. Inactivity is bad for the bones, muscles, heart, lungs, skin, and kidneys. It also takes longer for older adults to recover from periods of inactivity, so the sooner you start, the better.

If you have questions about hospitalizations, please speak with your OPTIMISTIC Nurse or facility staff.