Deciding About Going to the Hospital

Older nursing home residents commonly develop new or worsening symptoms. When this occurs, a decision may be needed about whether to continue care in the nursing home or go to a hospital.

Because there are risks as well as benefits of care in a hospital, it is important to make the right decision. The decision depends on a number of factors, and how the nursing home resident and her or his relatives view the benefits and risks of care in the hospital as opposed to the nursing home.

Research has shown that some hospitalizations may be unnecessary. Whether hospitalization can be prevented depends on the resident’s condition, the ability of the staff to provide the care necessary in the nursing home, and the preferences of the resident and her or his family.

Benefits of Hospital Care

There are many symptoms and conditions that usually require treatment in the hospital – for example, if vital signs are very abnormal (temperature, heart rate, or breathing rate), or if symptoms are severe and can’t be controlled (such as pain or vomiting). Hospital care offers benefits in these situations, including:

- Ready availability of sophisticated lab tests, X-rays, and scans
- Access to doctors and specialists who are in the hospital every day
- Availability of surgery and other procedures if needed
- Intensive care units for people who are critically ill

Risks of Hospital Care

Nursing home residents are prone to many complications of care in a hospital. These complications may occur even in the best hospitals, because older age, chronic medical problems, and the condition that caused the transfer all combine with the hospital environment to put nursing home residents at high risk for complications. These complications include:

- New or worsening confusion
- More time spent in bed, which can increase the risk of blood clots, pressure ulcers, muscle weakness, loss of function, and other complications
- Less sleep and rest due to tests, monitoring, and noise
- Increased risk for:
  - Falls with injuries, such as cuts, bruises, and broken bones
  - New infections
  - Depression due to limited opportunities to socialize with friends and family, as well as being in an unfamiliar environment

(continued)
Benefits of Staying in the Nursing Home

There are benefits of staying in the nursing home when a new symptom or condition occurs – assuming it is safe to treat the condition in the nursing home and staying in the nursing home is consistent with the preferences of the resident and her or his family. Treatment in the nursing home allows residents to:

- Have continuity of care – this means that residents continue to receive care from staff members who know them, and who are able to respond to their individual preferences and needs
- Remain in a familiar environment with their personal possessions, and keep their individual routines as much as possible
- Avoid what is often an uncomfortable trip to the hospital and long delays waiting in the emergency room
- Avoid potential problems due to miscommunication between the hospital and the nursing home
- Avoid other hospital-related complications

What Can Residents and Their Families Do?

There are several things that residents and their relatives can do to make sure the right decisions about hospital care are made in their best interest, including:

- Participating in care planning (deciding on treatment preferences) with the nursing home staff and their primary care provider (doctor, nurse practitioner, or physician’s assistant)
- Discussing the risks and benefits of a hospital transfer vs. treatment in the nursing home when a new symptom or condition is recognized
- Completing an Advance Directive document, such as a Durable Power of Attorney for Health Care that expresses preferences for care in emergencies and at the end of life
- Understanding the resources available in the nursing home to treat the new symptom or condition (for example, oxygen, lab tests, intravenous (IV) fluids and medications)
- Understanding the financial and other issues, such as bed-hold policies, of treatment in the hospital vs. in the nursing home