



Study Guide: Caring for the Older Adult

Chapter 2 – Gerontological Nursing Review and Resource Manual, 4th Edition

I. Introduction to Gerontology

- **Definition:** Gerontology is the study of aging and the older adult population.
- **Importance for Nursing:** Understanding aging helps nurses provide age-appropriate care, prevent complications, and promote quality of life.

II. Age Classifications

- **Young-old:** 65–74 years
- **Middle-old:** 75–84 years
- **Old-old:** 85+ years
- **Oldest-old:** 100+ years (rare)
- **Tip:** Recognize the functional differences and care needs in each group.

III. Physiological Changes with Aging

1. Integumentary System

- Thinner skin, decreased elasticity
- Reduced subcutaneous fat → increased risk of hypothermia
- Slow wound healing
- **Nursing Implication:** Skin assessment, fall prevention, pressure injury prevention

2. Musculoskeletal System

- Decreased bone density → osteoporosis
- Reduced muscle mass and strength → sarcopenia



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- Joint stiffness
- **Implication:** Fall risk, mobility assistance, encourage exercise

3. Cardiovascular System

- Decreased cardiac output
- Stiffened arteries → isolated systolic hypertension
- **Implication:** Monitor BP, educate on orthostatic hypotension

4. Respiratory System

- Decreased lung elasticity and vital capacity
- Less effective cough reflex → increased risk of infection
- **Implication:** Encourage pulmonary hygiene, vaccination

5. Sensory Changes

- **Vision:** Presbyopia, cataracts, macular degeneration
- **Hearing:** Presbycusis (high-frequency hearing loss)
- **Taste/Smell:** Diminished
- **Implication:** Safety measures, communication strategies

6. Neurological Changes

- Slower reaction time, decreased short-term memory
- Risk of delirium in acute illness
- **Implication:** Cognitive assessment, patient safety

7. Gastrointestinal System

- Decreased peristalsis → constipation



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- Reduced saliva, digestive enzymes → dysphagia risk
- **Implication:** Promote fiber, hydration, and oral care

8. Genitourinary System

- Decreased renal function
- Women: decreased estrogen → atrophy
- Men: enlarged prostate → urinary retention
- **Implication:** Monitor urinary output, encourage routine screening

9. Endocrine Changes

- Reduced metabolism, thyroid function
- Insulin resistance → increased risk of diabetes
- **Implication:** Monitor labs, educate on diet and exercise

IV. Psychosocial and Cognitive Aspects

- **Mental Health:** Depression is not a normal part of aging; assess and treat
- **Cognition:** Distinguish normal memory changes from dementia or delirium
- **Social Considerations:** Isolation, grief, and role changes can affect well-being
- **Implication:** Encourage social engagement, screen for depression and cognitive changes

V. Functional Assessment

- **Activities of Daily Living (ADLs):** Bathing, dressing, feeding, toileting, ambulating
- **Instrumental ADLs (IADLs):** Shopping, managing finances, transportation, cooking
- **Nursing Role:** Assess baseline function, promote independence, identify support needs



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VI. Common Health Concerns

- **Falls:** Leading cause of injury in older adults
- **Polypharmacy:** Risk for drug interactions and adverse effects
- **Chronic Diseases:** Cardiovascular disease, diabetes, arthritis, dementia
- **Pressure Injuries:** Prevent with repositioning and skin care
- **Implication:** Preventive care and education are essential

VII. Nursing Interventions and Best Practices

- **Person-Centered Care:** Treat each older adult as an individual
- **Preventive Care:** Vaccines, screenings, fall prevention, nutrition
- **Communication:** Speak clearly, face the patient, allow extra time
- **Safety Measures:** Mobility aids, environment modifications
- **Education:** Encourage self-management, medication adherence

VIII. Case Studies for Review

1. **Case 1:** Mr. J, 78, reports dizziness when standing. BP drops from 140/85 → 105/65.
 - Focus: Orthostatic hypotension, assess cardiovascular and neurological function.
2. **Case 2:** Ms. L, 85, has thin, fragile skin with a stage 1 pressure injury on sacrum.
 - Focus: Integumentary care, repositioning, nutrition, and skin integrity interventions.
3. **Case 3:** Mr. K, 82, shows sudden confusion after surgery.
 - Focus: Delirium vs. dementia, prompt recognition, medication review, environmental adjustments.

IX. Key Points to Remember



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- Normal aging is distinct from disease; know the difference.
- Functional assessment is as important as physiological assessment.
- Prevention, independence, and safety are central to gerontological nursing.
- Psychosocial and cognitive well-being are critical to holistic care.

Study Tip:

- Use the **page references** to review diagrams and tables for each body system.
- Practice applying knowledge to **short case scenarios**, as these help in exams and clinicals.

Webinar Recording

[Webinar Recording](#)