provide care and communicate in ways designed to maintain, or improve as much as possible, the functional ability in elderly patients encountered in all settings (see Chapter 33).

## Reality Orientation for the Confused Patient

Sometimes the older adult patient is confused for short or long periods. A patient may not know where he is. He may speak to people who are not in the room. Report any new episodes of confusion to your supervisor. They may be caused by any number of things, many of which are reversible. Make an effort to orient this kind of patient. Tell the patient the time of day and where he is. Tell him who you are and why you are there (Figure 32–3◆). Always make sure the patient is wearing his ID band. There are some confused patients who will not benefit from reality orientation.

### KEY IDEA

Never pressure the disoriented person to respond correctly. This may increase the anxiety disorientation, provoke anger, or lower self-esteem.

Patients who are *disoriented* may have difficulty remembering, recognizing, or describing people, places, or times. They may be unable to tell others who they are, where they are or the day, date, or time. These patients benefit from a consistent calm environment and routine. Display a clock and a calendar in a prominent place. Repetition is

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**Figure 32–3◆**

Reality boards are helpful in reality orientation.
Stage Three—Repetitive Motion Description

In Stage Three, repetitive motion, residents usually pace restlessly or slump forward in their chair with their eyes closed. They do not listen or talk with others. They are unaware of being incontinent. In essence, they are unaware of their bodies. They may perform the same motions over and over, which has meaning to them although we do not know what it is. It is likely that these motions have a goal. 

Helping Measures: When working with residents in Stage Three, attempt to relate to them at some level. A gentle touch may result in a moment of recognition that another person is present. A reassuring voice may help reduce feelings of anxiety. Use a calm voice when you ask questions about what the person is doing, such as “Are you making a pie crust?” You may occasionally happen on the right action or feeling. If you do, the person may respond. If you do not, they will ignore you. When words do not work, try copying their motion. If they are rubbing their fingers, rub your fingers in the same way. This can let them know that you accept them and what they are doing. In this way, you validate their feelings. The resident may also respond well to having something like a ball, a towel, a pocketbook or a doll to hold.

Stage Four—Vegetation Description

In Stage Four, vegetation, there is little movement. The eyes are usually closed, there is no facial expression and little body movement. There is little to indicate whether or not there is any thought process occurring. 

Helping Measures: Comforting touches, a reassuring tone of voice, and good physical care are the most we can do at this stage.

The essence of validation therapy is that for each confused person’s behavior, there is a reason, although we may not know the reason. Confused residents, whether or not they understand what you say to them, will understand a caring touch and tone of voice.

Safety for the Older Adult Patient

In creating a safe environment for the older adult patient, be diligent in your efforts to protect your patient from accidents, especially falls. Every patient is an individual and has different needs. Some patients may need your assistance to get in and out of bed or to walk from room to room. If you notice that your patient is unsteady, report this to your supervisor. The unsteady patient may benefit from the use of a cane or a walker or regular exercise. A sturdy, hard chair placed beside the bed will give the patient something to hold on to when getting out of bed. Be sure the patient’s clothing is not so long that it might cause the patient to trip and fall. If the height of the bed is adjustable, make sure it is in the lowest position at all times and the wheels are locked.

To keep the older adult patient safe, the nursing assistant must continually observe the patient and the environment. For example: