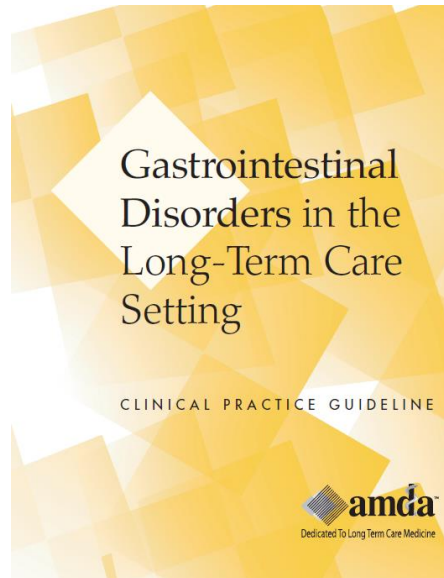


Gastrointestinal Disorders in the Long-Term Care Setting - Clinical Practice Guideline



Continuing Professional Education *Self-Study Course*

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**AMDA Gastrointestinal Disorders in the Long-Term Care Setting Clinical Practice Guideline -
CPE Self-Study Course**

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Acknowledgements

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We maintain records of course completions for a period of 7 years.



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This course and test must be completed prior to the expiration date. To obtain your continuing education certificate, you must review the material provided, take and pass an online test, and complete a simple evaluation. You may re-take the online test as many times as needed prior to the expiration date. If you are interrupted and cannot finish the test, you can save the test and come back later to finish it.

Carefully review the contents of this program. Keep in mind the practical applications it has for you in your individual setting. The focus is to increase your knowledge and application of the subject matter. For multiple choice questions select the one best answer from the choices given.

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Course Expiration Date Must be completed prior to this date	Continuing Education Hours	CDR Level
October 8, 2020	1	II

Course Description

Although aging has relatively minimal effects on GI function, age-related changes can cause or contribute to several GI disorders. Patients residing in long-term care facilities typically have numerous concurrent conditions and use numerous medications that may complicate the assessment and treatment of GI disorders. In addition, the presentation of many GI disorders in older people is atypical.

The AMDA Gastrointestinal Disorders in the Long-Term Care Setting Clinical Practice Guideline provides guidance on the prevention of, recognition of, assessment of, and treatment of several GI disorders for clinicians in long-term care settings.

Course Learning Objectives

Upon completion of this program participants will:

1. State at least 3 age-related changes that can affect GI function.
2. List at least 3 signs and symptoms of gastrointestinal disorders.
3. List at least 3 causes of diarrhea in older adults.

Suggested CDR Learning Needs Codes

- 4190 Elderly Nutrition
- 5040 Long-term, intermediate, assisted living
- 5100 Elderly
- 5220 Gastrointestinal disorders

Additional CDR Learning Needs Codes that may apply: 3080, 5410

Suggested CDR Performance Indicators

- 8.1.3 Integrates knowledge of macronutrients and micronutrients for absorption, digestion and metabolism throughout the life span in practice.
- 8.1.4 Demonstrates knowledge of nutrient requirements throughout the life span and their role in health promotion and disease management.
- 10.2.4 Integrates foundational dietetics knowledge with critical appraisal of assessment data to diagnose nutrition problems (using problem solving, etiology, signs and symptoms [PES] statements), which can be resolved or improved through treatment or nutrition intervention.
- 10.2.7 Prioritizes specific nutrition problem(s).

Additional CDR Performance Indicators that may apply: 10.2.8, 10.4.4

Note: Numerous Other Learning Needs Codes and Performance Indicators May Apply.

Continuing Professional Education Self-Assessment Test and Answer Key

Mrs. Brewster is a 70 year old patient that was recently admitted to a skilled nursing facility. Her diagnoses include type 1 diabetes mellitus, neuropathy, gastroparesis, GERD, iron-deficiency anemia, osteoarthritis, and hypertension. She has frequent constipation. After a stroke she developed severe dysphagia and opted to have a PEG tube placed for what she hopes will be short-term until her swallowing function improves. While at the facility she will receive speech and occupational therapy.

Mrs. Brewster is 61 inches tall and weighs 123 pounds. She says she has lost weight over the past 6 months. She was admitted from the hospital NPO, on a tube feeding specifically formulated for diabetes at 50 mL/hour x 24 hours, with flushes of 30 mL before and after medications, 10 mL between medications, and 150 mL/shift, providing 1440 calories, 72 grams protein, 18 grams fiber, and at least 1600 mL free water.

Her medications include Lantus insulin (12 units 1 x daily), Novolin insulin 3 x daily (dose based on blood glucose levels) Lisinopril 1 x daily, FeSO₄ 325 mg/day, Prilosec 20 mg/day, Senna q HS, Reglan 10 mg 4 x daily, and Naproxen 250 mL BID.

1. Which of Mrs. Brewster's diagnoses could be contributing to her history of constipation?
 - a. Iron-deficiency anemia
 - b. Stroke
 - c. Hypertension
 - d. Diabetes (Table 3 page 4)
2. Since she was admitted to the facility Mrs. Brewster has been having 3-4 loose stools daily. Her roommate has *Clostridium.difficile* but Mrs. Brewster tested negative for the bacteria. A possible cause of her diarrhea is:
 - a. Over-hydration
 - b. Tube feeding formula (table 7 page 9)
 - c. Reglan
 - d. Inadequate fiber intake
3. Mrs. Brewster has also had symptoms that include coughing. Which of her diagnoses might be contributing to those symptoms?
 - a. GERD (Table 5 page 7)
 - b. Gastroparesis
 - c. Diarrhea
 - d. Constipation

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4. After 6 weeks, Mrs. Brewster has been weaned off the tube feeding and is now eating well. She is having constipation, but avoids many foods and beverages because they exacerbate her GERD. What can be included in her daily diet to try to improve her constipation?
 - a. Cheese
 - b. Fruits and vegetables (page 17)
 - c. Saccharin
 - d. Caffeinated beverages

5. Mrs. Brewster's most recent complete blood count indicates her iron stores are dropping. What is a possible cause?
 - a. Constipation
 - b. C. difficile infection
 - c. GI bleed (table 10 page 12)
 - d. GERD

6. Which of Mrs. Brewster's medications could be contributing to her GI bleed?
 - a. Iron sulfate
 - b. Aleve (page 22)
 - c. Lisinopril
 - d. Omeprazole

7. Which of Mrs. Brewster's gastrointestinal problems could be directly related to aging?
 - a. GERD
 - b. Constipation (page 2)
 - c. Diarrhea
 - d. Gastroparesis