Outline

AGITATION

- Signal symptoms
- Contributing factors
- Diagnostic tests
- Differential diagnosis
- Treatment
- Prevention

SUICIDAL IDEATION

- Underlying causes
- Presentation in older adults
- Evidence-based treatments
- · Pharmacological and non-pharmacological

SLEEP DISORDERS

- Change in sleep with aging
- Effects of dementia, environment, and illness
- · Insomnia, hypersomnia, sleep apnea, nightmares
- Non-pharmacological interventions
- Pharmacological interventions

CHRONIC ILLNESS

- Chronic illness syndrome
- Model for quality improvement
- Strategies for physical function
- Patient education and management
- Psychosocial interventions

FRAILTY

- Evidence based findings
- Effect of COVID-19
- New instruments for detection
- Multi-dimensional approaches

Nutritional interventions

- Physical activity
- Psychosocial interventions

POLYPHARMACY

- Review of BEERS criteria
- Top 11 drugs to avoid Principles of deprescribing
- Clinical pearls
- Case study- 78 y/o with multiple medications with duplications of
- Case study- 84 y/o with multiple medications and recent falls
- Case study- 88 y/o with multiple medications and advanced dementia
- Case study- 76 y/o with multiple medications and drug-drug interaction risks

CULTURAL DEMENTIA CARE

- Role of stigma and cultural beliefs
- Prevalence and type of dementia
- · How different cultural groups view dementia
- Evidence-based interventions

Live Webinar Schedule - both days (Times listed in Central)

8:00 Program begins

11:50-1:00 Lunch Break

5:00 Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon). Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.

Objectives

- 1. Differentiate the causes of agitation and the latest strategies for management.
- Develop an evidence-based plan for management of agitation.
- 3. Assess the presentation of suicidal ideation in older adults and the latest treatment.
- 4. Apply evidence-based interventions in caring for older adults with encephalopathy, seizures, sleep disorders and suicidal ideation.
- 5. Analyze chronic illness syndrome and models for quality improvement.
- Assess the presentation of sleep disorders in older adults and the latest treatment.
- Evaluate the components of frailty and evidence-based management.
- Develop an evidence-based management plan for chronic conditions.
- 9. Differentiate the components of deprescribing.
- 10. Apply the principles of deprescribing to case studies.
- 11. Differentiate the role of culture in recognizing and treating dementia.
- 12. Apply evidence-based interventions in the care of dementia patients from different cultures.



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Our geriatric patients are complex to care for. There are often multiple layers of diagnoses. Sometimes there are unwanted – and preventable – side effects from the medications prescribed.

I can imagine that there have been times in the past that you, too, wished you had been able to do more when you witnessed the patient's frustrations, the fears, and the behaviors.

You could be assigned to care for a patient experiencing significant agitation, sleep difficulties, suicidal ideation, chronic conditions to manage and polypharmacy concerns – all during your next shift. How can you ensure that you are properly prepared? Earn your Geriatric Certificate!

Join me, Nanette Lavoie-Vaughan, MSN, ANPCP- DNP, as I share with you the proven best practices I have accumulated throughout my years assessing and treating patients in acute care, long term care and home health roles. I have created this comprehensive 2-day educational event based on what I've found to be the most challenging diagnoses and stressful geriatric situations.

Sign up today and you will also receive bonus materials, packed with **helpful** tools and the latest guidelines from The American Geriatric Society, The Gerontological Advanced Practice Nurses Association and the American **Psychiatric Association.**

The last year has been trying. For our patients, their families and all of us on the frontlines. I want to make this training helpful and enjoyable. You will learn through a combination of the latest evidence, sheer ingenuity and heartfelt passion. As I share real patient stories and case studies, you will leave with a clear understanding of what a difference we can all make.

Nanette Lavoie-Vaughan, MSN, ANPCP- DNP and the PESI Healthcare Team



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Meet Your Speaker

Nanette Lavoie-Vaughan, MSN, ANPCP- DNP, is an adult nurse practitioner and practices in Raleigh, NC, focusing on geriatric and psychiatric care in long-term care.

She has over 30 years of experience, including long term care, acute care, primary care, and home health. Nanette earned a Cultural Dementia Care Certificate from Stanford University.

Nanette has presented nationally and internationally to various interdisciplinary audiences on various geriatric diagnoses/treatments, dementia, pain management, and caregiver concerns. She is the author of Eldercare: The Comprehensive Guide to Caregiving and a new evidence-based clinical practice quideline for the non-pharmacological management of behavioral problems in dementia. Her knowledge and research has been recognized through published work in Clinics of North America and in book chapters and online continuing education modules. Additionally, Nanette serves as an expert witness for law firms on cases related to her field of expertise.

Financial: Nanette Lavoie-Vaughan is a Clinical Assistant Professor at East Carolina University, College of Nursing. She will address 'off-label' uses of commercial products. Dr. Lavoie-Vaughan receives a speaking honorarium from PESI, Inc. Non-financial: Nanette Lavoie-Vaughan has no relevant non-financial relationship to disclose

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*includes up to 2.0 hours of cultural competency instruction.



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