

Family Caregiver

1. The Definition of a Family Caregiver is an adult family member (including spouses, adult children, siblings, etc.) who provides informal care to an adult family member who is 60 years of age or older in his/her own home.
2. Personal care tasks list includes assistance includes: Eating, transferring, toileting, dressing, bathing, etc.
3. Ways to ensure that you're in check with yourself are, practice healthy habits, get help when you need it, always make sure to do something relaxing for yourself, and watch out for signs of stress surfacing.

Communication

1. Communication is a huge key point in taking care of a loved one/ or a resident. So, yes the way you use communication can be perceived and analysed by others so that they may react and be affected accordingly. In the event of having positive communication all around should have an end result of making your job simpler, considering, things should go smoother in your eyes and your coworkers or recipients of care. On the other hand, if your communication somehow comes across as degrading or negative, then it will be viewed and taken as that, which in turn would ultimately make life/job more difficult.
2. Communication is the process of sending and receiving a message. It consists of verbal and non-verbal communication. Verbal communication has to do with words, whether they are written, read, or said aloud.
3. Some examples of non-verbal communication or 'body language' are: messages sent through either facial expression, gestures, tone of voice, eye contact, and touch.
4. Examples of good communication: Be patient, listen, body language, keep things and words simple and easy to understand. Examples of bad communication: Don't argue with anyone, interrupt a conversation, appear bored or impatient, pass judgment or give advice, and threaten or use harsh language.
5. Explain what you are doing as you do it, say their name to get their attention, use common sounds, such as ringing a bell, whistling, etc., make sure eyeglasses have up-to-date prescriptions and are clean.

6. The best way to communicate with a deaf or hearing impaired elder involves: Using visual actions, get their attention before talking to them, talk at a normal pace, raise your voice some and lower your tone, absolutely no yelling, no background noises that can be distracting.
7. To be able to communicate fluently with a speech impaired elder there are some examples to help along the process. For example, keep it simple and clear, have patience, and pay attention to body language so you can gauge their tone and attitude.
8. In the event of a patient to become angry, don't take it personally. Often, they are upset about the situation and don't know how to handle it. Give them some space and listen to their concerns.

Safety

1. The leading cause of injury in the home are falls.
2. Check to make sure the smoke alarms are working, place a fire extinguisher somewhere easy accessible, use common sense when cooking, study the electrical cords for fraying or for broken prongs.
3. The RACE formula stands for Remove any people in direct danger Alarm by calling the fire department Contain the fire by closing doors and windows Extinguish the fire if possible or evacuate if needed.
4. The most common first aid procedure is caring for bleeding.
5. Signs of a shock consists of: Cold, pale, and clammy skin, person may feel sick or actually vomit, person may complain of feeling thirsty, and pulse speeds up but is weaker.
6. Easy ways to prevent poison accidents include: Never mix products together, store cleaning products properly, if one product is put into another container, it should be relabeled, make sure your care recipient is able to read the label on containers, lock up poisonous products for those who tend to be easily confused.

Infection Control

1. A pathogen is a disease-producing microorganism. They destroy human tissue by using it as food and giving off a waste product called toxins.
2. Fever, restlessness, chills, redness, pain, change in behavior, abnormal discharge, and swelling.
3. The six links consists of, Pathogen, Reservoir, Portal of exit, Transmission, Portal of entry, and Susceptible host.
4. To be able to break the "chain of infection" you must remove one of the links. Either remove the Reservoir, the Portal of exit, or Transmission.
5. Cleanliness is a big part of keeping infection control at bay, a couple different ways to handle it include disinfecting surfaces and reusable items, hold linens and other supplies away from your body, wash your hands and wear gloves when necessary, separate clean and dirty linens, etc.
6. Body Substance Isolation (BSI) is the practice of how to handle and dispose of body fluids in a safe manner to prevent the spread of infection.
7. BSI includes thorough hand washing, the use of gloves and plastic aprons, and proper disposal of both body fluids and the items used.

Bathing

1. Bathing helps eliminate body odors, and it's cool, refreshing, and relaxing. Also helps stimulate circulation and exercises parts of the body. There are also instances where bathing allows the caregiver the opportunity to observe the care recipient's body for any unusual changes such as rashes, decubitus ulcers, reddened areas, etc.
2. Four types of bathing: Complete bed bath, Partial bed bath, Tub bath, and Shower.
3. Assemble equipment, wash your hands, explain the procedure to care recipient, offer care recipient bedpan or urinal, cover the resident with bath blanket and fold top covers down, remove care recipient's clothing, help care recipient to the side of the bed closest to myself, ask water temperature preference, and make a mitten out of the washcloth for easier work.

4. Always allow the care recipient to try and complete things on their own. It helps them build confidence and strength.

Hair Care

1. Clean hair prevents scalp and hair breakdown and improves circulation to the scalp.
2. Never cut or color the hair, don't use a hot comb or curling iron, keep them out of drafty areas.
3. In most cases, yes, it is often used as a convenient means to get the care recipient clean proficiently.
4. Have everything ready, explain to the resident what you're doing beforehand, don't rush them let them take their own pace with it, test the waters and ask for a preference.
5. Place basin of warm water by bedside, have care recipient in a semi-sitting position or on the back, cover them with a bath towel, wash face and apply a warm damp washcloth, spread shaving cream generously over the area to be shaved, hold the skin taut and shave skin in the direction of hair growth, begin at the sideburns, work downwards over cheeks, and down over chin. Work upward on neck under chin, use short firm strokes.

Oral Hygiene

1. Illness and disease may cause someone to have bad breath and infections in their mouth.
2. Oral hygiene should be given every morning and after each meal.
3. There are certain things to look for in/on a care recipient's' mouth, including: Dry, cracked, or blistered lips. Redness, irritation, sores, or white patches in the mouth or on the tongue. Bleeding, swelling, or extreme redness to the gums.
4. Dentures need the same persistent care that natural teeth receive.

5. They should always be stored in a container filled with cool water. They will dry out and warp otherwise.

Dressing

1. Always allow the care recipient to try and dress themselves (if their not going to hurt themselves obviously).
2. Certain rules should be followed as listed. Remember to always provide privacy, Always encourage the care recipient to do as much for self as possible, Always place clothing on the "weak" side of the care recipient, and Always remove clothing from the "strong" side of the care recipient first.
3. Job Stockings and Ted Hose are elastic stockings that are usually worn by elders who have circulation problems. The stockings help the blood to circulate through the legs and back to the heart by squeezing slightly in the veins of the legs. They are also referred to as anti-embolism stocking or hose.
4. Tips and techniques for applying stockings and taking them off: It's easiest to put the stockings on when the care recipient is lying down, The stockings should be removed and reapplied at least every 8 hours, Apply the stockings according to the manufacturer's instructions, The stockings are usually elder specific in that they are measured to fit one person, and The stockings need to be laundered routinely just like regular stockings.

Prosthesis/Orthotics

1. A prosthesis is an artificial body part. Some examples: arm, leg, breast, or eye. They're usually used to promote the independence of the care recipient.
2. An orthotic device is an orthopedic appliance or apparatus used to support, align, prevent, or correct deformities or to improve function of movable parts of the body. Instead of being the actual body part that moves. Or also referred to as a brace.
3. A patient's skin should be checked on daily for red areas or open sores, the device may not be fitting well or is not being applied properly. Also there might be loose or worn parts, missing or loose screws, general condition, especially the straps and/or velcro.

Toileting

1. A bedpan is used when the care recipient cannot get out of bed.
2. The bedpan should be cleaned immediately after it is used. Clean by emptying the contents in the toilet, rinsing in cold water, and wiping both the inside and outside with disinfectant.
3. You always need to remember to wipe front to back and change the location on the washcloth with each wipe. Use soap and water or pre-moistened wipes.
4. If they're feeling out of place or uncomfortable about using the restroom in front of people then there are actions you can take to make them feel at ease. You can cover them with a sheet or leave for a minimum of 5 minutes to give them some privacy.

Caring For Incontinence

1. Incontinence is defined as the lack of ability to control the bladder and/or bowels.
2. There are a number of things that can cause such a condition, including: physical disorders, medications, immobility, distance and difficulty getting to the toilet, stress, amount and type of fluid and food intake, and changes due to aging itself.
3. Check the care recipient often to see if changing is needed. Every two hours is the common practice.
4. The best time to view the care recipient's skin condition is when changing pads or briefs. Report significant changes to the physician. Apply powder or lotion as directed.
5. NEVER ever show anger or disapproval when the care recipient wets or soils. Be matter-of-fact and show respect towards the care recipient. NEVER refer to the incontinence pad or brief as a 'diaper.' You can help care recipients feel better about themselves by handling the situation properly.

Feed or Assist with Eating

1. All these problems affect the self-feeding factor of a patient's life.
2. Sit down beside the care recipient, at the same level, carry on a pleasant conversation with the care recipient, don't rush the care recipient/ feed slowly and carefully, pick up eating utensils by the handles, avoid touching the food if you can, and a spoon may be safer to use than a fork.
3. After each meal you can assist the care recipient to wash hands and face, with oral hygiene if desired, assist them to a comfortable position, refrigerate leftovers and clean up eating area, you may wash dishes at this time, and if the care recipient routinely doesn't eat well you may want to report it to the care recipient's physician.

Meal Planning and Preparation

1. Variety, Texture, Flavors, Color, and Cost.
2. **Variety**-A well-balanced diet consists of getting nutrients from many different kinds of foods. No one food is perfect. **Texture**- Combining crispy foods with smooth, soft ones make each texture seem more interesting. Unless the care recipient is on a special diet where the texture of the food is controlled, try to choose different types of texture within each meal served. **Flavors**-If all foods in the meal have a strong, distinctive taste, they will compete with one another and overwhelm the care recipient's taste buds. Keep the strong flavored foods as the spotlight with milder tasting foods as the background. **Color**- Give each meal an appealing look by keeping the colors compatible. A sprig of parsley, radish roses, olives, or carrot curls may make an interesting dash color to an otherwise drab-looking meal. **Cost**- Most elders are not free to spend an unlimited amount of money on their food, so plan meals that are within their budgets. Consider foods on sale and use coupons whenever possible.
3. It is important to plan meals as close as possible to the care recipient's usual eating habits.
4. False, when the care recipient's diet is changed, take special care to try to keep this new diet as close to the diet of the other family members as possible.

Eye Care

1. Wash your hands, gloves on, position them comfortable, pull down lower lid and have the care recipient look upward, hold dropper in dominant hand about $\frac{1}{2}$ "- $\frac{3}{4}$ " from the eye, instill prescribed number of drops in lower lid, don't touch the lid to the dropper.
2. Repeat the procedure again.
3. Using a tissue or cotton ball, wipe from inner corner to outer corner of eye.

Finger Nail Care

1. Nails become broken or brittle may be the result of improper diet. However, they can also be the result of improper care.
2. Unless directed to, there should never be a reason for you to cut a diabetic's nails.
3. Nail care should be done everyday.
4. They're apart of the daily nail care routine.

Self-Administering Medications

1. Medication should be properly labeled so you can see the dose and time it should be taken. You can remind the care recipient to take their medications.
2. Of course, observe your care recipient for any side effects from medications.
3. Common side effects include: Nausea and vomiting, Diarrhea, Rash or hives, Headache, and Confusion or agitation.
4. Make sure the medications are stored properly, whether they need to be in the fridge or in a safe.

Skin Care

1. To provide protection.
2. Decubitus ulcers, or pressure sores, are defined as areas where the skin and tissue are broken down due to lack of blood flow.
3. Pressure points.
4. It's either sore skin or a reddened-area.
5. Some of the guidelines to be observed to prevent skin breakdown: Change the care recipient's position at least every two hours, Be careful when using bedpans, Keep linens wrinkle-free and dry, Remove any hard objects from

the bed, Use powder where skin comes together to form creases, wash and dry care recipient's skin with mild soap to remove urine or feces, etc.

6. They're refreshing and relaxing, to the care recipient who is in bed and/or unable to get up and moves around, a back rub is even more important as it stimulates the circulation.

Body Mechanics

1. 'Body Mechanics' involves how you stand, move, and position your body to prevent injury, avoid fatigue, and make the best use of your strength.
2. You use bigger and stronger muscles when moving and transferring because it does not strain them and damage them like it does to your smaller muscles.
3. The strongest and largest muscle groups of the body are located in the shoulders, upper arms, hips, and thighs (not in the back.)
4. Avoid bending from the waist when lifting, as this involves the small muscles of the back. Also avoid holding the object away from yourself, causes strain.
5. Stand close to them, Create a base of support by placing your feet wide apart, Make sure the area is safe for a move or a lift, Bend at your hips and knees with your back straight, and Push up with your leg muscles to a standing position. Back injuries are not usually the result of one incident but of the constant use of smaller back muscles.

Turning and Positioning

1. Care recipients who are bedridden must have their position changed often.
2. Any swollen limb should be kept higher than the heart where possible so that gravity will help the extra fluid drain from the limb.
3. Rules to always apply when turning and positioning: Always explain to the care recipient what you are going to do and why. Encourage the care recipient to help as much as possible. Always remember to lock the wheels on the bed. When safety rails are not provided on the bed, use common sense to provide safety measures during a procedure, such as moving the

bed against a wall. If possible, raise the bed to a comfortable working height before performing a procedure and lower it when completed. Always provide privacy when performing a procedure. Use good body mechanics.

Remember to protect any surgical tubing. Give the most support to the heaviest parts of the care recipient's body. Usually, this is the trunk of the body, shoulders to hips. Etc.

4. Good body alignment is very important. This involves keeping the spine straight and supporting the head with a small pillow. Place pillows elsewhere, such as under the hands, for further comfort.
5. Yes, align the care recipient's body with the spine straight. Normally all that is needed is a pillow under the head and, maybe, a rolled up washcloth for the hands.

Transferring

1. Care recipients should be allowed to do as much as possible for themselves.
2. A transfer belt, or gait belt, can help with the work of transferring, especially with heavier care recipients. A transfer belt is made out of canvas or leather and is fastened around their waist.
3. Does the chair provide good support to the care recipient's back? Which chair gives the care recipient the most independence? What types of chairs are available? Which chair is the safest? Can the care recipient sit with the feet resting comfortably on the floor?

Hoyer Lift

1. The Hoyer lift is a mechanical lift used to move the care recipient. It might also be called a hydraulic lift or mechanized bath chair.
2. Never use this lift to transport care recipients from one place to another.
3. Check the lift to be sure it's safe to use. Make sure the sling is safe with no rips. Use the right size of sling for your care recipient. The sling should reach from the shoulders to the knees. Get as many wrinkles out of the sling as possible. When attaching the sling, the hooks should point away from the care recipient's body.

Ambulation

1. Ambulation is the action of walking for which the care recipient may need your help.
2. The place where the elder holds the walking device should be level with hip, with the elbow slightly bent. Never readjust the devices yourself.
3. Mobility means to move from place to place.
4. Some safety rules: Always use good body mechanics, Check your care recipient's abilities and what he/she is physically able to do, Know your own strength and ask for help if you need it, Remember the importance of good communication, Establish a workable routine, Realize that many procedures can relate directly to many others, Ambulation devices are not used to help the care recipient get up from a sitting position, etc.

Routine Housework

1. The family caregiver.
2. Always remember the following: Always protect your eyes and skin, Always read label instructions, Do not mix cleaning products, Leave cleaners on a surface only for the recommended time, Change cleaning water when moderately dirty, and Store all cleaning products safely.
3. Dusting, Cleaning floors, Washing dishes, Cleaning the Kitchen, Cleaning the bathroom.
4. They should be cleaned routinely.

Bed Making

1. Wrinkles are uncomfortable and restrict the circulation, and can cause pressure sores (decubitus ulcers).
2. Tips: Keep the bed dry and clean, Change linens when needed, keep the bed wrinkle-free, keep the bed free of food and crumbs, make the bed to suit your care recipient.

3. Closed bed- used when the bed will be empty for a while. It will stay clean, not exposing the linens. Open bed- Used when the care recipient is out of bed for a while but needs to get into it easily. The top sheet of the closed bed is fan-folded down. Occupied bed- Used when the bed is made with the care recipient in it and not able or permitted to get out of the bed.
4. Never use torn or pinned linens. Never shake linens. Never allow linens to touch your clothing. Never put dirty linen on the floor. When using a flat bottom sheet instead of a fitted sheet always miter the corners. Fan-folding the top of the bed enables the care recipient to easily get in and out. A plastic 'draw sheet' protects the mattress. Etc.

Laundry Techniques

1. Clean clothes are important for good health and for making us feel and look good.
2. Bed linens should be changed once a week and whenever soiled.
3. They become damaged and wrinkled if not folded, separated, and put away correctly.

Cognitive: Dementia Impaired

1. Cognitive impairment refers to difficulty in processing information.
2. There are numerous diseases that cause cognitive impairment, such as Alzheimer's Parkinson's, Multi-Infarct Dementia, and AIDS.
3. Gradual memory loss. Inability to perform routine tasks--dressing, cooking, cleaning. Disorientation in time and space- don't know what day it is or where they are. Personality changes. Unable to learn new information. Judgment is impaired - doesn't know if something is safe is unable to make choices. Loss of language.
4. Guidelines: Speak slowly, Keep conversations short and simple, do not argue or reason with the care recipient, talk normally, don't use baby talk, ask one question at a time, be patient and understanding, etc.

5. Observe your care recipient closely for difficulty in eating, chewing, or swallowing. The difficulty may be caused by the muscles or nerves not working properly anymore or by the care recipient forgetting how to do it.