

Interdisciplinary Team Meeting: A simulated geriatric care team meeting for discharge planning with the Cooper Family (2021)

Team Member Input on Ms. Cooper

Registered Dietitian/Clinical Nutritionist

Reports current diet and future needs

Mrs. Cooper initially had poor intake when she came to rehabilitation. **From her weight of 130 lbs before her injury, her weight has declined to 124 lbs.** This was felt due to a combination of lingering delirium from the hospitalization leading to poor attention to eating and also possible side effects of the medications (pain medications causing constipation and decreased appetite). **Liberalization of her 2 gm sodium diet to a No Added Salt diet for her hypertension allowed increased intake during rehab.** Also she was offered simple finger foods that were easier for her to eat.

Wherever she goes, caregivers should change her diet to more of these types of foods, especially as the dementia progresses. **They should also monitor her intake and weight. She should continue her daily calcium citrate supplement that provides 600 mg of calcium and 1,000 IU vitamin D to reduce risk of bone fractures in the presence of her osteoporosis.**