

Functional status

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Assessment of Functional Status of older patients due: Assessment of Functional Status Assessment of elderly patients normally differs from the standard medical evaluation. For older patients, physical examination and history taking are paramount. The older patients also have different health care problems and are best assessed using a comprehensive assessment (Bickley, 2013). Therefore, clinicians ought to pay particular attention to common symptoms, for example, falling, weight loss, and declined socialization (Kresevic, 2012).

Common disorders among the elderly are not easily noticed. Therefore, clinicians ought to carry out physical examination, history and laboratory tests that screen older patients. Patient's history is needed when assessing and interviewing patients, because they could be characteristics that might interfere with the assessment. When interviewing, the clinician should be aware of the patient's daily concerns and ask specific questions. This rapport helps the clinician and patient communicate effectively. Medical history is another area clinicians should ask elderly patients questions regarding their physical nature. For example, eyes, mouth, ears, throat, chest, neck, musculoskeletal back pains, and neurologic. Regarding drug use history, the history has to be recorded, and the elderly counseled in order to stop the habit. For example, tobacco and alcohol abuse (Besdine, 2013). Physical examination is something clinicians have to observe critically because it tells a lot about elderly patients, for example vital signs such as heart rate, skin color, and abnormalities within the body (Bickley, 2013). The process of reasoning is what all clinicians go through, and they differ broadly in terms of personal style, training, communication skills, and experience (Bickley,

2013). Clinical reasoning involves developing, testing hypotheses and establishing working diagnosis.

In conclusion, older patients need to take physical examination and history taking assessments in order to maximize physical functioning and prevent decline in daily living activity.

References

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