

Long-Term Care Survey Alert

MDS & Clinical News to Use

CMS addresses how to manage MDS 3.0 discharge assessments.

The MDS 3.0 requires facilities to complete discharge assessments on residents for planned or unplanned discharges (see Long-Term Care Survey Alert, Vol. 12, No. 4). And facilities have wondered how to complete the interviews and other information on discharge assessments for residents discharged to the hospital on an emergency basis, for example.

In the June SNF/LTC Open Door Forum, CMS' **Thomas Dudley** noted that the agency expects facilities to complete the full assessment form for residents who have a planned or scheduled discharge. But in the case of unplanned or emergency discharges, obviously you're not going to be able to complete the full assessment, Dudley said. CMS realizes the interviews won't be there, but the facility should complete the assessment with available information, he stressed.

Use what you have: "We encourage you to check the record" to complete the assessment, added CMS' **Sheila Lambowitz**, on the call. "If you were in the process of scheduling a discharge and had all or part of the interviews or some of the questions on the discharge assessment answered," copy them onto the assessment.

Proton pump inhibitors (PPIs) may increase fracture risk. The Food and Drug Administration (FDA) recently warned of an increased risk of fractures of the hip, wrist, and spine associated with the prolonged use of PPIs, including Nexium, Dexilant, Prilosec, Zegerid, Prevacid, Protonix, Aciphex, and Vimovo. The FDA noted that several epidemiological studies revealed that people at greatest risk for the fractures had received high doses of proton pump inhibitors or used them for one year or more. The studies also found that the risk mostly affects individuals age 50 or older (www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm213321.htm).

"FDA recommends healthcare professionals, when prescribing proton pump inhibitors, should consider whether a lower dose or shorter duration of therapy would adequately treat the patient's condition," the report added.

Physical exercise and rehab may do more than meets the eye. The American Journal of Audiology published research earlier this year reporting that cardiovascular health positively impacts hearing over time, according to a press release from the American Speech-Language Hearing Association. And the benefits were particularly notable among older adults. Many people naturally lose some hearing acuity as they grow older, but aging is only one of many factors that contribute to the decline, researchers pointed out.

Why it works: Simply put, researchers found that cardiovascular fitness influences hearing due to increased blood circulation, especially to the organs and muscles on the inner ear, in particular, the stria vascularis in the cochlea. And metabolism and blood flow are directly related to the vascular pattern of the cochlea, the release said.