

**Track Changes
from Chapter 4 v1.16
to Chapter 4 v1.17.1**

Chapter	Section	Page	Change
4	4.3	4-3	<div> <div>1. Delirium</div> <div>2. Cognitive Loss/Dementia</div> <div>3. Visual Function</div> <div>4. Communication</div> <div>5. Activity of Daily Living (ADL) Functional / Rehabilitation Potential</div> <div>6. Urinary Incontinence and Indwelling Catheter</div> <div>7. Psychosocial Well-Being</div> <div>8. Mood State</div> <div>9. Behavioral Symptoms</div> <div>10. Activities</div> <div>11. Falls</div> <div>12. Nutritional Status</div> <div>13. Feeding Tubes</div> <div>14. Dehydration/Fluid Maintenance</div> <div>15. Dental Care</div> <div>16. Pressure Ulcer/Injury</div> <div>17. Psychotropic Medication Use</div> <div>18. Physical Restraints</div> <div>19. Pain</div> <div>20. Return to Community Referral</div> </div>
4	4.4	4-4	<p>A risk factor increases the chances of having a negative outcome or complication. For example, impaired bed mobility may increase the risk of getting a pressure ulcer/injury. In this example, impaired bed mobility is the risk factor, unrelieved pressure is the effect of the compromised bed mobility, and the potential pressure ulcer is the complication.</p>

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4	4.10	4-32	<p>6. Mechanically altered diet while NOT a resident or while a resident is used as nutritional approach as indicated by:</p> <p style="text-align: center;">K0510C1 = 1 OR K0510C2 = 1</p> <p>7. Therapeutic diet while NOT a resident or while a resident is used as nutritional approach as indicated by:</p> <p style="text-align: center;">K0510D1 = 1 OR K0510D2 = 1</p>
4	4.10	4-32– 4-33	Page length changed due to revised content.
4	4.10	4-36	<p>16. Pressure Ulcer/Injury</p> <p>A pressure ulcer can be defined as a localized injury to the skin and/or underlying tissue, usually over a bony prominence, as a result of pressure or pressure in combination with shear and/or friction. Pressure ulcers can have serious consequences for the elderly and are costly and time consuming to treat. They are a common preventable and treatable condition among elderly people with restricted mobility.</p> <p>When this CAA is triggered, nursing home staff should follow their facility’s chosen protocol or policy for performing the CAA.</p> <div style="background-color: #e1f5fe; padding: 10px; text-align: center;"> Pressure Ulcer/Injury CAT Logic Table </div>
4	4.10	4-37	<p>8. Resident has one or more pressure ulcer(s) that has gotten worse since prior assessment as indicated by:</p> <p style="text-align: center;">(M0800A > 0 AND M0800A <= 9) OR</p> <p style="text-align: center;">(M0800B > 0 AND M0800B <= 9) OR</p> <p style="text-align: center;">(M0800C > 0 AND M0800C <= 9)</p> <p>8. Trunk restraint used in bed has value of 1 or 2 as indicated by:</p> <p style="text-align: center;">P0100B = 1 OR P0100B = 2</p> <p>9. Trunk restraint used in chair or out of bed has value of 1 or 2 as indicated by:</p> <p style="text-align: center;">P0100E = 1 OR P0100E = 2</p>