



Golden Years to Critical Hours: Pearls for Caring for the Critically Ill Geriatric Patient

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Disclosures

◆ None

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Objectives

- ◆ Learn physiologic and anatomic differences for managing the geriatric airway
- ◆ Learn physiologic differences for managing hypotension in the geriatric patient
- ◆ Learn anatomic differences for chest tube placement and thoracenteses in the geriatric patient

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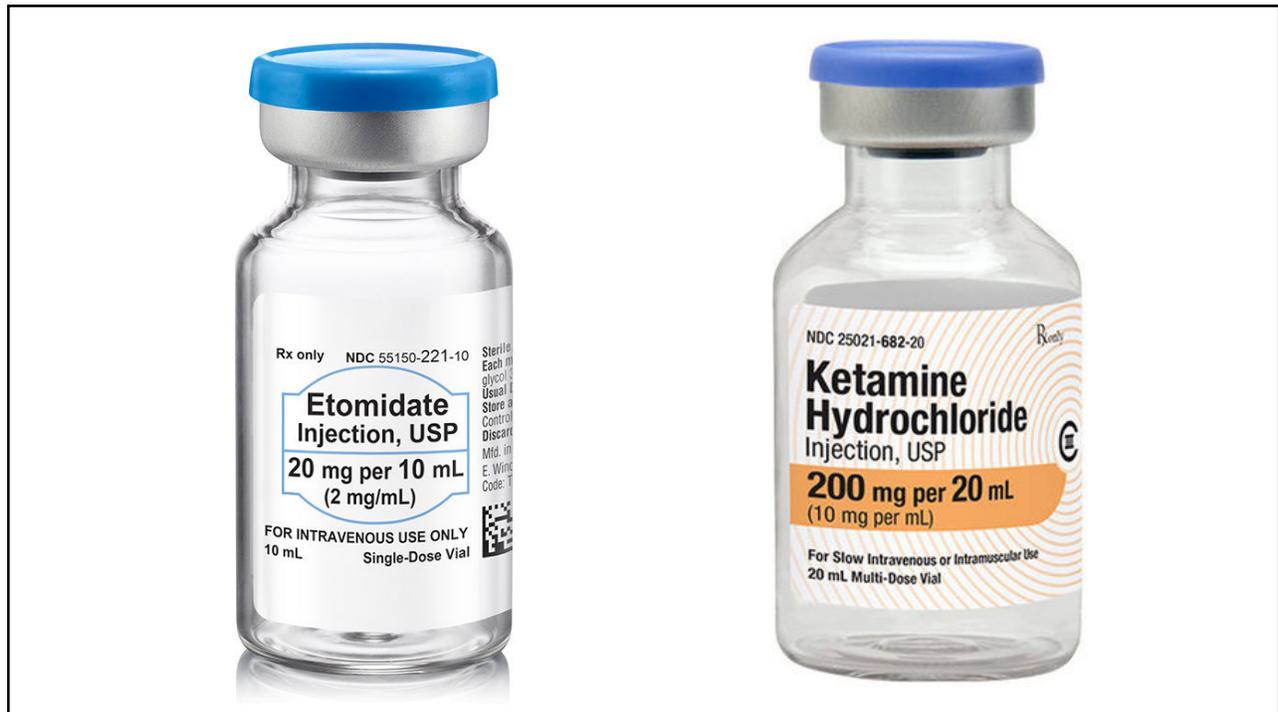


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Pearl #1

- ◆ Leave dentures in place for bag-mask ventilation
 - ◆ (Remove for actual intubation)

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The effect between etomidate and ketamine on peri-intubation hypotension in elderly patients in the emergency department

Praphaphorn Supatanakij ¹, Thitipat Mungjadetanadee ¹, Nitchakarn Boonyok ², Karn Suttapanit ³

Affiliations + expand

PMID: 40403367 DOI: [10.1016/j.ajem.2025.05.021](https://doi.org/10.1016/j.ajem.2025.05.021)

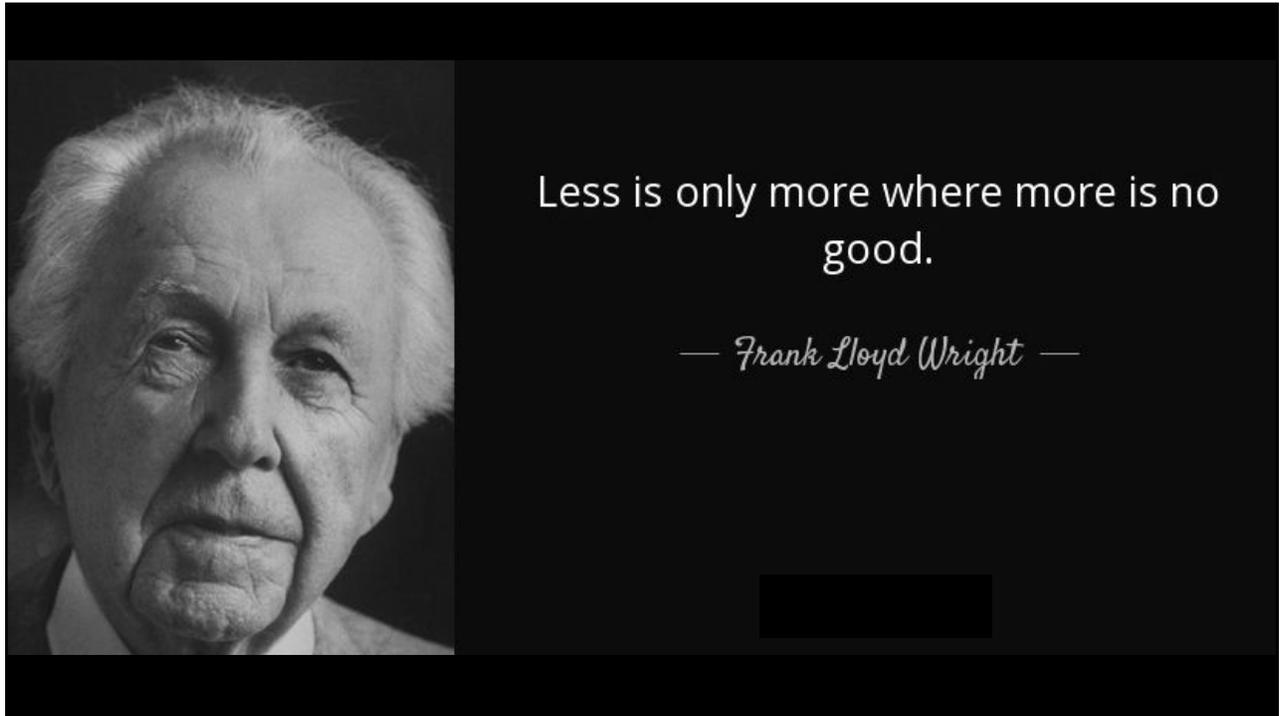
less is more

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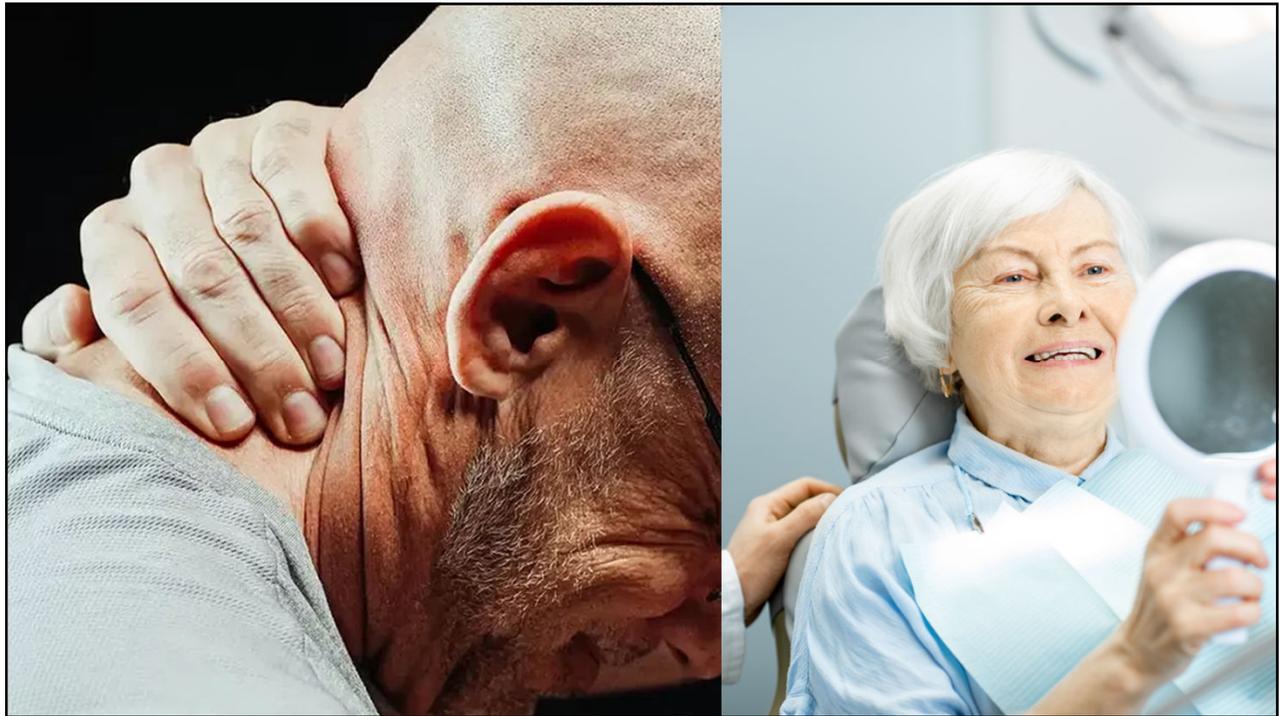
Pearl #2

- ◇ Consider using lower doses of induction agents for intubation in hemodynamically unstable geriatric patients
 - ◇ Etomidate: 0.15-0.2 mg/kg
 - ◇ Ketamine: 1-1.5 mg/kg

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Pearl #3

- ◆ Anticipate a difficult intubation due to physiologic changes in the geriatric airway

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Randomized Controlled Trial > JAMA. 2020 Mar 10;323(10):938-949.
doi: 10.1001/jama.2020.0930.

Effect of Reduced Exposure to Vasopressors on 90-Day Mortality in Older Critically Ill Patients With Vasodilatory Hypotension: A Randomized Clinical Trial

François Lamontagne^{1,2}, Alvin Richards-Belle³, Karen M Zia Sadique⁴, Richard D Grieve⁴, Julie Camsooksai⁵, Anthony C Gordon^{6,7}, Doreen Henry⁸, Nicholas Hudson⁸, Chris Whitman⁸, J Duncan Young⁹, Kathryn M Rowan¹⁰

Affiliations + expand
PMID: 32049269 PMCID: PMC7064880 DOI: 10.1001/jama.2020.0930

Multicenter Study > Intensive Care Med. 2025 May;51(5):883-892.
doi: 10.1007/s00134-025-07910-4. Epub 2025 May 13.

Efficacy of targeting high mean arterial pressure for older patients with septic shock (OPTPRESS): a multicentre, pragmatic, open-label, randomised controlled trial

Akira Endo^{1,2,3}, Kazuma Yamakawa⁴, Takashi Tagami⁵, Yutaka Umemura⁶, Takeshi Wada⁷, Ryo Yamamoto⁸, Hiroki Nagasawa⁹, Wataru Takayama¹⁰, Masayuki Yagi¹¹, Kyosuke Takahashi¹², Mitsuaki Kojima^{10,13}, Chihiro Narita¹⁴, Satoshi Kazuma¹⁵, Jiro Takahashi¹⁶, Atsushi Shiraiishi¹⁷, Masaki Todani¹⁸, Masaki Nakane¹⁹, Toshihiko Nagata²⁰, Shohei Tanaka²¹, Yuta Yokokawa²², Kunihiro Takahashi²³, Haruka Ishikita^{24,10}, Ryo Hisamune⁴, Junichi Sasaki⁸, Ken-Ichi Muramatsu⁹, Hiroyuki Sonobe¹¹, Kazunobu Minami²⁵, Hiromasa Hoshi^{24,10}, Yasuhiro Otomo^{10,26}; OPTPRESS trial investigators

Collaborators, Affiliations + expand
PMID: 40358717 PMCID: PMC12130109 DOI: 10.1007/s00134-025-07910-4

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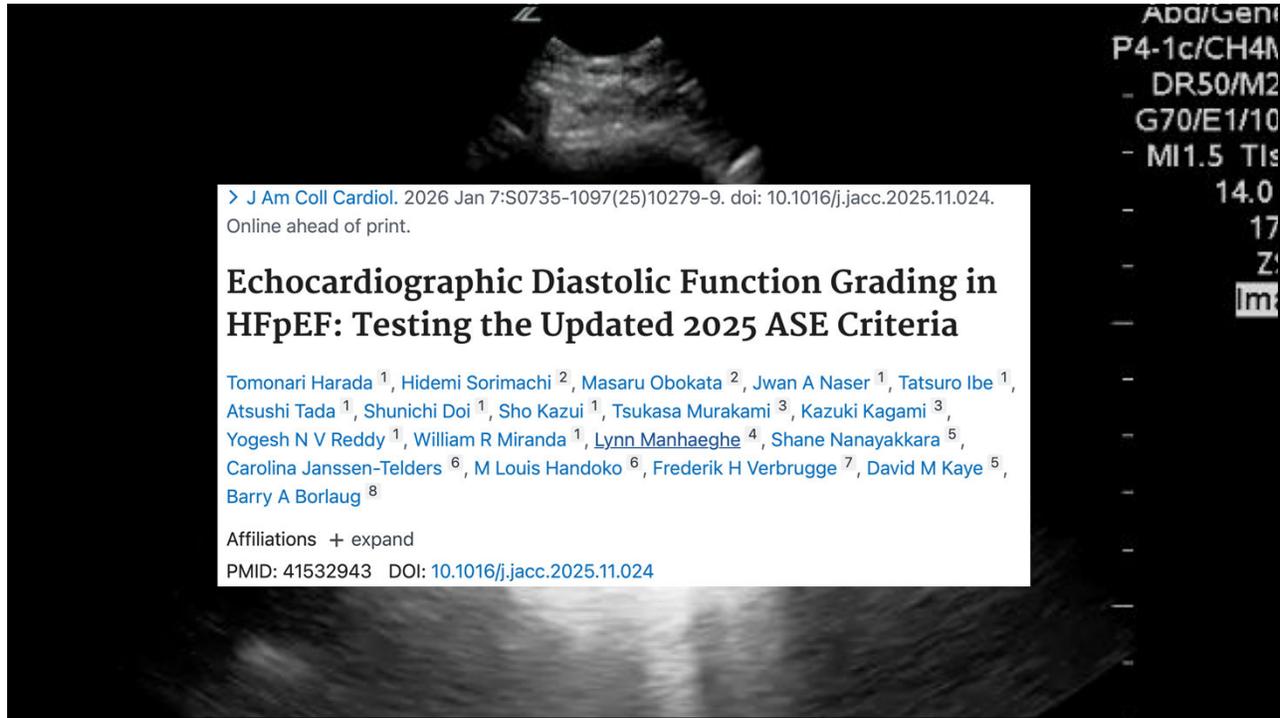
Pearl #4

- ◇ Consider a MAP goal of 60 in hypotensive geriatric patients
 - ◇ While continuing to monitor for signs of end-organ hypoperfusion

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Abd/Geni
P4-1c/CH4M
- DR50/M2
G70/E1/10
- MI1.5 TIs
14.0
17
Z:
Ima

> [J Am Coll Cardiol.](#) 2026 Jan 7:S0735-1097(25)10279-9. doi: 10.1016/j.jacc.2025.11.024.
Online ahead of print.

Echocardiographic Diastolic Function Grading in HFpEF: Testing the Updated 2025 ASE Criteria

Tomonari Harada ¹, Hidemi Sorimachi ², Masaru Obokata ², Jwan A Naser ¹, Tatsuro Ibe ¹, Atsushi Tada ¹, Shunichi Doi ¹, Sho Kazui ¹, Tsukasa Murakami ³, Kazuki Kagami ³, Yogesh N V Reddy ¹, William R Miranda ¹, [Lynn Manhaeghe](#) ⁴, Shane Nanayakkara ⁵, Carolina Janssen-Telders ⁶, M Louis Handoko ⁶, Frederik H Verbrugge ⁷, David M Kaye ⁵, Barry A Borlaug ⁸

Affiliations + expand
PMID: 41532943 DOI: [10.1016/j.jacc.2025.11.024](#)

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Pearl #5

- ◇ Avoid over-resuscitation with intravenous fluids as geriatric patients are at greater risk of volume overload due to diastolic dysfunction
 - ◇ Don't be misled by a "normal" POCUS/TTE

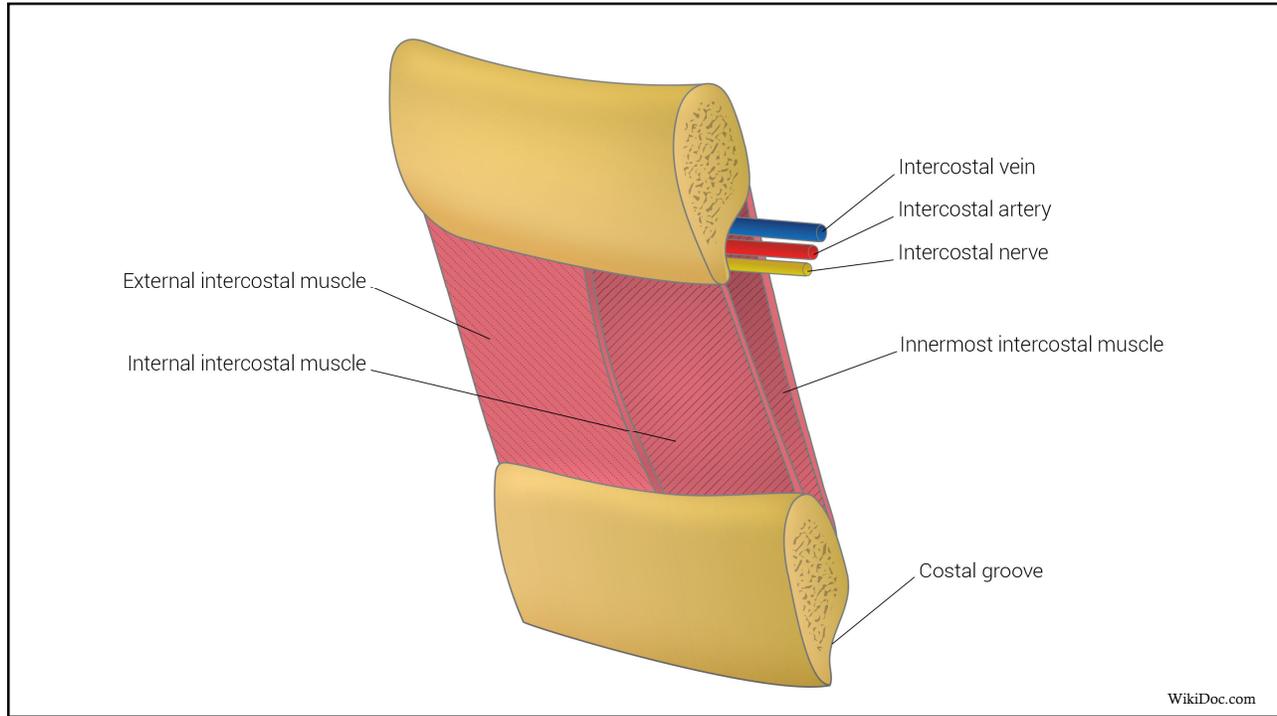
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Pearl #6

- ◆ Enter the intercostal space > 10 cm lateral to the spinous process for chest tubes and thoracenteses

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Take Home Pearls

- ◆ Leave dentures in place for bag-mask ventilation (remove for intubation)
- ◆ Consider using lower doses of induction agents for intubation in hemodynamically unstable geriatric patients
- ◆ Be prepared for the difficult geriatric airway
- ◆ Tolerate lower MAP goal of 60 (if no other signs of hypo-perfusion)
- ◆ Be cautious with IVF resuscitation even with a “normal” POCUS
- ◆ Perform thoracenteses/chest tubes more laterally in the geriatric patient