

FOD 4B: Assessing, diagnosing and managing patients with common neurocognitive disorders with typical presentations: Part B: Communication with patient/caregiver

Key Features

- This EPA focuses on the initial assessment and diagnosis of patients with common neurocognitive disorders but does not include patients with delirium or behavioural and psychological symptoms of dementia (BPSD).
- This EPA includes performing and interpreting a cognitive assessment, physical examination and investigations, communicating diagnosis and prognosis, identifying potentially modifiable conditions, and recognizing the need for neuropsychological testing.
- This EPA also includes managing patients with pharmacologic and non-pharmacologic treatment options, utilizing community support programs, demonstrating awareness of medico-legal aspects, and future planning.
- The observation of this EPA is divided into three parts: assessment; communication with patient and/or caregiver; and management.
- The cognitive assessment and management aspects of this EPA may be observed in simulation.

Assessment

Communication scenarios (select all that apply): counselling on treatment options; diagnosis; driving risk; home safety risk; management of finances; other safety issue(s)

Direct observation by supervisor

Collect 5 observations of achievement

- At least 2 observations of communicating diagnosis and counselling on treatment options
- At least 2 observations of any of the following types of communication: home safety, management of finances, or other safety issues
- At least 1 communication of driving risk
- At least 2 observations by a geriatrician

Case presentation

- mild cognitive impairment (MCI); Alzheimer's; vascular dementia; mixed cause dementia; Lewy body dementia

Setting

- inpatient; outpatient

Assessor

- geriatrician; psychiatrist; neurologist; care of the elderly physician

Milestones in Elentra

- **COM 1.1 Communicate using a patient-centred approach that facilitates patient trust and autonomy and is characterized by empathy, respect, and compassion**
- **COM 3.1 Convey sensitive information regarding driving, cognition and other safety concerns clearly and compassionately respond appropriately**
- **COM 1.5 Recognize when strong emotions are impacting an interaction and respond appropriately**
- **COM 3.1 Convey information related to the patient's health status, care, and needs in a timely, honest, and transparent manner**
- **COM 4.1 Communicate with cultural awareness and sensitivity**
- **COM 4.3 Answer questions from the patient and family about next steps**
- **COM 5.1 Document clinical encounters to convey clinical reasoning and the rationale for decisions**
- **P 3.1 Adhere to professional and ethical codes, standards of practice, and laws governing practice, especially as they relate to driving safety**