



FOD 4b - Diagnosing and initiating management of patients in delirium
Part B: Communication with patient/caregiver

<p>Key Features</p> <ul style="list-style-type: none"> • This EPA focuses on the diagnosis and initial management of delirium through the use of validated delirium screening tools, and the communication of diagnosis • - This EPA does not include prevention or pharmacologic management • - The observation of this EPA is divided into three parts: diagnosis; communication; and initiating management
<p>Target</p> <ul style="list-style-type: none"> • Collect 2 observations of achievement • - At least 1 of each from case mix • - At least 2 settings • - At least 2 different assessors
<p>Case presentation</p> <ul style="list-style-type: none"> • hyperactive (i.e. agitated); hypoactive
<p>Setting</p> <ul style="list-style-type: none"> • geriatric unit; inpatient consult; pre- and/or post-operative setting; emergency room; day hospital; residential care; other
<p>Assessor</p> <ul style="list-style-type: none"> • geriatrician; care of the elderly physician
<p>Milestones in Elentra</p> <ul style="list-style-type: none"> • COM 1.4 Respond to patient’s nonverbal communication and use appropriate non-verbal behaviours to enhance communication • COM 3.1 Provide information on diagnosis and prognosis in a clear, compassionate, respectful and objective manner