TO/JM

DIAGNOSTIC ASSESSMENT

Date Assessed: 21/06/2018

Attended: with

Patient lives with:

Educated:

Main Occupation:

Age at Retirement:

Marital Status:

Insight: normal

History of Presenting Complaint:

Past Psychiatric History:

Nature of Disease Progression:
Onset:
Course:

Past Medical History:

Current Medication:
Childhood Education and Employment History:

Family and Social History:

Hachinski ischaemic score: 18

Clinical Dementia Rating:

Addenbrookes Cognitive Examination ACE III: 100 with sub scores as attention 18; memory 26; fluency 14; language 26 and visual spatial awareness 16.

Blood Results:

Neuropsychiatric Inventory:

Neuroimaging:

Neuropsychometrics:

Bristol Activities of Daily Living Scale (BADLS):

Physical Examination:
blood pressure was 80mmHg and her pulse was beats per minute, regular.

Mental State Examination:

Diagnosis: history, presentation and objective assessment is in keeping with mild Alzheimer’s Dementia.

Treatment Plan:
1. I discussed ……consent for this assessment and gained her agreement to discuss her diagnosis, treatment options, benefits and side effects with her and her …. 
2. She was agreeable to a trial of donepezil 5mg daily and I have given her a prescription for 28 days.
3. She will have a post diagnostic appointment in 3 weeks with our memory nurses. Her response to donepezil, including blood pressure and pulse, will be reviewed at this appointment to ensure she is tolerating prior to further titration as per Trust protocol.
4. Her daughter is aware to contact our memory nurses in the event of any concerns.
5. Once stabilised on medication, shared care management protocol will be effected with her care transferred to her GP.
6. She has been advised to notify the DVLA about her diagnosis and the necessary form has been provided for this.
7. She has been given an information pack containing – Alzheimer’s Society leaflet about diagnosis (Alzheimer’s Dementia), Medication leaflet (donepezil), Driving and Dementia and a Lasting Power of Attorney leaflet.
8. A clinically adapted letter has been sent to her for her records with a full letter sent to her GP.
9. In the event of a crisis or any major concerns, please contact us during working hours on 01423 795150. If already discharged please contact your GP who can re-refer you back to mental health services if appropriate and if out of hours dial 111.
10. I would be grateful if you could kindly add her details to the Dementia Register.

Yours sincerely

Dr Olusoga
Consultant Psychiatrist for Older Adults

cc a clinically relevant copy of this letter has been sent to …

All our Trust premises, including in-patient grounds, gardens and courtyards are smoke-free. Service users across our Trust will be provided with full advice, support and alternative options such as nicotine replacement therapy