



FOD 3 - Selecting, performing, and interpreting assessments of cognition

<p>Key Features</p> <ul style="list-style-type: none"> • This EPA focuses on selecting the most appropriate cognitive assessment tool in the context of the patient’s presentation, performing the assessment, documenting the encounter, and interpreting the findings. • This EPA requires the use of a validated cognitive assessment tool such as: MMSE, MOCA; FAB; Boston naming test, trials A and B; Clock Drawing test; ToCA; SLUMS.
<p>Assessment Plan:</p> <p>Direct observation by supervisor with case discussion</p>
<p>Case presentation</p> <ul style="list-style-type: none"> • Assessment tool: MMSE; MOCA; FAB; Boston; Clock Drawing test; IQCODE; ToCA; SLUMS; other
<p>Setting</p> <ul style="list-style-type: none"> • inpatient; outpatient
<p>Assessor</p> <ul style="list-style-type: none"> • geriatrician; TTP resident; care of the elderly physician
<p>Collect 3 observations of achievement</p> <ul style="list-style-type: none"> - At least 2 different tools other than MMSE and MOCA - At least 2 assessors
<p>CanMEDS Milestones:</p> <ul style="list-style-type: none"> • COM 1.2 Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety • COM 1.1 Communicate using a patient-centred approach that facilitates patient trust and autonomy and is characterized by empathy, respect, and compassion • COM 2.3 Seek and summarize relevant information from other sources, including the patient’s family, and medical records • ME 2.2 Identify frailty, cognitive impairment, mood disorders and/or functional impairment • ME 2.2 Complete and score all required elements of the assessment according to guidelines • ME 2.2 Synthesize and organize clinical information for clear and succinct presentation to supervisor • COM 5.1 Organize the information from an assessment within a written document • COM 5.1 Document information about patients and their medical conditions in a manner that enhances interprofessional care