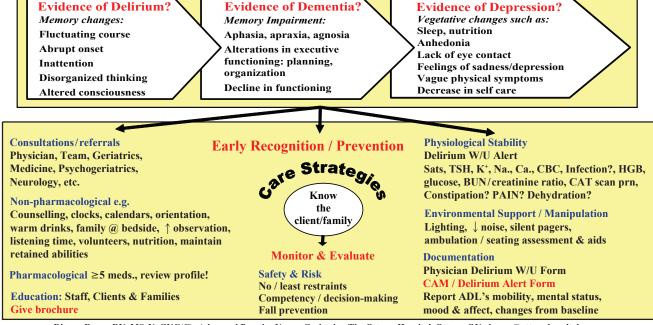
### Kaleidoscope of Care Strategies for Delirium, Dementia, Depression

#### **Evidence of Delirium? Evidence of Dementia? Evidence of Depression?** Vegetative changes such as: Memory changes: Memory Impairment: Sleep, nutrition Fluctuating course Aphasia, apraxia, agnosia Anhedonia Abrupt onset Alterations in executive Lack of eye contact functioning: planning, Inattention Feelings of sadness/depression organization Disorganized thinking Vague physical symptoms **Decline in functioning** Decrease in self care Altered consciousness Consultations/referrals Physiological Stability Early Recognition / Prevention Physician, Team, Geriatrics, Delirium W/U Alert ore Strategie Medicine, Psychogeriatrics, Sats, TSH, K+, Na., Ca., CBC, Infection?, HGB, glucose, BUN/creatinine ratio, CAT scan prn, Neurology, etc. Constipation? PAIN? Dehydration? Non-pharmacological e.g. the **Environmental Support / Manipulation** Counselling, clocks, calendars, orientation, client/family Lighting, ↓ noise, silent pagers, warm drinks, family @ bedside, ↑ observation, listening time, volunteers, nutrition, maintain ambulation / seating assessment & aids retained abilities **Monitor & Evaluate Documentation** Physician Delirium W/U Form Pharmacological ≥5 meds., review profile! Safety & Risk CAM / Delirium Alert Form No / least restraints **Education: Staff, Clients & Families** Report ADL's mobility, mental status, Competency / decision-making Give brochure **Fall prevention** mood & affect, changes from baseline

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#### Kaleidoscope of Care Strategies for Delirium, Dementia, Depression





# Differences in Delirium, Dementia and/or Depression

Feature	Delirium	Dementia	Depression
Onset	Acute, abrupt	Chronic, slow	Variable
Course	Short, fluctuating, often worse at night	Long, progressive yet stable over time	May change during the day & often worse in the morning
Attention Span	Impaired, unfocused, distracted	Generally normal	Normal. Minimal impairment yet distractable
Orientation	Impaired, fluctuates within short time frames	↑ disorientation over time. May develop after months to years	Selectively intact: "I don't know."
Sleep	Disturbed (may have hour to hour variations)	Stable (may have day/night reversals)	May be too much or too little
Level of Consciousness	Altered, fluctuating	Not clouded until end stages	Stable unless sleeping too much or too little
Thinking	Disorganized, distorted, rambling	Need concrete instructions, poor judgements, ↓ problem-solving skills	Intact but with themes of hopelessness, helplessness

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