



For advice, discussion or queries please email your Dementia Practitioner or Practice Lead (listed on the back)

For referrals please complete our referral form and email to:

dpn-tr.enquiriesBristolDementia@nhs.net

NB Mental Health referrals for older people need to go to their Liaison desk 0117 9195670

We suggest you firstly undertake steps 1, 2 and 3 -

1. Physical Treatable causes - Check and resolve or take into account -

- Delirium? Exclude infection, pain and constipation, consider cholinergic burden of prescribed medication
- Drugs / alcohol? History of abuse? Current intake?
- Physical health? Falls? Gait?
- Bloods : FBC, B₁₂, Folate, Urea & electrolytes, Liver function tests, Thyroid function, Calcium, HbA1c.
- At risk / vulnerable / acute?
- Please check blood pressure and weight- consider BMI, check alcohol intake and smoking.

2. Check the course of memory problem

- When & what was the first symptom? Gradual? Fluctuating? Insight? Duration? Sudden onset? Relevant event? Patchy?
- What has changed?
- Hallucinations? Delusions? Sleep disturbance? Fluctuation in awareness? Gait?
- Personality change? Disinhibited? Apathy? Less empathy? Concrete thinking?
- Speech? Word-finding difficulties? Comprehension difficulties?
- Mental health? Depression? Anxiety? Psychosis?
- Cognitive testing- GPcog., ACE III, Mini-ACE III, Mini Cog
- Ecog (give to partner / carer) looks at functional change (needed to differentiate mild cognitive impairment from dementia)

3. Order CT - please order a CT with coronals (write 'dementia?' on request), review result.

If very elderly, frail, impaired or scanning may distress we are able to proceed without CT.

Next: Formulation

Stage 1: GP diagnoses those with a clear diagnosis of Alzheimer's disease or Mixed Dementia: - **discuss diagnosis and consider treatment with patient**, Consider discussing these people with your practitioner during their visits to surgery for post diagnostic support and signposting and allocation to a Dementia Navigator when appropriate.

Stage 2: GP discuss with their Practitioner any symptoms or concerns noted in steps 1, 2 and 3, who will advise and may do further assessment.

Stage 3: GP guidelines recommend referral straight into the core Memory Service for discussion of anyone with cognitive symptoms of less than 2 years duration; anyone with early onset symptoms or complex cognitive symptoms