Geriatric Medicine

COD 7B-Assessing and managing older adults with uncomplicated mental health conditions. Part B: Management

Key Features

- This EPA focuses on common uncomplicated mental health conditions in the presence or absence of medical comorbidities
- This EPA includes assessing suicidal and homicidal risk, diagnosing common uncomplicated mental health conditions, recognizing potential medical conditions contributing to the disorder, and recognizing complex psychiatric conditions, knowing when to refer or participate in comanagement with mental health care providers
- This EPA does not include assessing and managing complex mental health conditions, such as psychotic depression, active suicidal or homicidal ideations, or exacerbation of chronic psychiatric conditions such as schizophrenia, bipolar affective disorder or personality disorder
- The observation of this EPA is divided into two parts: patient interview; and management

Assessment Plan:

Part B: Management

Case discussion with supervisor.

Case presentation

Use Form 1. Form collects information on:

- Mental health condition: depression; anxiety; sleep disorder; delusional disorder; other
- Co-morbidities: no; yes [if yes, open text box to record]

Collect 3 observations of achievement

- At least 1 depression and 1 anxiety condition
- At least 1 observation by a geriatrician
- At least 2 different assessors

Setting

• geriatric psychiatry; outpatient clinic; geriatric unit; inpatient consult; day hospital; other

Assessor

• geriatrician; geriatric psychiatrist; care of the elderly physician

Milestones in Elentra

- ME 1.3 Apply clinical and biomedical sciences to the assessment and management of common uncomplicated mental health conditions in older adults
- ME 2.4 Provide evidence-informed, patient-centred care of uncomplicated mental health conditions in the presence of medical co-morbidities
- ME 4.1 Determine the need, timing and priority of referral to another physician and/or health care professional
- COM 3.1 Share information and explanations that are clear and accurate, while checking for patient and family understanding
- COL 1.3 Use co-management and consultation as opportunities to improve quality of care and patient safety by sharing expertise
- COL 1.3 Engage in respectful shared decision-making with other physicians and/or health care professionals.