This optional Flow Sheet is based on the Guideline, 
Cognitive Impairment in the Elderly – Recognition, Diagnosis and Management
Web site: www.BCGuidelines.ca

<table>
<thead>
<tr>
<th>NAME OF PATIENT</th>
<th>SEX</th>
<th>DATE OF BIRTH</th>
<th>EDUCATION</th>
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<th>DIAGNOSIS</th>
<th>DATE OF DIAGNOSIS</th>
<th>OCCUPATION</th>
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### CARE OBJECTIVES

#### RISK FACTORS AND CO-MORBID CONDITIONS
- Obesity
- Smoker
- Alcohol
- Diabetes
- HTN
- CAD
- Atrial fib
- Asthma
- COPD
- Renal disease
- Depression
- Other:

#### Baseline Investigations
- FBG
- TSH
- eGFR
- CBC
- B₁₂
- Ca
- STS
- SMMSE
- MoCA

#### BASELINE

#### REVIEW CLINICAL ACTION PLAN

### SELF MANAGEMENT (Discuss with patient & caregiver)

- Define management goals (Risk factor reduction; Treat co-morbid conditions; case management)
- Functional status (Baseline & review at each visit)
  - IADLs: Housework, Bathing/Toileting
  - ADLs: Meal prep, Dressing
  - Supports (home care, family, case manager, living situation)
  - Caregiver issues (behaviour/sleep/mood)
  - Living will/DNR discussion

### VISITS

#### ANNUALLY

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<thead>
<tr>
<th>VACCINATIONS</th>
<th>Annual Flu</th>
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<th>Pneumovax</th>
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*For information on billing incentive fees, please visit www.health.gov.bc.ca/phc*