NR 601 Week 6 i-Human Virtual Patient Encounter- Alzheimer's Dementia

The i-Human Virtual Patient Encounter for Alzheimer's Dementia typically involves assessing a virtual patient, making a diagnosis, and creating a management plan. Here's a step-by-step guide to help you navigate through the encounter:

Step 1: Patient History

- **Chief Complaint**: Understand the main reason for the visit. Common complaints might include memory loss, confusion, or changes in behavior.

- **History of Present Illness (HPI)**: Gather detailed information about the onset, duration, and progression of symptoms.

- **Past Medical History (PMH)**: Look for risk factors such as hypertension, diabetes, or previous head trauma.

- **Family History**: Check for a family history of dementia or other neurological conditions.

- **Social History**: Assess the patient's living situation, support system, and any substance use.

Step 2: Physical Examination

- **General Appearance**: Note any signs of neglect or poor self-care.

- **Neurological Exam**: Focus on cognitive function, including memory, orientation, language, and executive function.

- **Mental Status Exam**: Use tools like the Mini-Mental State Examination (MMSE) or Montreal Cognitive Assessment (MoCA).

Step 3: Diagnostic Tests

- **Laboratory Tests**: Rule out reversible causes of dementia (e.g., thyroid function tests, vitamin B12 levels).

- **Imaging**: Consider brain imaging (MRI or CT scan) to rule out other causes of cognitive impairment.

Step 4: Diagnosis

- **Criteria for Alzheimer's Dementia**: Based on the DSM-5 or NIA-AA criteria, which include:

    o Evidence of significant cognitive decline from a previous level of performance.

    o Cognitive deficits interfere with independence in everyday activities.