SUPPLEMENTARY INFORMATION

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to:
K Lam, Windy SY Chan, James KH Luk, Angela YM Leung. Assessment and diagnosis of dementia: a review for primary healthcare professionals.

Appendix. An example of referral to specialist care for dementia care (page 1)
APPENDIX. An example of referral to specialist care for dementia care

Dear Consultant,

I would like to refer the above-named patient for your management. The patient was found to have cognitive decline for __________ (duration), which is insidious / sudden in onset with gradual / stepwise progress, presenting with ________________ (examples of memory problems), which do / do not interfere with independence in everyday activities. If the memory problems do interfere with everyday activities, examples are ________.

The disturbances are / are not occurring exclusively during the course of delirium, and are / are not better accounted for by another mental disorder such as depression or psychosis.

Risk factors for dementia (please tick if the patient has the following risk factors):

☐ stroke
☐ obstructive sleep apnoea
☐ family history of dementia
☐ alcohol use

Clinical features of dementia subtypes (please tick if the patient has the following features):

☐ Parkinsonism
☐ gaze palsy
☐ gait problems
☐ urinary incontinence
☐ visual hallucination
☐ rapid eye movement sleep disorder
☐ fluctuation of cognition
☐ disinhibition
☐ hyperorality
☐ compulsive behaviours
☐ apathy or loss of empathy

Results of cognitive tests (if any):

Results of neuroimaging (if any):

Results of laboratory tests (If any):

Thank you.

Yours truly,