



Applying Geritalk in Clinical Practice

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Abstract

Taking care of older patients comes with its own set of principles. Effective communication is essential for maintaining a healthy doctor-patient relationship. Geriatric & Palliative Care fellows at Mount Sinai undergo formal teaching during a 2-day geritalk retreat for developing communication skills to tackle various challenges concerning the geriatric age group.

Case Presentation

80-year-old female with no known medical co-morbidities was brought in by her son for concerns of worsening memory loss, though the patient herself did not appreciate a decline in memory. The patient was reluctant to participate in the interview and the son informed of multiple incidents of her getting lost while driving, getting confused at physician appointments and getting locked out of her own house. On asking the patient about the mentioned incidents, she would reply “I do not know” to most questions. She was visibly angry with the questions & it required time, patience and support to get her to participate in the visit.

On Cognitive assessment; the patient was oriented to self, place but not the date or the day. She was able to follow complex commands, recall 2 of 3 items and create sentences but was unable to draw a clock, copy shapes, subtract 7 from a 100 or spell “WORLD” backward. She could name 4 animals in 60 sec, counted up to 96 when asked to count backward from a 100.

Clinical assessment made during the interview was suggestive of moderate to severe dementia. Further laboratory testing and imaging studies were requested at the end of the visit.

The patient participated appropriately during the cognitive assessment though was not accepting of the possible diagnosis at the end of the visit.

Discussion

Interacting with an older patient reluctant in participating during a clinical interview can be challenging, especially when facing a severe illness such as dementia. Formal communication training of the physicians using evidence-based and interactive teaching methods provide techniques to navigate the circumstances. Active use of the techniques like “NURSE” statements (Name-Understand-Respect-Support-Explore) and Ask-Tell-Ask method to break bad news can improve physician preparedness for specific communication challenges. Geritalk and similar Oncotalk programs help equip training physicians with the necessary skills, and similar programs should be applied in other specialties as well [1].

References

1. Kelley AS, Back AL, Arnold RM, Goldberg GR, Lim BB, Littrivis E, et al. Geritalk: communication skills training for geriatric and palliative medicine fellows. *J Am Geriatr Soc.* 2012;60(2):332-7.

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