How to Use the *Try This* Series for Assessing Delirium and Dementia

**Change in Mental Status or Other Behaviors That Would Trigger Assessment**

- Agitation or lethargy
- Fluctuating or altered LOC
- Memory impairment or disorganized thinking
- Wandering
- Uncooperativeness or failure to follow instructions
- Change in behavior or function
- Inattentiveness
- Stupor

Assess for delirium

- CAM + facility’s mental status evaluation

Possible delirium with dementia  
Possible delirium without dementia  
Probably not delirium

**Use the Delirium Superimposed on Dementia Algorithm**

Treat and manage: use facility protocol to determine cause, modify risk factors, protect patient, and perform ongoing assessments to monitor response.

- Contact primary care provider to investigate the cause of behavior change

Assess for dementia using the

- Mini-Cog
- Recognition of Dementia in Hospitalized Older Adults

- Probably not dementia
- Possible dementia

Further assess patients using *Try This* best practices for dementia series

LOC = level of consciousness; CAM = Confusion Assessment Method
Note: bold text indicates instrument is part of the *Try This* series.