

# HHP Care Model and Disease Management Webinar Series

## Geriatrics Assessments and Consultations

Thursday, May 13, 2021

5:30pm – 6:30pm

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Moderator – 05/13/21

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- You have been automatically muted. You cannot unmute yourself.
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  - Due to time constraints, any unanswered questions will be addressed this week and posted on the HHP website
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# Geriatrics Assessment

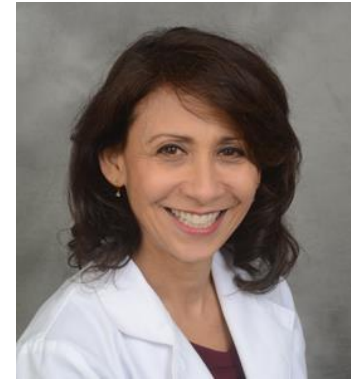


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# Geriatrics Assessment

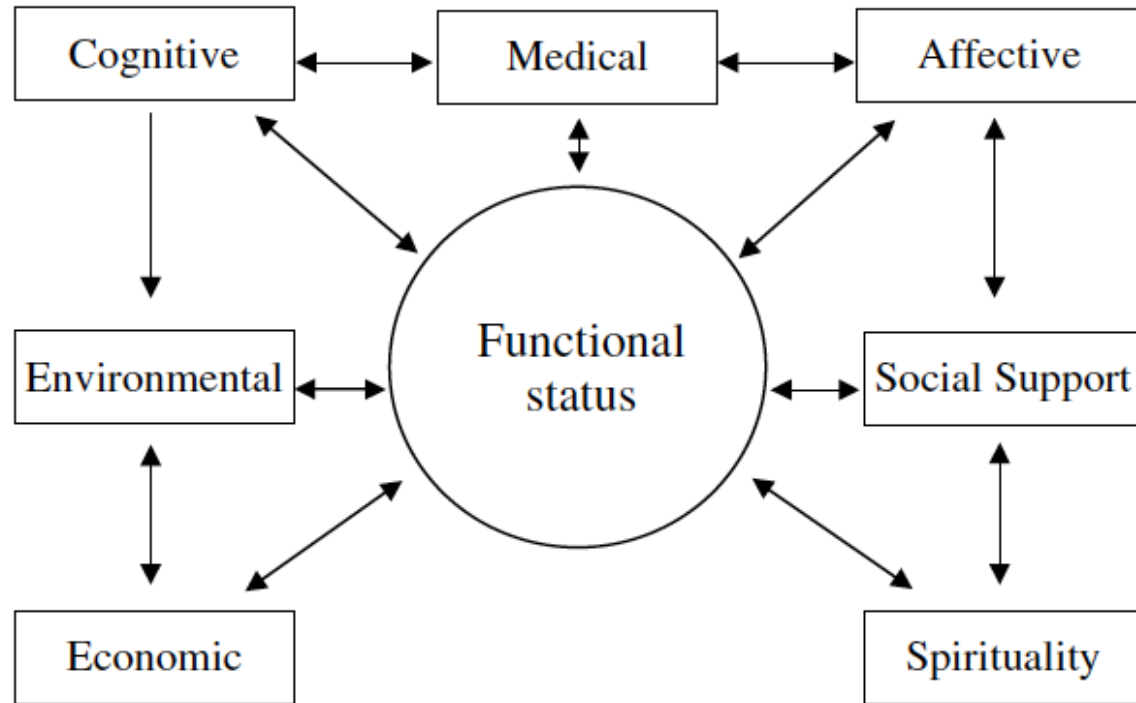


Fig 1. Interacting dimensions of geriatric assessment.

# Screening for Geriatrics Syndromes

- Hearing
- Vision
- Function
- Falls
- Incontinence
- Cognitive Impairment
- Depression
- Malnutrition

# Hearing

Associated with reduced cognitive and physical function, and reduced social involvement

## The Whisper Test

**1.** With the patient sitting on an exam table or chair, stand an arm's length away (approximately 2 ft.) behind the patient.

**2.** Tell the patient: "During the hearing test, I will ask you to cover the ear that is not being tested as I say the letters and numbers out loud. You will cover your ear by putting your finger over your tragus."

**3.** Have the patient cover the ear that's NOT being tested with one finger over the tragus. Have the patient slowly move the finger in a circular motion.



**4.** Take a deep breath and exhale fully before whispering the number-letter combination.

**5.** Give a number-letter-number combination (LISTED BELOW). **Ensure that the number-letter-number combination is different for each ear.**

**6.** Have the patient repeat what they hear.

**7.** If the patient successfully repeats, move on to testing the other ear.

**8.** If the patient is unsuccessful, reattempt testing with a different number-letter-number combination. **If a patient gets 3 total letters and/or numbers correct after a second attempt, it is considered a pass.**



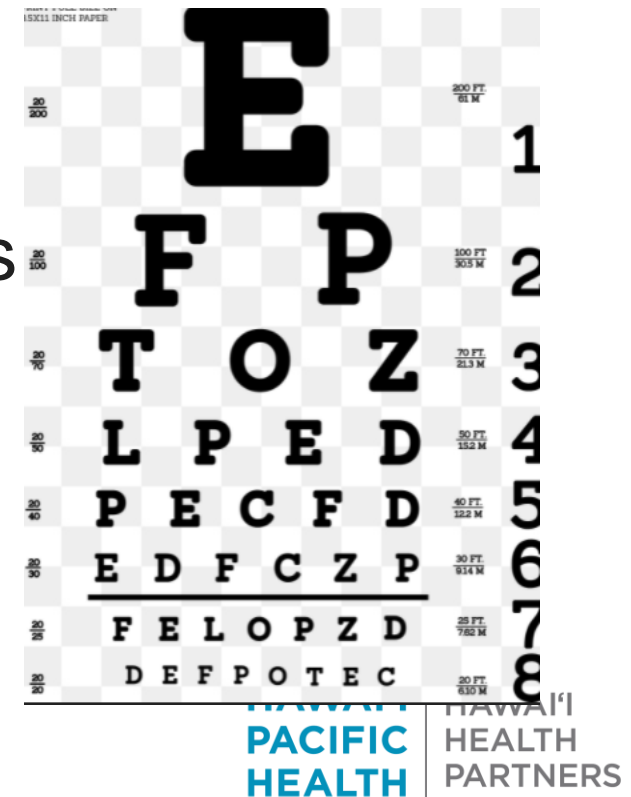
<b>8-M-3</b>	<b>2-J-7</b>
<b>K-5-R</b>	<b>S-4-G</b>

Time: 1 minute

Sensitivity 80%–100%, specificity 82%–89%

# Vision

- Common: cataracts, macular degeneration, diabetic retinopathy, and glaucoma
- Associated with increased risk of falling, functional decline, and depression
- Snellen Eye chart
- Ophthalmology check q1-2 years



# Function

- Activities of Daily Living and Instrumental Activities of Daily Living



# Falls

- 1/3 community dwelling adults fall each year
- Falls can lead to higher risk of falls again

## *The Timed Up & Go Test for Fall Risk Assessment*

**Primary Health Care Providers are asked to assess annually all patients who are 65 years or older for falls, gait, and balance disorders using the Timed Up & Go Test.**

### *The Timed Up & Go Test*

- ✓ Average of three trials.
- ✓ Patient wears regular foot wear and may use walking aid.
- ✓ Cue patient to begin - "Go."
- ✓ Begin timing when patient's bottom leaves the chair, and stop timing when bottom touches seat at the end.
- ✓ Patient rises from chair, walks three metres, turns and walks back, sits in chair at a *comfortable safe pace*.

**Those patients with scores greater than 10 seconds, or who demonstrate unsteadiness performing this test, require further assessment.**



Reference: American Geriatric Society 2001, 49(5):666

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# Urinary Incontinence

- Underreported due to belief part of normal aging or embarrassment
- 2-item questionnaire:
  - (1) “In the last year, have you ever lost urine and gotten wet?” If so,
  - (2) “Have you lost urine on 6 separate days?”
- A single question, “Have you had urinary incontinence that is bothersome enough that you would like to know how it could be treated?”
- Behavioral, surgical, pharmacologic treatments

# Cognitive Impairment

- Mini-Cog: sensitivity 76% and specificity 89%
- MMSE: sensitivity (71-92%) and specificity (56-96%)

<https://www.aafp.org/aafp/2021/0201/p183.html>

## THE MINI-COG

1. Instruct the patient to listen carefully and repeat the following

APPLE WATCH PENNY  
MANZANA RELOJ PESETA

2. Administer the Clock Drawing Test

3. Ask the patient to repeat the three words given previously

\_\_\_\_\_

### Scoring

Number of correct items recalled \_\_\_\_\_ [if 3 then negative screen. STOP]

If answer is 1-2

Is CDT Abnormal? No Yes

If No, then negative screen

If Yes, then screen positive for cognitive impairment

## The Mini-Mental State Exam

Patient \_\_\_\_\_ Examiner \_\_\_\_\_ Date \_\_\_\_\_

Maximum Score

5 ( )  
5 ( )

3 ( )

5 ( )

3 ( )

2 ( )

1 ( )

3 ( )

1 ( )

1 ( )

1 ( )

### Orientation

What is the (year) (season) (date) (day) (month)?

Where are we (state) (country) (town) (hospital) (floor)?

### Registration

Name 3 objects: 1 second to say each. Then ask the patient all 3 after you have said them. Give 1 point for each correct answer. Then repeat them until he/she learns all 3. Count trials and record. Trials \_\_\_\_\_

### Attention and Calculation

Serial 7's. 1 point for each correct answer. Stop after 5 answers. Alternatively spell "world" backward.

### Recall

Ask for the 3 objects repeated above. Give 1 point for each correct answer.

### Language

Name a pencil and watch.

Repeat the following "No ifs, ands, or buts"

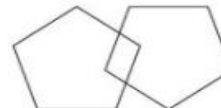
Follow a 3-stage command:

"Take a paper in your hand, fold it in half, and put it on the floor."

Read and obey the following: CLOSE YOUR EYES

Write a sentence.

Copy the design shown.



Total Score

ASSESS level of consciousness along a continuum \_\_\_\_\_  
Alert Drowsy Stupor Coma



# Cognitive Impairment

**SLUMS EXAMINATION**  
Questions about this assessment tool? E-mail: [slums@slu.edu](mailto:slums@slu.edu)

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Is the patient alert? \_\_\_\_\_ Level of education: \_\_\_\_\_

1. What day of the week is it? \_\_\_\_\_/1  
2. What is the year? \_\_\_\_\_/1  
3. What state are we in? \_\_\_\_\_/1  
4. Please remember these five objects. I will ask you what they are later.  
Apple Pen Tie House Car  
5. You have \$100 and you go to the store and buy a dozen apples for \$3 and a tricycle for \$20.  
6. How much did you spend? \_\_\_\_\_/3  
7. How much do you have left? \_\_\_\_\_/3  
8. Please name as many animals as you can in one minute.  
0-4 animals 5-9 animals 10-14 animals 15+ animals  
9. What were the five objects I asked you to remember? 1 point for each one correct.  
10. I am going to give you a series of numbers and I would like you to give them to me backwards. For example, if I say 42, you would say 24.  
87 648 8537  
11. This is a clock face. Please put in the hour markers and the time at ten minutes to eleven o'clock.  
Hour markers okay Time correct  
12. Please place an X in the triangle.  
13. Which of the above figures is largest?  
14. I am going to tell you a story. Please listen carefully because afterwards, I'm going to ask you some questions about it.  
Jill was a very successful stockbroker. She made a lot of money on the stock market. She then met Jack, a devastatingly handsome man. She married him and had three children. They lived in Chicago. She then stopped work and stayed at home to bring up her children. When they were teenagers, she went back to work. She and Jack lived happily ever after.  
15. What was the female's name? \_\_\_\_\_/2  
16. What work did she do? \_\_\_\_\_/2  
17. When did she go back to work? \_\_\_\_\_/2  
18. What state did she live in? \_\_\_\_\_/2

**TOTAL SCORE** \_\_\_\_\_

**SCORING**

SLUMS Score	Estimated MMSE Score	Estimated HDS-R Score
25-30	25-30	25-30
23-24	23-24	23-24
21-22	21-22	21-22

CLINICIAN'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_

5-H Tarry, N. Tuma, F. Chiswell, H. Perry III, and B. Mowley. The Saint Louis University Mental Status (SLUMS) Examination for detecting mild cognitive impairment and dementia is more sensitive than the Mini-Mental State Examination (MMSE). *Am J Geriatr Psychiatry* 14:900-10, 2006.

**MONTREAL COGNITIVE ASSESSMENT (MOCA)**

NAME: \_\_\_\_\_ Education: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Sex: \_\_\_\_\_ DATE: \_\_\_\_\_

**VISUOSPATIAL / EXECUTIVE**

Copy cube \_\_\_\_\_  
Draw CLOCK (Ten past eleven) (1 point) \_\_\_\_\_

**NAMING**

\_\_\_\_\_ /3

**MEMORY**

Read list of words, subject must repeat them. Do 3 trials. Do a recall after 5 minutes.

FACE	VELVET	CHURCH	DAISY	RED
1st trial				
2nd trial				

No points

**ATTENTION**

Read list of digits (5 digits/sec). Subject has to repeat them in the forward order [ ] 2 5 8 5 4  
Subject has to repeat them in the backward order [ ] 7 4 2

Read list of letters. The subject must tap with his hand at each letter. 5 points if 5 correct  
[ ] FBACMNAAIKLBFAKDEAAAJAMOFAB

Serial 7 subtraction starting at 100 [ ] 90 [ ] 80 [ ] 70 [ ] 60 [ ] 50  
4 or 3 correct subtractions: 3 pts, 2 or 1 correct: 2 pts, 1 correct: 1 pt, 0 correct: 0 pts

**LANGUAGE**

Repeat: I only knew that John is the one to help today. [ ]  
The cat always hid under the couch when dogs were in the room. [ ]

Fluency / Name maximum number of words in one minute that begin with the letter F [ ] (30 s words)

**ABSTRACTION**

Similarity between e.g. banana - orange - fruit [ ] train - bicycle [ ] watch - ruler [ ]

**DELAYED RECALL**

No recall words WITH NO CUE [ ] FACE [ ] VELVET [ ] CHURCH [ ] DAISY [ ] RED [ ]

Optional Category cue Multiple choice cue

**ORIENTATION**

[ ] Date [ ] Month [ ] Year [ ] Day [ ] Place [ ] City [ ]

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www.mocatest.org

Normal < 28 / 30  
Total \_\_\_\_\_/30  
Add 1 point if < 10 yr old

<https://www.aafp.org/afp/2021/0201/p183.html>

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# Cognitive Impairment

- If screens positive, would order CBC, CMP, TSH, vitamin B<sub>12</sub>, folate, and calcium levels, RPR +/- imaging

Test category	Test metric	No. of studies	Median prevalence of clinical Alzheimer-type dementia (range)	Median sensitivity (range)	Median specificity (range)
Individual stand-alone tests	Clock drawing totals	8 (n = 1,022)	0.50 (0.15 to 0.64)	0.79 (0.36 to 0.93)	0.88 (0.42 to 1.0)
	Mini-Mental State Examination total	7 (n = 1,724)	0.50 (0.15 to 0.71)	0.88 (0.56 to 1.0)	0.94 (0.59 to 1.0)
	Montreal Cognitive Assessment total	2 (n = 864)	0.71 (0.60 to 0.71)	0.94 (0.93 to 0.96)	0.94 (0.91 to 1.0)

# Depression

- > 5 suggest depression

## Geriatric Depression Scale

Are you basically satisfied with your life?	yes / NO
Have you dropped many of your activities and interests?	YES / no
Do you feel that your life is empty?	YES / no
Do you often get bored?	YES / no
Are you in good spirits most of the time?	yes / NO
Are you afraid that something bad is going to happen to you?	YES / no
Do you feel happy most of the time?	yes / NO
Do you often feel helpless?	YES / no
Do you prefer to stay at home, rather than going out and doing new things?	YES / no
Do you feel like you have more problems with memory than most?	YES / no
Do you think it is wonderful to be alive?	yes / NO
Do you feel pretty worthless the way you are now?	YES / no
Do you feel full of energy?	yes / NO
Do you feel that your situation is hopeless?	YES / no
Do you think that most people are better off than you are?	YES / no

**Score:** \_\_\_\_\_ /15

(≥ 5: suggestive of depression)

# Depression

- Major Depressive Disorder:
- Present with sad mood and/or decreased interest or pleasure in activities, and present at least 4 more of the following symptoms most of the day, nearly every day for a minimum of 2 weeks:
  - Significant changes in appetite or weight;
  - Sleep disturbances;
  - Restlessness or sluggishness;
  - Fatigue or loss of energy;
  - Lack of concentration or indecision;
  - Feelings of worthlessness or inappropriate guilt, and
  - Thoughts of death or suicide

# Malnutrition

- Obesity- associated with functional decline (DM, OA)
- Weight loss – associated with increased mortality
  - Underlying illness, depression, social/functional barriers, food prep, teeth/swallowing issues

# Polypharmacy

- Due to many medical problems, sometimes multiple providers
- Over the counter medications
- Multiple transitions of care
- Monitor drug-drug interactions

# Social Assessment, Economic Assessment

- Interdependency in social situations and functional status
  - Healthy – but no social support – how to plan for future
  - Dependent – who is currently helping them- what to do if more help needed- how is caregiver(s) doing?
- Economics
  - Often on fixed income
  - How are they paying for housing, food, medicines, caregivers, would they qualify for programs/ assistance/ Medicaid

# When to refer to Geriatrics Consultation?

- Areas of consultation –
  - Patients >70 yo with memory issues (that PCPs have already pre-screened) could be referred to Geriatrics first for evaluation/treatment
  - Decline in function/multiple comorbidities (Geriatrics syndromes)
- Helpful to know which area you would like assistance with



# Take Home Points

- Screen Geriatrics Syndromes
- Identification of Geriatrics Syndromes can help identify and prevent future decline and allow for future planning

# Q&A

Next Webinar:

# **HHP/HPH Community Webinar**

Next week:

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# Thank you!

- A recording of the meeting will be available afterwards
- Unanswered question?
  - Contact us at [info@hawaiihealthpartners.org](mailto:info@hawaiihealthpartners.org)

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