

Demographics

Name

Email

Gender

Male

Female

Other

Race/Ethnicity (check all that apply)

White

Black or African American

American Indian or Alaska Native

Asian

Native Hawaiian or Pacific Islander

Other

Hispanic or Latino

Specialty

Neurology

Neuropsychology

Geriatrics

Psychiatry

Internal Medicine/Family Practice

Nurse practitioner

Other

Current position

Medical student

Resident

Fellow

Nurse Practitioner

Primary Care Provider

What year of training are you in?

Probable Diagnosis

What is the patient's medical record # (MRN) ?

Through what site did you use the ACCT-AD Toolkit? Please provide clinic name and location.

UCSF Memory and Aging Center

UCSF Fresno Alzheimer's and Memory Center

Olive View Medical Center

Martin Luther King Jr. Outpatient Center

Central California Faculty Medical Group (CCFMG)

On Lok PACE

How did you implement the ACCT-AD Toolkit?

In person

Virtually

What was the role of the attending during the evaluation?

The attending was in the room or on videoconference while I was collecting the information

I collected the information alone and presented the information to the attending, who also saw the patient

The attending never saw the patient but provided a diagnosis based on the information I collected

Was an informant for the patient (friend, family member, care partner, caregiver) present during the evaluation?

Yes

No

Were there any features of medical or psychiatric disorders that could be contributing to the patient's symptoms?

None

Sleep apnea

Depression

Medications

Recreational drug use

Other

Based on the patient/informant responses to the ACCT-AD evaluation what is your probable diagnosis?

IMPORTANT note what your probable diagnosis was **PRIOR** to the Attending Physician's diagnostic assessment so we can assess **accuracy** of the toolkit.

Typical AD/typical amnesic AD

Atypical dementia (Early onset AD, Lewy-Body, Vascular, FTD, non-amnesic, etc.)

Cognitively Normal

Mild Cognitive Changes (i.e. not cognitively normal but not dementia. Can include Mild Cognitive Impairment)

Not cognitively normal, but best current explanation is that cognitive complaints are due to another medical condition (e.g. depression, anxiety, other psychiatric concerns, sleep apnea, or other medical conditions)

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If there were features of atypical dementia (e.g. early onset AD or non-AD dementias) what were they?

How confident were you in the probable diagnosis you made based on your use of the ACCT-AD Toolkit?

Extremely confident
Moderately confident
Not at all confident

Pre-visit patient questionnaire

Did your patient, their informant, or medical staff at your site complete the ACCT-AD pre-visit patient questionnaire?

Yes
No
I don't know

Did you review the ACCT-AD pre-visit patient questionnaire prior to your evaluation?

Yes
No

Who filled out the ACCT-AD pre-visit patient questionnaire?

Patient ONLY
Care Partner/Informant (family member, friend, caregiver, paid caregiver) ONLY
Medical staff
Patient and care partner/informant TOGETHER
Patient and care partner/informant SEPARATELY
I don't know

How useful was the ACCT-AD pre-visit patient questionnaire in helping you to identify a diagnosis?

Extremely useful
Very useful
Moderately useful
Slightly useful

Not at all useful

What sections of the ACCT-AD pre-visit patient questionnaire were the most useful in helping you to identify a diagnosis?

Memory, language, executive function and visual spatial

Behavior

Movement

Function

Did your patient or their informant comment at all about the ACCT-AD pre-visit questionnaire?

Yes

No

If your patient or their informant commented on the ACCT-AD pre-visit questionnaire, what did they say?

the questionnaire was too long

the questionnaire was too difficult to complete

the patient did not think that the questionnaire would be useful

Other

Do you have any other comments about the ACCT-AD pre-visit patient questionnaire?

AIDPCP Toolkit Usage and Usefulness

How useful was the ACCT-AD Toolkit for identifying a probable diagnosis?

Extremely useful

Somewhat useful

Neither useful nor useless

Somewhat useless

Extremely useless

How would you describe your use of the ACCT-AD **evaluation questionnaire** for this patient?

I followed the ACCT-AD evaluation questionnaire completely from start to finish

I only used sections of the ACCT-AD evaluation questionnaire

I used the entire ACCT-AD evaluation questionnaire but not in the order it was presented

I didn't use the ACCT-AD evaluation questionnaire at all

Which sections of the ACCT-AD **evaluation questionnaire** did you use?

History of present illness

Memory, language, and visual-spatial

Mood, behavior, and other psychiatric

Motor

Family History

Function (IADLs and BADLs)

Physical and neurological exam

If you only used certain sections of the ACCT-AD **evaluation questionnaire** or you did not use it at all, please check all that apply

I prefer my own approach

It was too difficult to use the ACCT-AD evaluation questionnaire because reasons related to the patient and/or family

I did not understand how to use the ACCT-AD evaluation questionnaire

It was taking too long

Other

What sections of the ACCT-AD **evaluation questionnaire** were **most useful** in helping

you identify a probable diagnosis? (check all that apply)

History of present illness

Memory, language, and visual-spatial

Mood, behavior, and other psychiatric

Motor

Family History

Function (IADLs and BADLs)

Physical and neurological exam

What sections of the ACCT-AD **evaluation questionnaire** were **least useful** in helping you identify a probable diagnosis? (check all that apply)

History of present illness

Memory, language, and visual-spatial

Mood, behavior, and other psychiatric

Motor

Family history

Function (IADLs and BADLs)

Physical and neurological exam

How did you use the ACCT-AD **Interpretation Manual**? (check all that apply)

I used the interpretation manual during the visit

I reviewed the interpretation manual outside of the visit prior to making a diagnosis

I reviewed the interpretation manual when I first learned about the ACCT-AD Toolkit

I did not use the interpretation manual at all

If you did not ever review the ACCT-AD **interpretation manual**, why not?

No time

Didn't need to in order to make a probable diagnosis

Other

I already knew how to interpret the answers to these questions without using the ACCT-AD interpretation manual

I did not know or forgot that the ACCT-AD Interpretation Manual existed

Did the ACCT-AD **interpretation manual** help you interpret the patient's responses to the questions asked?

Yes

No

For which areas did you look at the ACCT-AD **interpretation manual** to help you interpret the patient's responses to the questions asked? (check all that apply)

History of present illness

Memory, language, and visual-spatial

Mood, behavior, and other psychiatric

Motor

Family History

Function (IADLs and BADLs)

Physical and neurological exam

What challenges did you encounter when using the ACCT-AD Toolkit (pre-visit patient questionnaire, evaluation questionnaire and/or interpretation manual) to identify a probable diagnosis?

Do you feel you were adequately trained on the use of the ACCT-AD Toolkit (pre-visit patient questionnaire, evaluation questionnaire and/or interpretation manual)

Yes

No

Please provide any additional comments or feedback on improvements we can make to the ACCT-AD Toolkit.

Attending Diagnosis

What was the Attending Physician's diagnosis?

Typical AD/typical amnestic AD

Atypical dementia (Early onset AD, Lewy-Body, Vascular, FTD, non-amnestic, etc.)

Cognitively Normal

Mild Cognitive Changes (i.e. not cognitively normal but not dementia. Can include Mild Cognitive Impairment)

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Did you review your case with one of the toolkits dementia experts or a dementia toolkit champion?

Yes. If so, please provide the MD name below

No

What was the expert's diagnosis? (including CADC experts: Dr. Rosen, Dr. Alving or Dr. Segal-Gidan, dementia toolkit champion or a diagnosis confirmed at a Friday case consult meeting?) Indicate all that apply.

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medical conditions)

Diagnosis not confirmed with expert

Please provide any additional comments that were made by the Attending Physician related to diagnosis.

Please provide any additional comments that were made by the toolkits dementia expert or dementia toolkit champion related to diagnosis.

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