

Product ID on website/ Source	Abstract	Resource Type	Intended Audience	Time	Peer Review	Educational Objectives	CEUs	CEU Type	References	Sponsors
20617/ University of Arizona College Of Medicine	Elder Care: A Resource for Interprofessional Providers: Frontotemporal Dementia: Frontotemporal Dementia is one of the continuing series of practical, evidence based, Provider Fact Sheets which summarize key geriatric topics and provide clinically useful assessments and interventions. Initially developed for remote, rural clinical sites, they are useful for students and health care professionals from many fields and across a very broad range of health care settings. The University of Arizona College of Medicine offers a wide variety of topics in this series titled Elder Care: A Resource for Interprofessional Providers - which can be found on POGOe.	Quick reference guide / pocket card, Independent / Self-Directed Learning	Fellow, Med Student, RN, CME, Residents, SW, Therapist	30 min.	No	1. List differences between the presentation of frontotemporal dementia and presentation of Alzheimer's disease. 2. Identify the most common behavioral changes seen in patients with frontotemporal dementia. 3. State the common abnormal findings on brain imaging in patients with frontotemporal dementia.	No	N/A	Yes	Donald W. Reynolds Foundation / Geriatric Education Center (GEC)

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21209/ University of IOWA GEC	Improving Antipsychotic Appropriateness in Dementia Patients: This website includes information and resources to help clinicians, providers, and consumers better understand how to manage problem behaviors and psychosis in people with dementia using evidence based approaches. This includes brief lectures, written content, quick reference guides for clinicians and providers, and information for families or patients on the risks and benefits of antipsychotics for people with dementia (a.k.a. Alzheimer's disease and others). You can also request laminated quick reference guides to use in your practice, which can help you put the strategies you learn about into action	Case-Study/Case Series, evaluation tool, independent self directed, lecture presentation, QRG/ Pocket card, video	Advanced Practice Nursing Student; ARPN, Caregiver, Nurse Educator, Pharmacists & Ph. Students, Fellow, Med. Student Clinical, RN, Patient, PA, CME, Resident, SW	2 hrs.	No	1. List appropriate initial assessments to help determine the causes of psychosis in dementia. 2. Apply non-drug strategies to manage problem behaviors or psychosis in dementia. 3. Assess delirium signs and symptoms using a delirium screening tool. 4. Determine when an antipsychotic might be appropriate or inappropriate in a person with dementia depending on symptoms and the type of dementia. 5. Select an optimal antipsychotic for a patient with dementia based on efficacy, side effects and patient's comorbidities. 6. Recognize antipsychotic side effects in a person with dementia. 7. Discuss the risks and benefits of antipsychotics with patients and families using a shared decision making information sheet as a guide.	Yes	Not listed	Yes	Health Resources and Services Administration (HRSA) & Agency for Healthcare Research and Quality
21188/ American Geriatrics Society	The Cognitive and Behavioral Disorders (CBD) Assessment Tool Kit: This was developed by the Education Committee and the Teachers Section of the American Geriatrics Society to provide the tools necessary to learn and be able to demonstrate the ability to screen and evaluate older patients with dementia, delirium and depression; demonstrate competency in formulating a treatment plan for a patient with abnormal cognitive function, with special attention to patient safety.	Documents and videos	Med. Student, Resident	Not stated	No	1. Demonstrate competency in administration of validated screening or assessment tools 2. Formulate a differential diagnosis and recommend an evaluation and treatment plan for an older adult with a cognitive/behavioral problem; 3. Utilize an educational tool kit to promote or implement a competency assessment project in home institution.	No	Not listed	Yes	American Geriatrics Society

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21018/ University of Alabama SOM	The UAB train the trainer Experience: Teaching Geriatrics to Change Behavior: This product guides the user through a four-hour workshop aimed at teaching clinician educators how to teach four geriatrics topics: delirium, medication management, health literacy, and dementia. A variety of innovative teaching techniques are integrated into each topic area. There is an introductory session on adult learning theory, and all teaching techniques introduced in the workshop are based in these theories. All materials needed to teach the four topics are included in the guide.	Curriculum/ Syllabus, educational game, evaluation tool, facilitators guide, lecture/ presentation, QRG/ Pocket card	APRN, Nurse Educator, Fellow, PA, CME, Resident	+3 hrs.	No	1. Name three key principles of adult learning theory. 2. Describe three instructional techniques that illustrate principles of adult learning theory. 3. Teach three key points about each of the following topics: delirium, dementia, medication management and health literacy.	No	No	Yes	Donald Reynolds Foundation
20770/ University of Cal. Irvine. SOM	Dementia and its Challenges - A Problem-Based Learning Case: This is a problem-based learning (PBL) case for medical students featuring a 73-year-old female patient with cognitive impairment. The focus of the PBL case is the assessment and diagnosis of dementia, issues of elder abuse, challenges of caring for patients with dementia, and the prevalence of caregiver stress.	Case-Study/Case Series; PBL materials	Med. Students	1.5 hours	No	There are 11 educational objectives focused on knowledge, skills and attitudes on the topics of dementia and elder abuse.	No	No	Yes	Donald W. Reynolds Foundation

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20968 Baystate Medical Center	Management of Delirium in the Elderly Patient: An agitated elder is the bane of every new resident's night float experience. They dread the call in the middle of the night from the nurse telling us about the elderly patient who is either trying to kick his way out of bed, pull out his IV or tug at his foley catheter. The sophisticated geriatrician is often called the next day to mop up after errors done the night before by the junior clinicians. We know that avoiding medications is preferable in the agitated elder, but in situations where it is necessary, prompting physicians to use the right medication at the right dose can prevent inappropriate medication administration and minimize harm. Thus, we developed this pocket size card to help junior physicians as well as geriatricians in the management of the agitated elder	Quick Reference/ Pocket Card	Residents Fellows, PA	Not stated	No	The educational objective is to aid the sophisticated geriatrician, residents in internal medicine, family medicine and medicine pediatrics in the step-wise management of delirium in the geriatric population.	No	No	Yes	Not specified
20856/ University of Medicine and Dentistry of New Jersey, School of Osteopathic Medicine	Case-Based Approach to Common Mental Health Disorders in the Elderly: Assessing the Geriatric Psychiatric Patient in the Subacute Setting: This case-based lecture-capture recording outlines for general psychiatry residents the key points of assessing and treating delirium in elderly patients in the sub acute setting. It is one of three lectures in the series. It is presented by Stephen M. Scheinthal, DO, FACN, Chief of Geriatric Behavioral Health, Associate Director of NJISA, UMDNJ-SOM.	Case-Study/Case Series, independent learning/ self-directed learning, lecture/ presentation, video	Residents	30 min.	No	1. To describe the risk factors for acute confusion in older patients. 2. To distinguish between appropriate and inappropriate use of psychoactive medications in a patient with acute confusion. 3. To utilize effective management strategies in the treatment of hypoactive delirium. 4. To recognize the value of the interdisciplinary team in caring for patients in the subacute setting,	No	No	Yes	Donald Reynolds Foundation

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20759/ University of Kansas SOM	Dementia: This module was designed to teach medical students about dementia. It is used in combination with a discussion group about the case studies, in order to apply the learned material as well as discuss any questions that may have arisen. Topics include identification and workup of various types of dementia, including Alzheimer's, vascular, frontotemporal, and pseudo dementia secondary to a variety of underlying conditions. In addition, the module includes information about disease progression and prognosis. Various pharmacologic and environmental treatment options are also discussed.	Case-Study/Case Series, Curriculum/Syllabus, independent learning/ self-directed learning, lecture/ presentation	Medical Students	1 hour	No	There are 12 education objectives involving the attitudes, knowledge, and skills of medical students on various topics involving dementia.	No	No	Yes	AAMC/John A. Hartford Foundation & Donald W. Reynolds Foundation
20730/ University of Nebraska College of Medicine	Dementia and Behavior in LTC: This website is designed to instruct learners about mental illness in the nursing home setting and provides recommendations for non-pharmacological treatments for dementia behaviors. It contains streaming video of lectures, PowerPoint presentations, case examples, references and practical tip sheets for each topic. It can be used as self learning module for physicians in practice, fellows and residents.	Case-Study/ Case Series, Facilitator's Guide, Independent/ Self-Directed Learning, Lecture/ Presentation, Videos	Physicians, Fellows, Residents	> 3hrs	No	The learner will be able to describe general principles in treating and preventing behavioral problems in patients with dementia.	No	No	Yes	Health Resources and Services Administration (HRSA) & Geriatric Education Center (GEC)

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20748/ University of Medicine and Dentistry of New Jersey, Osteopathic Medicine	GeriPod: Management of Behavior Problems Associated with Progressive Dementia: The purpose of this podcast is to explore the development and progression of common behavioral problems associated with dementia. treatment strategies for managing these behaviors as well as looking at the evidence for and risks associated with a variety of pharmacologic treatment options are discussed. Non-pharmacologic treatment options are discussed as alternative options for effective management of some of these common problems.	Independent/ Self-Directed Learning, Podcast	Fellow, Residents, CME, Med. Students	30 min.	Yes; by Education Workgroup consisting of 5 geriatricians and 2 geriatric psychiatrists	1. Explore common behavioral problems associated with dementia. 2. The types of behaviors and what triggers these problems as the disease progresses. 3.Environmental and other non-pharmacological treatment strategies for managing behavior problems in the demented patient. 4. The evidence for and risks of pharmacological treatments for behavior problems in older adults. 5. How behavior problems impact caregivers and the benefits of addressing their needs.	No	No	Yes	Health Resources and Services Administration (HRSA)

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20608/ University of Hawaii, John A Burns School of Medicine	The Three D's Worksheet: This is an interactive workshop style session. Based on a case discussion, students conceptualize the common clinical presentations onto a Venn diagram. The facilitator will take on the role of a family member and nurse, and students have the opportunity to practice obtaining a history that elicits distinguishing features, associated symptoms and time course for each of these cognitive disorders. Emphasizes the importance of getting the history from the family and interdisciplinary team. A table of Distinguishing Features is completed by the end of the session. An assessment and plan that includes non-pharmacologic and pharmacologic interventions is elicited from the students. The session ends by asking students how they will communicate the plan of care to the family, thus emphasizing the importance of clear communication as a part of the intervention.	Case-Study/ Case Series, Facilitator's Guide, PowerPoint Presentation	Residents, Fellows, Med. Students	30 min.	No	1. To review the definitions of Dementia, Depression, and Delirium. 2. To identify in what ways these cognitive disorders are similar (common clinical presentations). 3. To list which features help define or distinguish Dementia, Depression, or Delirium. 4. To practice the approach to history taking that elicits these distinguishing features. 5. To understand that communication with families is an important part of the intervention.	No	No	Yes	John A Hartford Foundation

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20590/ University of Florida College of Medicine	Web-based Interactive Self-Assessment Learning Module 2: Dementia and Psychosocial Issues in Older Adults: This product includes several quick reference sheets along with a web-based interactive learning module on Dementia and Psychosocial issues in Older Adults, which provides students in a geriatric clerkship rotation with a self-assessment of knowledge required in diagnosing and managing older adults with an increased risk for dementia. This learning module covers broad issues on management of the aging syndrome to increase students' knowledge, skills, and confidence in managing medically complex older patients.	Quick Reference Guide, learner assessment, web-based interactive learning module	Med. Students	Not stated	Yes-by Model Geriatric Programs: Geriatric Education Materials and Methods Swap at the AGS Annual Scientific Mtg., May 5, 2007	Students will gain knowledge required in diagnosing and managing older patients with an increased risk for dementia.	No	No	Yes	Geriatrics Academic Career Award (GACA)
20422/ University of Iowa Roy J. and Lucille A. Carver College of Medicine	Dementia Subtypes: Managing Psychiatric Complications of Dementia: This product is part of the GeriaFlix series at the University of Iowa. GeriaFlix are multidisciplinary presentations on topics in clinical geriatrics. Presented in a streaming digital video format with synchronized slides, each presentation lasts approximately 1 hour. In this presentation, Dr. Schultz will discuss different types of dementia and the clinical characteristics associated with them. She will also present the emotional and psychiatric features of dementia and offer strategies that may be used to help manage behavioral problems.	Independent/ Self-Directed Learning, Video with slides	Fellow, Med Student, RN, CME, Residents	1 hr.	No	1. Recognize the more common types of dementia. 2. Identify the clinical characteristics associated with different dementias (e.g., Frontotemporal and Lewy body dementia). 3. Be aware of the emotional and psychiatric features of dementia. 4. Recognize strategies that may be used to help manage behavioral problems in dementia.	No	No	Yes	Donald W. Reynolds Foundation & National Institute on Aging



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20424/ University of Iowa Roy J. and Lucille A. Carver College of Medicine	Distinguishing Delirium, Dementia, and Depression: This product is part of the GeriaFlix series at the University of Iowa. GeriaFlix are multidisciplinary presentations on topics in clinical geriatrics. Presented in a streaming digital video format with synchronized slides, each presentation lasts approximately 1 hour. In this presentation, Dr. Jogerst will present information about diagnosing delirium, dementia, and depression (the 3 Ds) in older adults. He will identify screening tools and discuss treatment strategies. In addition, Dr. Jogerst will discuss the co-occurrence of the 3 Ds.	Independent/ Self-Directed Learning, video with slides	Fellow, Med. Student, RN, CME, Residents	1 hour	No	1. Improve the participant's ability to diagnose delirium, dementia, and depression in the elderly. 2. Identify screening tools for the 3 Ds of geriatrics. 3. Briefly discuss treatment strategies. 4. Increase the participant's appreciation for the co-occurrence of the 3 Ds.	No	No	Yes	Donald W. Reynolds Foundation & National Institute on Aging
20198/ Icahn School of Medicine at Mount Sinai	Behavioral and Psychological Symptoms associated with Dementia (BPSD): Case-based presentation regarding the definition, diagnosis, and management of Behavioral and Psychological Symptoms associated with Dementia (BPSD) based on most recent guidelines, meta-analysis and RCTs.	Lecture, presentation, PowerPoint	Fellow, medical student, CME, resident, Nursing Student	Not stated	No	By the end of the presentation, participants will be able to: 1) Define BPSD; 2) Evaluate BPSD; 3) Discuss the Guidelines for Management of BPSD: a) Non-pharmacologic Interventions; b) Pharmacologic Interventions	No	No	Yes	Not specified

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18534/ Veterans Affairs South Central MIRECC	Managing Disruptive Behavior in Dementia Patients: A training Tool of CNAs: This CD-ROM provides basic instruction in recognition and reduction of stress in both care providers and older cognitively impaired residents of LTC facilities. Videotape examples (using actors) show interactions between LTC residents and Certified Nursing Assistants. Disruptive, de-escalating, and preventive approaches are portrayed for each of three scenarios. Material may be appropriate for self-reflection or group discussion. Product may be requested through the VA South Central MIRECC Education Office: michael-kauth@va.gov or thomas.teasdale@va.gov.	Software, video	CNAs, Nurses, Med. Students, SW, Therapists, Faculty trainers	Not stated	No	Learners should be able to: 1) Identify behavior that escalates stress in LTC residents and their providers; 2) Recognize preventive approaches to the behavioral care of older cognitively impaired persons.	No	No	Yes	Not specified
19009/ Yale University School of Medicine	Non-Pharmacological treatment of Demented Patients with Problematic Behaviors: Workshop on use of non-pharmacological intervention to care for patients with behavior problems due to dementia.	Case-Study /Case Series	Fellows, Residents, Nurses	Not stated self paced	No	Learners will be able to identify non-pharma-cological techniques to manage difficult behaviors in patients with dementia.	No	No	Yes	Not specified