Rapid onset

Gradual onset

Acute

Lasts days to weeks
Lasts months to years
Symptoms relatively stable day-to-day

Symptoms fluctuate during the course of a day
Altered level of consciousness
Sleep-wake cycle fluctuates hour-to-hour

Sleep wake cycle with day/night reversal

Insomnia

Hypersomnia
Visual hallucinations common

Can make decisions

Visual hallucinations rare

Unable to maintain attention
Attention normal

Awareness reduced

Difficulty concentrating

Disorganized thinking
Impoverished cognition

Incoherent speech

Cannot find words

Primary defect in short-term memory
Recent and remote memory impaired

Anhedonia

Irritability

Loss of interest in activities
Blunted affect

Withdrawal or intoxication

Psychomotor slowing

Parkinson’s disease
Focal neurologic deficits possible

Feelings of guilt

Vital signs altered

Vital signs normal
Complains of cognitive loss

“Don’t know” answers common

Poor effort answering questions

Tries hard but gives incorrect answers
History of psychiatric illness

Family history

Brought in by caregivers soon after onset of symptoms

Brought in by caregivers with symptoms present for a while
Presents to provider complaining of memory loss

Can attend to a MMSE or clock draw, but cannot perform well

Cannot attend to a MMSE or clock draw

CAM
MMSE

Mini-COG

GDS

Difficulty with language
Difficulty with manual tasks

Difficulty in naming things

Caused by underlying medical condition

Variable performance on tasks of similar difficulty
Difficulty with organizing, priority-setting, time management  
Suicide attempts  
Wandering  
Hoardings
Paranoid thoughts

Chronic alcoholism

Alcohol withdrawal

Alcohol intoxication
Difficult to date onset

Result of polypharmacy

Incoherent speech

Prevalence increases with age
Prolonged hospital stays

Increased institutionalization

Can lead to irreversible cognitive impairment

Neuropsychological testing
Cognitive therapy by psychologist

Geriatrician to help find underlying etiology

Home safety evaluation

Caused by ranitidine
Caused by famotidine

Caused by lorazepam

Caused by diazepam

Caused by meperidine
Caused by morphine

Treated with paroxetine

Caused by diphenhydramine

Treated with citalopram
Treated with venlafaxine

Treated with donepezil

Treated with nortriptyline

Treated with rivastigmine
Acute confusion

Decreased appetite

Diagnosis commonly delayed

Acute confusion

Treated with memantine
Dementia
Delirium
Depression