# Cognitive/Memory Difficulties

**Developed by**
American Academy of Neurology

**How developed**
In 2014, a survey identified the most common reasons for referral. In 2018, the content was reviewed and updated by experts. The templates were developed after review of the literature. In addition to a dedicated work group, multiple committees were asked to review and comment.

**Additional essential patient information**
A brief summary of the case details pertinent to the referral, including relevant family history. Please indicate in the summary if the patient has any of the following:
- Rapidly, i.e. less than 6 months, progressive cognitive difficulties
- Focal findings on examination
- Associated abnormal movements
- Use of muscle relaxants, opiate pain relievers, benzodiazepines, prescription sleep aids, anti-depressants, anxiolytics, neuroleptics, antiepileptic, psychotropic, sedatives, hypnotics, narcotics and anti-cholinergic medications

Please provide:
- TSH
- Vitamin B12
- Folic acid
- CBC with differential
- CMP

**Additional patient information, if available**
- Head CT or MRI
- Screening Cognitive Test Results, including:
  - Mini-cog
  - MOCA
  - SLUMS
- Functional decline
- Quantitative depression screening

**Alarm symptoms/conditions**
Rapidly evolving cognitive disorder

**Tests/procedures to avoid prior to neurologic evaluation; if they have been performed, please forward results**
Imaging, EEG, neuropsych testing

**Common rule-outs to consider prior to consults**
Depression

**Relevant “Choosing Wisely” elements**
None provided

**Healthcare professional and/or patient resources**
Healthcare Professional Information:
Peterson RC et al. Neurology. 2018;90:1-10
Patient Information: