



Djavad Mowafaghian
CENTRE FOR BRAIN HEALTH



Clinic for Alzheimer Disease
and Related Disorders
UBC Hospital



Vancouver
Coastal Health
Promoting wellness. Ensuring care.

UBC Hospital Clinic for Alzheimer Disease and Related Disorders
Second Floor, Djavad Mowafaghian Centre for Brain Health
2211 Wesbrook Mall, Vancouver, BC, V6T 1Z3
p. 604-822-7031 f. 604-822-7191
<http://www.centreforbrainhealth.ca/clinics/clinic-information/CARD>

New Patient Information

Welcome to the UBC Hospital Clinic for Alzheimer Disease and Related Disorders (UBCH-CARD). The Clinic was established through an operating grant from the BC Ministry of Health of British Columbia in 1983. It is the only clinic of its kind in BC and serves individuals and families across the province. UBCH-CARD offers the following:

- The establishment of a working diagnosis.
- Information about the natural history and known causes of the diagnosed disorder.
- Information about available treatments for specific symptoms.
- Counselling and strategies for coping with the day-to-day difficulties of memory disorders.
- Information regarding the genetic implications of the diagnosed disorder.
- Opportunities for involvement with research including clinical trials.
- Referral to community groups such as the Alzheimer Society and Continuing Care.

Preparing for Your Appointment

The Clinic is located at UBC Hospital on the **Second Floor of the Djavad Mowafaghian Centre for Brain Health (DMCBH)**. We are open from 8am – 4pm Monday to Friday. Please check in at our reception desk a few minutes prior to your appointment.

If possible, please arrange for a support person (i.e. a close family member or friend) to attend your appointment with you. Please note that part of your appointment may involve team members meeting separately with your support person.

Please ***bring all of your medications*** (including vitamins, naturopathic and prescription medications) for the doctor to review. You are also invited to ***fill in the enclosed Family History Information form*** for review by the doctor and/or genetic counsellor (see below).



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Clinic appointments can be lengthy and delays may occur. Please prepare accordingly by bringing reading material and/or snacks. A coffee shop is located on the ground floor of the DMCBH, offering a selection of snacks, meals, and beverages for purchase.

Questions? Cancellations?

If you have any questions or concerns regarding your upcoming appointment(s), please do not hesitate to contact us at 604-822-7031.

If you need to cancel or reschedule these appointments, we would greatly appreciate at least 72 hours notice.

We look forward to meeting you.

Appointments and Team Members

Over the course of one or more visits, patients undergo a thorough assessment of their health and abilities. A multidisciplinary approach is applied to this assessment and is based on each patient's individual needs. The assessment will involve meeting with some or all of the following team members:

Geriatrician or Neurologist

All patients will be seen by either a geriatrician (a doctor who specializes in conditions affecting older populations) or a neurologist (a doctor who specializes in conditions affecting the brain). The doctor will complete a detailed history and physical examination. He or she may order additional investigations such as computed tomography (CT) head scan, magnetic resonance imaging (MRI), and/or laboratory (blood) tests.

UBC Hospital is a teaching hospital and we are proud to contribute to the professional development of medical residents, fellows, and other health professionals. A resident or fellow may complete part or all of our patients' assessment(s), always under the guidance of one of our Clinic doctors.

The Clinic doctor will send a copy of his/her consult summary to the patient's referring doctor and/or family doctor. Follow-up appointments will be determined after your initial assessment.

Memory Tester

Each Clinic visit usually involves a cognitive screen carried out by a volunteer "memory tester" (often a UBC student). The memory tester will meet with the patient for 15-30 minutes and ask a series of questions designed to assess memory and other aspects of thinking and concentration.



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Appointments and Team Members (Cont'd)

Genetic Counsellor

Many patients will meet with a genetic counsellor during their first or second Clinic visit. The genetic counsellor will take a detailed family history in order to identify memory or other health concerns that might be running in the family. The genetic counsellor can provide information about the genetics of memory disorders, recurrence risks for relatives, and genetic testing.

Genetic counselling is available to all Clinic patients (and their family members) upon request.

Social Worker

As required, the social worker will complete a comprehensive assessment about your daily needs. Based on this assessment, the social worker will help you navigate the health care system by providing connections to community resources and supports specific to your situation. The Clinic social worker is also available to help you develop additional strategies for managing a dementia diagnosis.

Social work appointments are scheduled for our patients (and their family members) by team member referral or patient/family request.

Neuropsychologist and Psychometrist

Some patients will be referred for a neuropsychological assessment by their Clinic doctor. This assessment will be scheduled several months after the initial Clinic visit and involves paper and pencil testing to evaluate different areas of cognition (i.e. memory, language, attention, visuospatial skills, etc.) as well as mood. This detailed testing may take 4-6 hours and is carried out by a psychometrist. Interviews with the patient and family are also included.

The neuropsychologist will interpret the results of this testing and provide feedback to the patient and/or their family within a few weeks. Strategies will be discussed for managing cognitive issues.

Psychiatrist

Some patients will be referred for a psychiatry assessment by their Clinic doctor. The psychiatrist (a doctor who specializes in mood disorders) will provide an assessment of the patient's mood and behaviours. The patient and a family member or close friend will be interviewed. Recommendations regarding treatments/therapies will be relayed to the patient's geriatrician or neurologist and follow-up psychiatry appointments may be suggested.



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Research at UBCH-CARD

If interested, Clinic patients and their family members may choose to participate in research studies. Research at the Clinic is dedicated to:

- Further understanding the course and characteristics of memory disorders/dementias
- Advancing early detection of symptoms and disease
- Decreasing symptoms and improving quality of life for dementia patients
- Clinical drug trials that may slow down the progression of memory loss or other cognitive and behavioural symptoms
- Investigating the genetic and/or environmental causes of memory disorders
- Improving patient care and support for caregivers

Parking at the DMCBH (see attached map)

Information regarding parking is available at www.parking.ubc.ca or 604-822-6786.

Although parking is available in a surface lot directly beside the DMCBH, this parking lot has a two-hour time limit and adding additional hours during your appointments can be disruptive and costly. ***We therefore strongly encourage our patients to use one of the following two nearby parkades instead:***

Health Sciences Parkade (on Health Sciences Mall, directly behind UBC Hospital)

\$1.75 per half hour up to a maximum rate of \$16.00 before 5pm.

Thunderbird Parkade (Thunderbird Road at Wesbrook Mall)

\$1.75 per half hour up to a maximum rate of \$16.00 before 5pm.

Accommodations

Information regarding on-campus accommodations can be obtained from:

UBC Conferences and Accommodations:

604-822-1000

<http://ubcconferences.com/>

TRIUMF House:

604-222-7633

<http://www.triumfhouse.ca/>

Carey House:

604- 224-4308

<http://www.carey-edu.ca/accommodations/>



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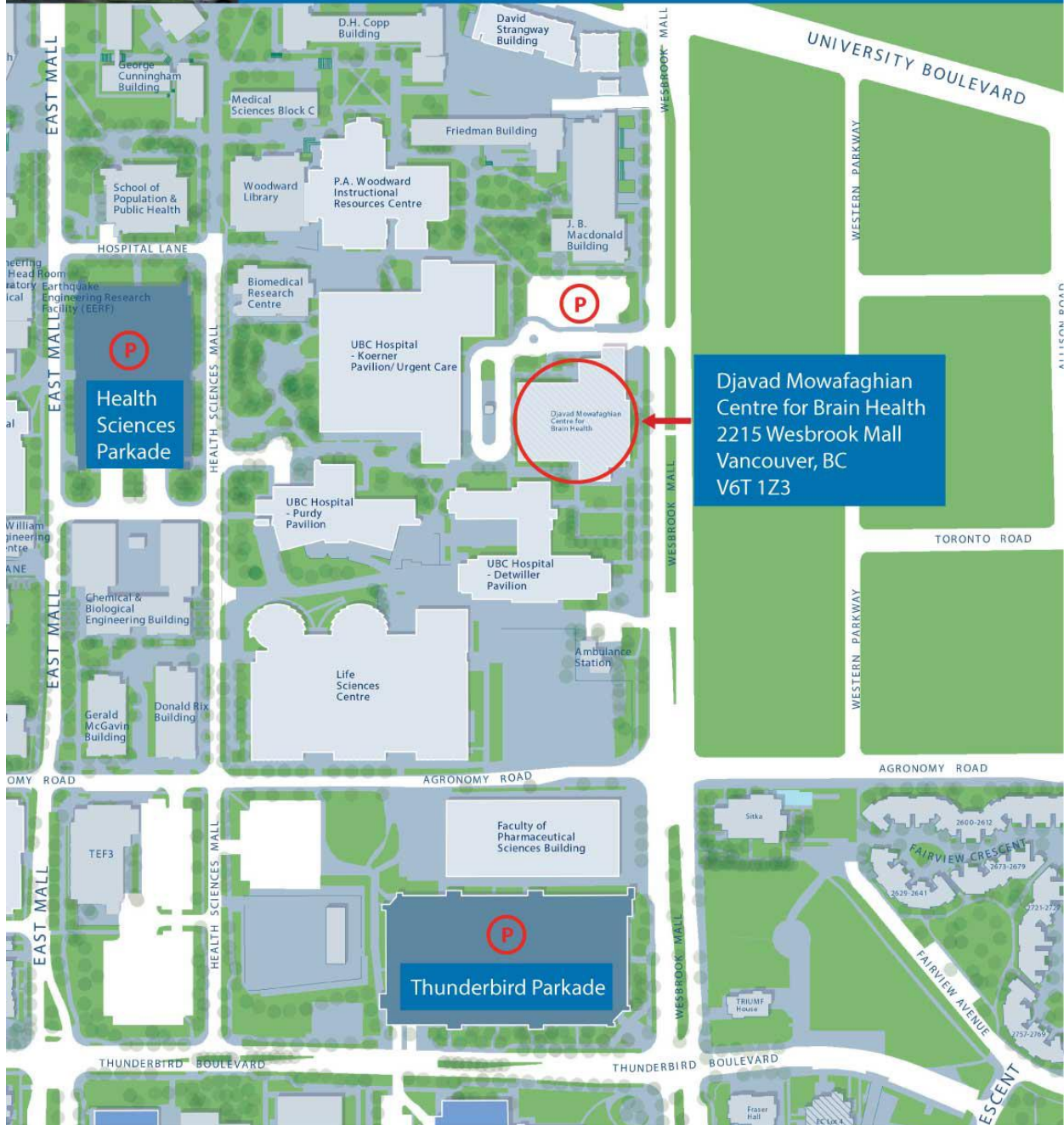
The Djavad Mowafaghian Centre for Brain Health

Vancouver Coastal Health

Brain Research Centre



a place of mind
THE UNIVERSITY OF BRITISH COLUMBIA



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Vancouver, BC
V6T 1Z3

UBC Clinic for Alzheimer Disease and Related Disorders

Family History Information

(Please complete to the best of your knowledge and bring to first Clinic visit.)

Patient's name: _____

I. Patient's Mother

Patient's Father

Name: _____

Date of Birth: _____

Date of Death: _____

Cause of Death: _____

Ethnic Origin: _____

**II. Patient's Maternal Grandmother
(i.e. mother's mother)**

**Maternal Grandfather
(i.e. mother's father)**

Name: _____

Date of Birth: _____

Date of Death: _____

Cause of Death _____

**III. Patient's Paternal Grandmother
(i.e. father's mother)**

**Paternal Grandfather
(i.e. father's father)**

Name: _____

Date of Birth: _____

Date of Death: _____

Cause of Death: _____

IV. Patient's Brothers and Sisters (include full/half, living/deceased):

1. Name: _____

Date of Birth: _____

If deceased, cause of death: _____

Date of Death: _____

How many children does he/she have? _____ Age range of these children? _____

2. Name: _____

Date of Birth: _____

If deceased, cause of death: _____

Date of Death: _____

How many children does he/she have? _____ Age range of these children? _____

IV. Patient's Brothers and Sisters (full/half, living/deceased) CONT'D:

3. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

How many children does he/she have? _____ Age range of these children? _____

4. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

How many children does he/she have? _____ Age range of these children? _____

5. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

How many children does he/she have? _____ Age range of these children? _____

V. Patient's Children (including biological/adopted, living/deceased):

1. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

2. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

3. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

4. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

5. Name: _____ Date of Birth: _____

If deceased, cause of death: _____ Date of Death: _____

VI. Please be advised that you will also be asked questions about the health status of the Patient's:

- Maternal and paternal aunts and uncles
- Maternal and paternal first cousins

Your assistance in providing this information is much appreciated!