



Encephalopathy

micro drip study guide

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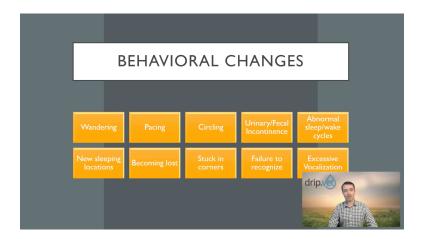
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And so whenever we talk about behavioral changes, there is definitely a list that I go down with each individual client. And I usually go pretty fast, but in this order, we tend to talk about is have there been any wandering? Any pacing? Any circling?

Has the patient had any urinary/fecal incontinence that is new or unexplained. Most of the time, I attribute this to a patient standing in front of the family and urinating, not dribbling or urinating in their sleep. Do they have abnormal sleep/wake cycles? New sleeping locations? Have they become lost in the house?

Are they getting stuck in corners? Are they not recognizing the family? Any type of excessive vocalization as well?

And so when we take the clinical signs in our exams and we put everything together and we say, OK, we really think this patient does have an encephalopathy or primary brain disease. Then we start down that diagnostic profile.