Key Recommendations of Expert Consensus Panel for Sharing Diagnosis and Management of Alzheimer’s Disease

1. Arrange for the participation of a primary caregiver during diagnosis discussion.
2. Provide adequate uninterrupted time and a proper office space.
3. Make a specific diagnosis, unless cultural, educational, or other factors dictate otherwise.
4. Make the diagnosis a process that occurs over several office visits.
5. Counter nihilism and despair by focusing on remaining abilities: frame the challenge as one of achieving the best life possible while accommodating the limitations.
6. When sharing the diagnosis, it is recommended that the physician position himself or herself as a partner of, and advocate for, the patient and caregivers.
8. Initiate early comprehensive treatment, including psychosocial interventions.
9. Educate patient, caregiver, and other family members about Alzheimer’s disease in stage of disease—appropriate manner, using all available educational resources.
10. Inform the patient and caregiver(s) of available services and encourage their utilization; provide in-office materials and website addresses.
11. Emphasize to the caregiver the importance of attending to his or her own emotional and health care needs and facilitate access to resources.
12. Address commonly occurring issues proactively, especially if safety related.