Geriatric Emergency Medicine Initiative
Resident Training Lecture Objectives

Medical and Surgical Emergencies & Urgencies in the Aging Patient:
Cerebrovascular Emergencies

Presenter: Dr. Alan Lucerna
Length: 1 hour
Target Audience:
  Emergency Medicine Residents (Primary)
  Internal Medicine Residents
  Emergency Medicine Faculty

Presentation Overview:
In this session, cerebrovascular emergencies, including falls, trauma, and stroke, will be outlined with discussion of key diagnostic tools and treatment options recommended for best outcomes. Stroke is the third leading cause of death in the United States and the leading cause of disability. Risk for stroke increases by two-fold with every 10 years of life after age 55. As incidence increases, so does morbidity and mortality. Rapid recognition and treatment of cerebrovascular emergencies increase the likelihood of survival.

Learning objectives:
At the end of this presentation, residents will be able to:
1. Evaluate elderly patients with traumatic brain and spinal cord injury due to falls including identifying precipitating causes, such as medications, alcohol use/abuse, gait or balance instability, medical illness, and/or deconditioning.
2. Generate a differential diagnosis for older adults presenting with common cerebrovascular signs and symptoms, such as weakness, dizziness, and altered mental status.
3. Perform a rapid assessment of the older adult patient with new cognitive impairment for special consideration of acute cerebrovascular event.
4. Identify, both rapidly and accurately, the patient’s goals of care and develop an appropriate, patient-centered plan of treatment in the elderly patient whose cerebrovascular emergency is serious or life threatening.
5. Recognize and treat elderly patients with CNS infections.
6. Prescribe and appropriately dose medications for the treatment of a cerebrovascular emergency, taking into consideration current medications, comorbidities, and age-related pathophysiologic changes.
7. Recognize the barriers to accurate and timely diagnosis in elderly patients with critical cerebrovascular emergencies due to impairments in hearing, speech, and cognitive function.
8. Differentiate peripheral and the more deadly causes of vertigo in elderly patients.
Instructional Methods:
Didactic presentation with PowerPoint slides
Case-based discussion
Audience response questions

Evaluation Methods:
Pre-Test Items
Post-Test Items
Reaction survey

Resource(s):
YouTube Lecture Presentation:
http://www.youtube.com/watch?v=y54j2CogfXY&feature=plcp

References: