

Avoiding Misdiagnosis in a Geriatric Patient

Patient: Female, 78

Referral Question:

Memory concerns, concern for possible dementia

Background:

A primary care provider referred the patient to Minder Memory after months of patient-reported forgetfulness.

Traditional in-person neuropsychological services had a 10-month wait. Minder scheduled testing within 14 days.

Findings:

Testing was not suggestive of dementia or significant cognitive impairment, rather slight variability in cognition and elevated levels of depression. Results were provided to the patient and her referring provider, along with treatment recommendations.

Outcome:

Patient
reported her
cognitive
symptoms
improved
significantly
after starting
therapy and
antidepressa
nts

Patient now
feels confident
that she has a
neuropsycholo
gical baseline
for comparison
if she has
cognitive
concerns again
in the future

Avoided
unnecessary
dementia
diagnosis
based on selfreported
symptoms

Patient and family received clarity, reassurance, and support

Primary care provider was able to develop a personalized, effective care plan

"This was a game changer — We feel so relieved."

– Patient's daughter

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