

# Patient Capacity Assessment Tools for Non-Psychiatry Physicians



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# **Abstract**

Throughout medical practice, and especially in the inpatient setting, physicians are often called upon to assess patient capacity. Instead of requesting a psychiatric consult, these basic concepts give non-psychiatry physicians the tools they need to be able to assess their patient's capacity for medical decision making.

## Introduction

Though competence is a legal term and must be determined by a judge in court, as first year medical students, we are taught that "any physician can assess patient capacity". Often however, unless a physician has specialty training in psychiatry, the skills to assess patient capacity are not taught in either medical school nor residency.

This project was completed to provide the tools necessary for nonpsychiatrist physicians to be able to complete a basic capacity assessment for their patients.

# Methods

In order to provide a comprehensive package, three (3) tools were provided:

- A short in-person training presentation that could also be given as a webinar
- A "badge-buddy" reference card for quick, on the spot reminders
- 3. A MiChart dot phrase to assist in documentation of the encounter

The capacity assessment tools are based on the basic criteria set forth by Appelbaum in the NEJM article in 2007.

# PATIENT CAPACITY ELISABETH WONG

Figure 1. Title page of training presentation



Figure 2a. Badge-buddy front Figure 2b. Badge-buddy back



# Conclusions

As physicians, when we focus on things beside the basic science of medicine and recognize that in addition to the pathology, we are tasked with treating the whole patient, our responsibilities expand. The shift physicians have made, and continue to make, from a paternalistic nature which doctors used to the practice, to a model of shared-decision making is uplifting. The shared-decision making approach incorporates respect for patient autonomy and their right of refusal in their rown medical decisions. However, there are many instances where patients can come into conflict with their own previously stated wishes and it is important for a physician to be able to evaluate if the patient is doing so out of a true change of decision or if there are other factors, such as altered mental status, that are contributing to the change of decision.

Giving tools, information, and training in "non-medical" aspects of medical care produces more prepared and well-rounded physicians.

These tools for assessing patient capacity are one such mechanism to broaden the tool box of a physician to allow them to care for the patient as a whole person and not just the basic-science pathology.

## Contact

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## References

I. Acelebaum criteria (N Enel I Med 2007: 357:1834-40)