

DICE APPROACH FOR WANDERING

DESCRIBE

Wandering

May occur in indoor residential or commercial environments as well as outdoor areas with or without secured perimeter

INVESTIGATE (ASSESS)

Look for patterns, time of day/Sundowning

Common triggers include:

- Boredom
- Lack of physical activity
- Searching for familiar/home
- Dietary factors: sugar/caffeine
- Medical factors: pain/constipation
- Psychiatric issues: anxiety/mania

CREATE (TREATMENT)

EMPLOY APPROPRIATE BEHAVIORAL AND SAFETY STRATEGIES. IF BEHAVIORAL INTERVENTIONS DO NOT RESOLVE BEHAVIORS: MEDICATION MAY BE NEEDED

Mania - may need pharmacologic treatment: anti psychotics or mood stabilizers*

EVALUATE (AND RE-EVALUATE)

If wandering persists, look for other underlying causes

- *If patient stable 3-6 months, and psychotropic medication has been required, initiate a cautious incremental reduction and monitor patient closely
- If intervention not effective or if patient or caregiver are in danger, consider referring to neurologist or psychiatrist