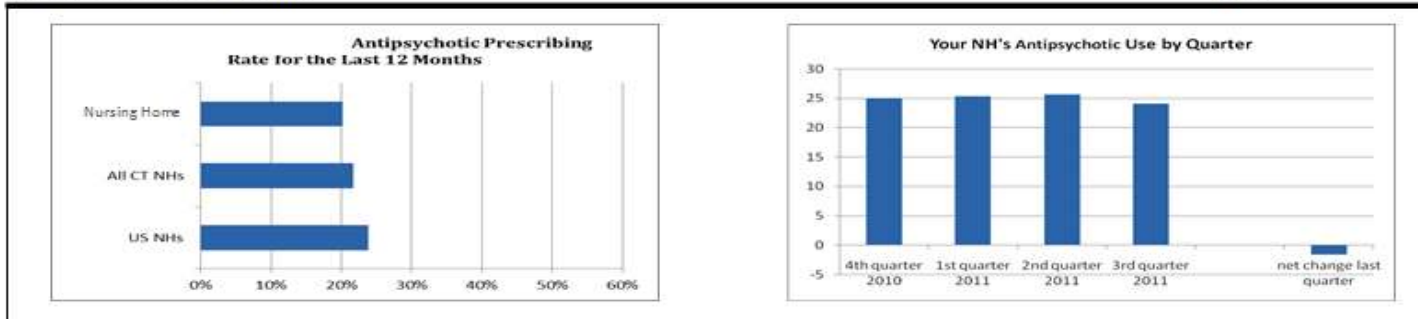


# Just Ask "WHY"

## Why are residents on an atypical antipsychotic?

NAME OF NURSING HOME

DATES



- Atypical antipsychotics are often used to treat behavioral problems in older adults with dementia.
- None have FDA approval for this indication.
- Atypical antipsychotics have serious side effects, including death and stroke.
- Atypical antipsychotics provide at best minimal benefits for treatment of behavioral and psychological symptoms of dementia\*
- Atypical antipsychotics can be tapered successfully\*

**If a resident is on an atypical antipsychotic, ask:**

- WHY is the resident on an atypical antipsychotic?
- Is it appropriate?
- What monitoring is in place?
- Has tapering/stopping the medication been attempted?

**If you are considering prescribing an atypical antipsychotic, ask:**

- WHY does the resident need to be on an atypical antipsychotic?
- Is it appropriate?

**Appropriate** treatment targets include:

- Aggressive behavior (the resident is a danger to self or others)
- Hallucinations or delusions (if these behaviors cause impairment in functional capacity)

**Inappropriate** treatment targets include:

- Wandering
- Poor self-care
- Restlessness
- Impaired memory
- Uncooperativeness without aggression

\*Additional information on antipsychotic tapering and behavior management can be found in Sections 3 and 4 of your Toolkit.

