



Part A: Common clinical conditions in aged care is intended to be used as a point-of-care reference for general practitioners (GPs) in all stages of their careers. It is designed to assist in clinical decision making by presenting a snapshot view of the diagnosis and management of a range of common clinical conditions in aged care.

As with all clinical resources, it is important for every GP to use their own clinical judgement and tailor each management and treatment to their patient's individual needs. The information provided in this resource is not a prescriptive protocol, but should be used as a guide and checklist for GPs to provide effective care. The Part A chapters on Multimorbidity, Palliative and end-of-life care, and Polypharmacy should be read in parallel with all other chapters.

The evidence base from clinical trials in this broad field of medical care is scarce. Specific clinical recommendations therefore cannot be provided as the inclusion and exclusion criteria from available systematic reviews and research literature are often too restrictive and unhelpful. Often, the clinical recommendations are single-disease specific, and fail to consider comorbidities, patient needs and polypharmacy that most (if not all) older people experience.

Some clinical practice points and general principles are provided in each chapter. A 'Consensus-based recommendation' denotes a practice point that was formulated in the absence of high-quality evidence; however, the Silver Book 5th edition Expert Advisory Group (EAG) reached a consensus expert opinion to include in the resource.

It is important to recognise that the diagnosis and management of the clinical conditions for each patient will differ depending on the patient's medical, family, social and environmental history and circumstances. An appropriate and effective management plan can only be established once the above considerations have been discussed with the patient and their carers.

Multimorbidity, the patient's wishes and directives, and polypharmacy all have the potential of altering the patient's illness trajectory. Every clinical decision made regarding the clinical condition must therefore be considered using a person-centred approach after consideration of the above three chapters.

Disclaimer

The information set out in this publication is current at the date of first publication and is intended for use as a guide of a general nature only and may or may not be relevant to particular patients or circumstances. Nor is this publication exhaustive of the subject matter. Persons implementing any recommendations contained in this publication must exercise their own independent skill or judgement or seek appropriate professional advice relevant

to their own particular circumstances when so doing. Compliance with any recommendations cannot of itself guarantee discharge of the duty of care owed to patients and others coming into contact with the health professional and the premises from which the health professional operates.

Whilst the text is directed to health professionals possessing appropriate qualifications and skills in ascertaining and discharging their professional (including legal) duties, it is not to be regarded as clinical advice and, in particular, is no substitute for a full examination and consideration of medical history in reaching a diagnosis and treatment based on accepted clinical practices.

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