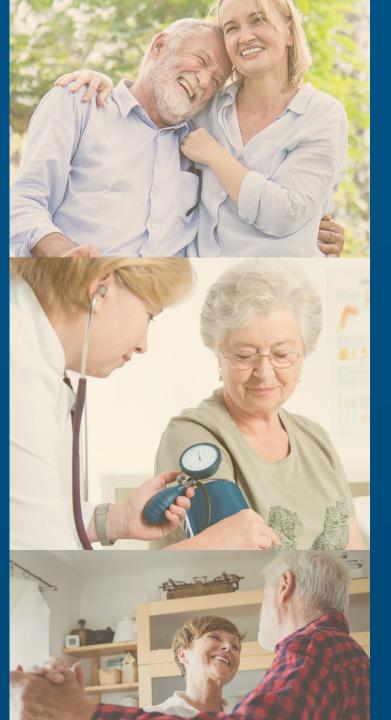


Laurie Beth Bryant GMN Program Manager

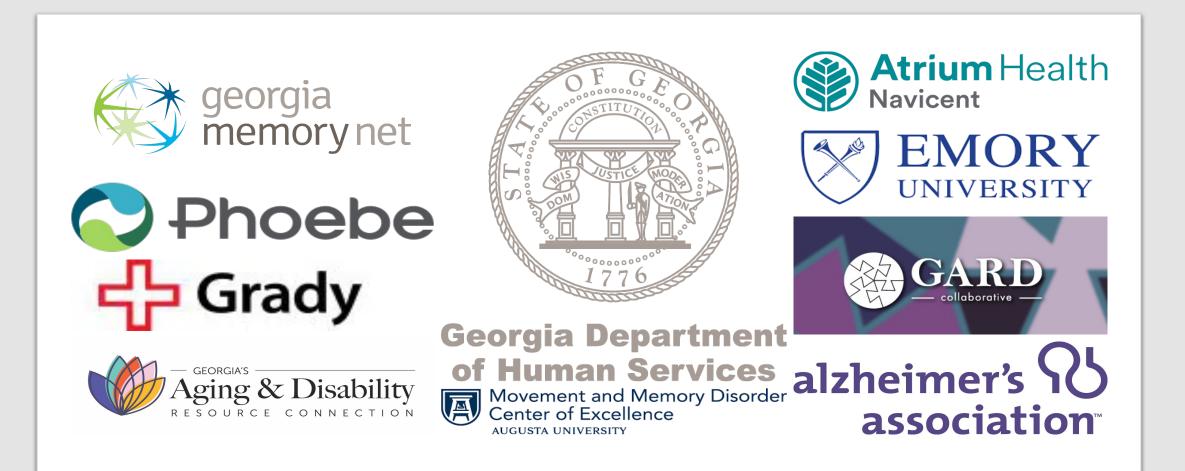
July 26, 2022



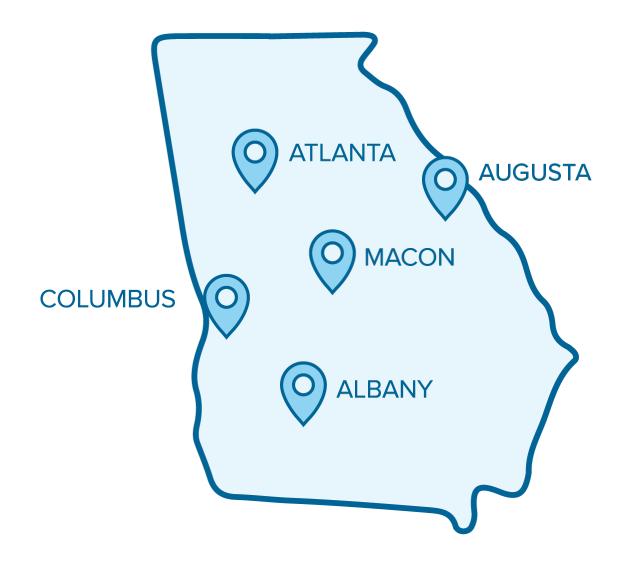
INTRODUCING GEORGIA MEMORY NET

Clarity. Care. Community.

Our Partnerships



Memory Assessment Clinic Locations









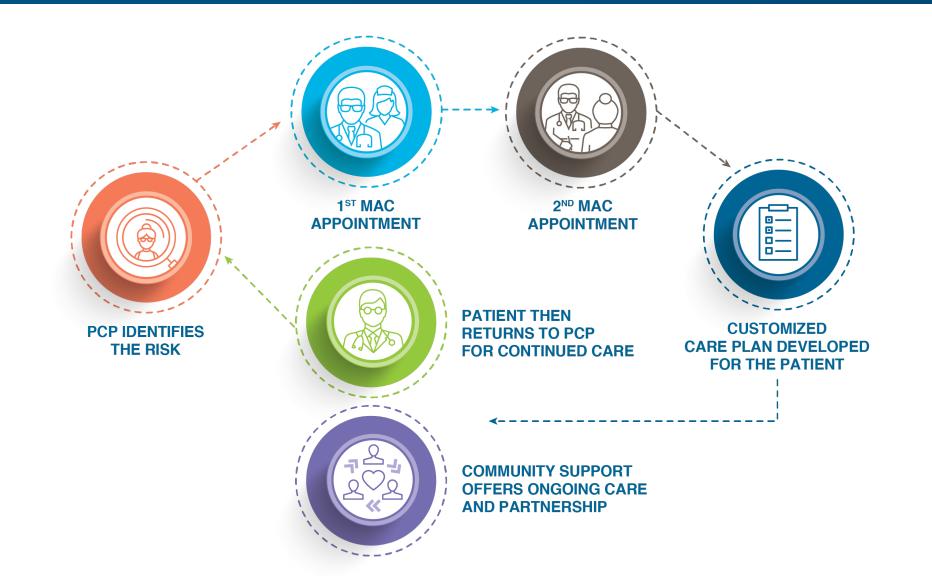




Increase awareness & improve screening among Primary Care Providers

Expand access to diagnostic services statewide Connect Georgians with Alzheimer's to community support Provide oversite of performance and data collection

The Process: An Always Integrated Path





Who Would Likely Benefit from a Referral?

Most Likely to Benefit from GMN

- Patient with **memory loss** and an **unclear diagnosis**
- Less Likely to Benefit from GMN
 - Patient with existing **clear diagnosis** of Alzheimer's disease or another dementia
 - Patient resides in a skilled nursing facility
 - Patient with history of traumatic brain injury
 - Patient age younger than 50







Community Service Educators

The Community Services Educator (CSE)

- A connection, not a counselor
- Specially-trained professionals, educating patients and families while connecting them to community support

What They Do

- Assess patient and care partner needs
- Create personalized care recommendation
- Connect patients and their care partners to community services



Thanks for partnering with Georgia Memory Net. We're dedicated to providing your patients with an accurate diagnosis, and then returning them to your capable care.

Date of Referral:

Georgia Resident

Referral Request:

Patient:

Last Name:	
First Name:	
Mt	
Gender: M / F (circle one) Marital Status:	
Country:	

Primary Language: Interpreter required? N / Y (circle one)

Type:

Family Caregiver/Emergency Contact:

Name:

Preferred Phone:
Email

Patient Insurance:

Insurance Carrier:	
Member ID:	
Group Number:	
Copy of Insurar	ce Card Attached

Referring Provider

Referring Provider Name:	
Provider NPI Number:	
Address:	
City:	
State:	
Fax	

Managed by the Golzuets Albheiner's Disease-Research Center at Emory University.

Sponsoredby the Georgia Department of Human Services.



Please include the following:

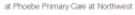
· Annual Welness Visit notes including which Cognitive Screening Tool used and outcomes

If available, please also include the following:

- · Recent labs (within past year) including comprehensive metabolic, CBC, B12 level, TSH, Lipid panel, HgbA1c, RPR
- · List of current medications
- Brain imaging report
- · Actual brain images
- Problem list
- Alergies
- · Relevant clinical notes
- · Brain MRI (or CT if patient has pacemaker, mechanical heart valve/stents or previous injury involving metallic object) within the past year

Fax these documents and a completed referral form to the Memory Assessment Clinic convenient to your patient: Albany

Fax: 229-312-8595, Phone: 229-312-8590 Attn: Shaneka Wiggins, Medical Assistant GNN Memory Assessment Clinic



Atlanta

- Fax: 404-616-4260, Phone: 404-616-4567 Attn: GMN Memory Assessment Clinic at Grady Memorial Hospital



Piedmont

Grady

Phoebe

Fax: 708-446-0212, Phone: 708-721-2798 Attn: Kristine Cordero, Project Coordinator GNN Memory Assessment Clinic at MCG Augusta University

Columbus

Augusta

Fax: 708-571-1603, Phone: 708-571-1120 Attn: Scheduling Coordinator

GNN Memory Assessment Clinic at Piedmont Columbus Regional Family Medicine Center

Macon

Fax: 478-784-5496, Phone: 478-633-5686 Attn: Veronda Perkins, Practice Manager GMN Memory Assessment Clinic



at Navicent Health --- Family Health Center

Referral Form

https://gamemorynet.org/patient/patientreferrals/



QUESTIONS?

Contact: Laurie Beth Bryant <u>Ibrya25@emory.edu</u>

Sponsored by the Georgia Department of Human Services. Managed by the Goizueta Alzheimer's Disease Research Center at Emory University.