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| **Dialogue** | **Comments** | **Notes** |
| *Scene: Tony’s bedroom. Morning. Tony is in bed watching television. Jenny arrives and enters his bedroom.*Jenny: Good morning Tony, how are you today? | When left to own devices, reduction of self-generated voluntary and purposeful behaviour. |  |
| Tony: Good. | Tony can generate some response to external stimulation. There does not appear to be any diminished level of consciousness which narrows the differentials. |  |
| Jenny: How did you sleep? | It is important to differentiate between depression and apathy. Sleep can give a clue with terminal insomnia often associated with depression. |  |
| Tony: Fine. | Increased response time and reduced spontaneous speech. |  |
| Jenny: You’re still in your pyjamas. Would you like to get up and have a shower? | Jenny is trying to motivate Tony. Could she have done this differently? |  |

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| **Dialogue** | **Comments** | **Notes** |
| Tony: No thanks. | This may indicate a lack of motivation, which is typical of apathy but can be found in other disorders as well. |  |
| Jenny: What shall we do today? | This open-ended question seems to have some success in increasing Tony’s spontaneity. |  |
| Tony: Get some work done. | It seems Tony has a goal-directed cognition but goes on to not be able to match this with a goal-directed behaviour. |  |
| Jenny: Great, what work? |  |  |
| Tony: Sorting my papers; balancing the books. |  |  |
| Jenny: Ok, where should we get started? |  |  |

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| **Dialogue** | **Comments** | **Notes** |
| Tony: Not sure. | Another important differential is cognitive impairment. One wants to try to determine whether Tony doesn’t want to work because he is unable to manage this cognitively. If so, employing strategies to optimise his cognition may improve engagement. |  |
| Jenny: Shall we get up and make a plan? |  |  |
| Tony: Maybe later.*Pause. Tony fixated on TV.* | Reduced social interaction. |  |
| Jenny: That’s a gardening show on TV. Do you like gardening? | Jenny is trying to find something to motivate Tony. |  |
| Tony: I used to do gardening. | Reduced interest in usual pastimes seen in apathy. It is important to determine pre-TBI interests and hobbies to ascertain that there has been an alteration. |  |

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| **Dialogue** | **Comments** | **Notes** |
| Jenny: Should we go outside and see how your plants are doing? |  |  |
| Tony: No thanks. | There is an overall reduced emotional responsiveness, often seen in apathy. |  |
| Jenny: Are you feeling tired? |  |  |
| Tony: Not really. | Trying to exclude fatigue and the many causes of this helps to make a clearer diagnosis e.g., untreated sleep apnea may result in reduced motivation.  |  |
| Jenny: Are you hungry? | Appetite can help in making the distinction between depression and apathy. |  |

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| **Dialogue** | **Comments** | **Notes** |
| Tony: Yes. |  |  |
| *Jenny hands toast to Tony.* Jenny: I can help you eat.*Tony examines the toast. He resumes watching the television and takes a bite of toast.*  | Jenny is trying to be helpful. How beneficial for Tony do you think it is if she helps him eat in bed? Tony presents with reduced spontaneous movements. |  |
| Jenny: If you like, you can get up and go sit by the window and, I can put this on the table and you can finish eating.*Tony hands Jenny his slice of toast. He begins to get out of bed.*  | Able to generate externally driven behaviour. |  |
| Jenny: Is there anything else I can help you with? |  |  |
| Tony: No thank you.*Scene ends with Tony leaving his bed.* | Overall reduced emotional responsiveness often seen in apathy. |  |