

HCMC FAMILY MEDICINE RESIDENCY PROGRAM

G2 Geriatrics

ROTATION SPECIFIC COMPETENCY OBJECTIVES

Patient Care

Objectives:

By the end of the rotation, the G2 resident will:

- Understand a comprehensive assessment of geriatric patients and perform this assessment
- Perform a physical exam including mini mental status exam
- Understand the indications, contraindications, risks and significance of invasive tests
- Consistently use a systematic approach to clinical problem solving and determining therapeutic options
- Effectively and efficiently use laboratory tests and imaging modalities to diagnose and treat patients
- Assess the acuity and prognosis of chronic problems
- Incorporate emotional and behavioral factors into the treatment of patients
- Understand the principles of age appropriate preventative health

Medical Knowledge

Objectives:

By the end of the rotation, the G2 resident will:

- Demonstrate knowledge of common geriatric diseases including but not limited to the following
 - Principles of geriatric care
 - Dementia/ Delirium/ Depression
 - Changes in normal aging
 - Falls/Syncope
 - Incontinence
 - Pressure ulcers and skin disorders
 - End of life issues
- Apply clinical guidelines and evidence-based medicine to these diseases
- Recommend appropriate pharmaceuticals in complicated patients
- Demonstrate the ability to use multiple medications simultaneously to treat several medical problems
- Analyze the knowledge and understanding of the impact of emotional, behavioral, and comorbidities in the well-being of the elderly

Geriatrics Competency Module from AAFP Online Resources
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Competencies:

<u>PRE-TEST</u>	<u>POST-TEST</u>
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Knowledge

Subject Area	Primary Resources	Restricted/Secondary Resources
Principles of Geriatric Care	<u>Ten Principles of Geriatric Care</u> <u>Key Principles of Geriatric Care</u>	
Biopsychosocial changes in normal aging	<u>Basics of Geriatric Care</u> <u>Health Aging</u>	<u>Healthy aging quiz</u>
Community resources for the elderly	<u>Administration on Aging</u> <u>Eldercare</u>	
Economics	<u>Healthcare Funding - Geriatrics</u>	<u>Medicare Home Page</u>
Legal and ethical aspects in geriatrics	<u>Intervention and Treatment Strategies for Elder Abuse</u> <u>Elderabusecenter.org</u> <u>Legal and Ethical Issues in Geriatrics</u>	
Avoiding Geriatric Pitfalls	<u>Using Medications Appropriately in Older Adults</u> <u>Hazards of Hospitalization of the Elderly</u>	
Delirium/Dementia	<u>Guidelines for Managing Alzheimer's Disease: Part I. Assessment</u> <u>Delirium</u>	
Depression	<u>Depression in Later Life</u>	
Falls/Syncope	<u>Prevention of Falls in Older Patients</u> <u>Falls, Fracture and Injury</u>	
Sensory Loss	<u>Differential Diagnosis and Treatment of Hearing Loss</u> <u>Common Causes of Vision Loss in Elderly Patients</u>	
Sleep Disorders	<u>Insomnia: Assessment and Management in Primary Care</u>	
Incontinence and Urinary problems	<u>Urinary Catheter Management</u> <u>Managing Benign Prostatic Hyperplasia</u>	

	<u>Treatment of Urinary Incontinence</u>	
Undesired Weight loss	<u>Geriatric Failure to Thrive</u> <u>Evaluating and Treating</u> <u>Unintentional Weight Loss in the</u> <u>Elderly</u>	
Sexuality in Aging	<u>Sexuality</u> <u>Information on Sexuality and Aging</u> <u>Sexual Issues for Aging Adults</u> <u>Management of Impotence in the</u> <u>Geriatric Man</u>	
Pressure Ulcers and Skin Disorders	<u>Pressure Ulcers</u> <u>Common Skin Disorders</u>	
Infections in Geriatrics	<u>Pulmonary Infections</u> <u>Urinary Tract Infections</u> <u>Common Infections in Older Adults</u>	
Musculoskeletal Problems: osteoarthritis Osteoporosis, spinal stenosis	<u>Osteoporosis: Part I. Evaluation and</u> <u>Assessment</u> <u>Osteoporosis: Part II. Non-</u> <u>pharmacologic and Pharmacologic</u> <u>Treatment</u> <u>Management of osteoporosis in</u> <u>postmenopausal women</u> <u>Osteoporosis in Men</u> <u>Osteoarthritis</u> <u>Treatment of Degenerative Lumbar</u> <u>Spinal Stenosis</u>	<u>Geriatric Jeopardy</u>
Healthy Aging and Prevention	<u>Policy Planning</u> <u>The Geriatric Patient - A Systematic</u> <u>Approach</u>	
Proactive Pain Management	<u>Geriatric Pain</u> <u>Fast Facts- Pain</u>	

Skill Competencies:

Subject Area	Overview Resources	Advanced Resources	Evaluation Tools
Transitions of care	<u>Integration of Services</u>		
Working with a multidisciplinary team	<u>Interdisciplinary teams</u>		
Geriatric assessment	<u>The Geriatric Patient - A Systematic Approach</u> <u>Efficient identification of adults with depression and dementia</u>		
EOL/Palliative Care	<u>Guidelines for delivering palliative care</u> <u>Making decisions with families at the End of Life</u> <u>Care of the dying patient</u> <u>End of life resource center</u>	<u>National consensus project for palliative care.</u>	

Attitudes:(includes ACGME Core Competencies)

Subject Area	Core Competency Area	Assessment Tools
Appreciate contextual dependence of geriatric medical decision-making (Professionalism)	<u>Quality of life and therapeutic objectives</u>	
Awareness of the importance of the physician's own attitudes toward aging, disability and death (Interpersonal Skills and Communication)	<u>Physician attitudes toward death and terminally ill patients</u> <u>CBS New Report on Ageism (age discrimination)</u> <u>The Psychology of Aging</u>	
Appreciation that demographic forces will alter future practice (Practice-based Learning & Improvement)	<u>Demographics of Aging</u>	
Respect for the value and limitations of POLST forms, advanced directives, living wills, and DPOA for health care (Systems Based Practice)	<u>Legal and Ethical Issues of Geriatric Care</u>	

Self-Study Modules: Geriatric Jeopardy - From UCLA - Division of Geriatrics

Online Resources

[Dementia](#)

[End-of-Life Care](#)

[Geriatric Care](#)

Practice-Based Learning and Improvement

Objectives:

By the end of the rotation, the G2 resident will:

- Understand when it is appropriate to consult
- Use self-reflection to incorporate feedback
- Give appropriate feedback to superiors, peers and subordinates
- Make appropriate and timely referrals
- Explain complicated medical conditions to patients at the appropriate level
- Consistently use information technology for improving knowledge and documenting patient care plan

Systems Based Practice

Objectives:

By the end of the rotation, the G2 resident will:

- Advocate for ordering cost-effective tests and labs
- Incorporate cost-effective techniques in prescribing medication safely
- Organize and lead multidisciplinary care team meetings such as family conferences
- Formulate a plan for effective patient advocacy
- Make timely and appropriate referrals to specialists and allied services

Professionalism

Objectives:

By the end of the rotation, the G2 resident will:

- Consistently incorporate sensitivity to cultural differences into treatment plans
- Apply the patient's perception of illness to appropriate care
- Incorporate patient's preferences when formulating a plan of care
- Vigorously defend a patient's privacy
- Apply the knowledge and understanding of the basic biomedical ethical principles such as autonomy, beneficence, malfeasance, justice and decision making capacity to geriatric patients

Interpersonal and Communication Skills

Objectives:

By the end of the rotation, the G2 resident will:

- Demonstrate independence and promptness in completing medical records
- Consistently communicate respectfully and effectively with patients and family
- Use interpreters effectively and efficiently
- Model effective communication with consultants, team members and members of the allied health team

Educational Resources

- Geriatrics at Your Fingertips
- Reference Journals- American Family Physician, Geriatrics, Annals of Long Term Care
- AMDA Clinical Practice Guidelines
- Geriatric books: Primary Care Geriatrics: A Case-Based Approach, Slo 5th ed. 2006
Ham, RJ, Sloane PD, Warshaw GA, Bernard MA, Flahery E, eds.
- Web-based resources

June 2015