

Geriatrics – Goals & Objectives

- **Participating Site(s):** Inpatient geriatrics service; skilled nursing facility; outpatient geriatrics clinic (as applicable); home visits
- **Duration:** 2-4 weeks
- **Required or Elective:** Required

Rotation Overview

This rotation provides residents with structured experience in the evaluation and management of older adults across inpatient, outpatient, and post-acute care settings. The experience emphasizes recognition of atypical disease presentations, maintenance of functional independence, high-value and patient-centered decision-making, medication management, interdisciplinary collaboration, and alignment of care with patient goals and preferences.

Overall Rotation Goal

The goal of this rotation is for residents to progressively demonstrate the knowledge, clinical skills, and professional judgment necessary to care for older adults by recognizing age-related changes in disease presentation, maintaining function and quality of life, and delivering evidence-based, high-value, and goal-concordant care.

Educational Objectives (Aligned with ACGME Competencies)

Patient Care

Residents will be able to:

- Perform comprehensive geriatric assessments, including evaluation of functional status, cognition, mood, mobility, nutrition, and social supports
- Recognize atypical presentations of acute and chronic illness in older adults, including delirium, functional decline, falls, and weight loss
- Formulate and implement patient-centered management plans that balance diagnostic evaluation, treatment burden, prognosis, and patient goals
- Manage common geriatric syndromes, including delirium, dementia, incontinence, falls, pressure injuries, and polypharmacy under appropriate supervision

Medical Knowledge

Residents will be able to:

- Explain age-related physiologic changes and their impact on disease presentation, pharmacokinetics, and treatment response
- Differentiate normal aging from pathologic conditions affecting cognition, mobility, continence, and mood
- Apply evidence-based guidelines to the management of chronic disease in older adults, including diabetes, cardiovascular disease, depression, and osteoporosis
- Identify medications associated with adverse effects in older adults and apply principles of deprescribing and medication safety

Practice-Based Learning and Improvement

Residents will be able to:

- Identify personal learning gaps related to geriatric medicine and high-value care

- Incorporate clinical guidelines and evidence-based tools (e.g., Beers Criteria) into patient care decisions
- Reflect on patient outcomes and integrate feedback to improve care of older adults

Interpersonal and Communication Skills

Residents will be able to:

- Communicate effectively with older adults and caregivers, adapting communication strategies for sensory, cognitive, and emotional needs
- Discuss prognosis, functional expectations, and goals of care with patients and families
- Collaborate effectively with interdisciplinary team members, including nursing, social work, physical and occupational therapy, pharmacy, and case management

Professionalism

Residents will be able to:

- Demonstrate respect, empathy, and accountability in caring for older adults
- Recognize and respond appropriately to ethical issues, including capacity assessment, elder abuse, and end-of-life decision-making
- Maintain patient dignity and confidentiality in complex medical and social situations

Systems-Based Practice

Residents will be able to:

- Utilize healthcare resources appropriately to deliver high-value, cost-conscious care for older adults
- Coordinate care across inpatient, outpatient, post-acute, and community settings
- Identify appropriate indications for screening, preventive services, rehabilitation, long-term care placement, and palliative care referral

PGY-Level Expectations

PGY-1:

- Identify common geriatric syndromes and communicate assessment findings under direct supervision
- Participate in functional, cognitive, and medication assessments

PGY-2:

- Develop comprehensive, prioritized care plans with indirect supervision
- Apply principles of medication safety, deprescribing, and functional preservation

PGY-3:

- Independently manage routine geriatric conditions with attending oversight
- Lead interdisciplinary discussions and model patient-centered, goal-concordant care for junior learners

Teaching and Learning Activities

- Inpatient and post-acute geriatrics rounds
- Outpatient geriatrics clinic participation
- Interdisciplinary team meetings and care planning discussions
- Case-based discussions emphasizing functional status, high-value care, and goals of care
- Independent reading aligned with ACP and geriatrics core topics

Evaluation and Feedback

Resident performance is evaluated through:

- Direct faculty observation
- End-of-rotation faculty evaluation
- Assessment of clinical reasoning, communication, and interdisciplinary collaboration
- Milestone-based assessment tools

Residents receive ongoing formative feedback and summative feedback at the conclusion of the rotation.

Supervision

Faculty supervision is provided in accordance with ACGME supervision guidelines and is based on resident demonstrated competence, PGY level, and patient acuity.