

# 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.