

General Goals:

1. To acquire the knowledge, skills and attitudes necessary to demonstrate effective and efficient management of the elderly patient's problems.
2. To emphasize the art as well as the science of geriatric medicine, including elements of compassion, communication skills, ethics, professional conduct and team work.

At the end of the 4 week rotation the Resident should be able to:

A. KNOWLEDGE

1. Discuss the assessment, investigation and management of common geriatric syndromes
 - Dementia/delirium
 - Falls/mobility problems
 - Incontinence
 - Postural hypotension/hypertension
 - Depression
 - Parkinson's disease
2. Discuss the atypical presentation of illnesses in the older person
3. Describe the special assessment tools that are used to perform a comprehensive functional assessment of an older patient ie:
 - Folstein Mini Mental State Examination
 - Activities of Daily Living (ADL)
 - Instrumental Activities of Daily Living (IADL)
4. Demonstrate recognition of legal and ethical issues pertinent to the care of the elderly
 - mental competency
 - power of attorney
 - Advance directives
 - Driving and the cognitively impaired person
5. Identify the resources available to assess these legal and ethical issues.
6. Demonstrate appropriate history taking of elderly patients, with particular emphasis of the medical, functional, mental status and psychosocial evaluation of the patient.
7. Describe the altered pharmacokinetics which occurs with aging and how these changes modify the choice of drugs and dosages of prescription and non-prescription medications in the older person

8. Formulate an appropriate question from clinical scenarios encountered during the rotation.

B. SKILLS

1. Use problem oriented medical records
2. Demonstrate effective communication skills when dealing with the older patient and their caregiver, particularly those who suffer from cognitive impairment.
3. Perform a thorough physical examination with special emphasis on blood pressure, neurological exam, gait and balance.
4. Work effectively with a multidisciplinary team in assessment and management of an older patient.

C. ATTITUDES

1. Recognize the role and importance of family and caregivers in the care of the patient.
2. Be attentive to the emotional aspect of the family and caregiver when dealing with a patient suffering from cognitive change.
3. Recognize the importance of working with a multidisciplinary team and how each member contributes to the assessment and care of the older patient.
4. Recognize the complex ethical issues of investigations and treatment of the older patient.
5. Recognize the important role of the family physician in the management and long term follow up of the patient.