

## UCR Family Medicine Residency- Palm Springs Geriatrics Curriculum

**Rotation: Geriatrics**

Desert Regional Medical Center (DRMC)  
PGY-2

**Description:**

A four-week experience with the attending geriatrician and/or hospice specialist. The Geriatric rotation will include training experience in the clinic, nursing homes and assisted living settings. Included will be exposure and educational experiences with hospice programs and rehabilitation programs associated with these facilities. The resident/learner will become competent and/or familiar with issues regarding end of life care, palliative medicine, dementia and poly-pharmacy.

Contact Person: Howard Cohen, MD (Hospice experience)  
Contact Number: 949-939-4953

Contact Person: Osmundo Saguil, MD (Skilled Nursing Facility experience)  
Contact Number: 760-969-5262 ext. 1430

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Schedule		8:00-5:00 SNF Patient Care	8:00-12:00 Hospice Patient Care  12:00-1:30 pm Noon Conference  1:30-5:00 Hospice Patient Care	8:00-5:00 SNF Patient Care	8:00-12:00 Hospice Patient Care  12:00-1:30 pm Noon Conference  1:30-5:00 Hospice Patient Care	8:00-5:00 SNF Patient Care	

## Goals:

Residents will demonstrate competency in:

- Prevention, general care, and areas of concern in caring for older patients
- The signs and symptoms of dementia, depression, sensory deprivation, and malnutrition
- Assessment of stroke and its residual disabilities
- Evaluation and treatment for chronic medical conditions, including congestive heart failure, hypertension, diabetes, COPD
- Evaluation and treatment of acute medical conditions, including urinary tract infections, pneumonia, zoster, pressure ulcers
- End of life care
- Acute rehabilitation
- Instability of gait

## Objectives:

Knowledge: The resident/ learner are expected to develop a competent knowledge base for each of the following medical topics during this rotation. Use the links at right to view the specific educational material.

1	Topic	On-Line Resource
MK	Basic Geriatric Care	<a href="http://www.geriaticsatyourfingertips.org">www.geriaticsatyourfingertips.org</a>
MK	Dementia	<a href="http://www.merck.com/mkgr/mmg/sec5/ch40/ch40a.jsp">www.merck.com/mkgr/mmg/sec5/ch40/ch40a.jsp</a>
MK	Fall Prevention	<a href="http://www.merck.com/mkgr/mmg/sec2/ch20/ch20a.jsp">www.merck.com/mkgr/mmg/sec2/ch20/ch20a.jsp</a>
MK	Delirium	<a href="http://www.merck.com/mkgr/mmg/sec5/ch39/ch39a.jsp">www.merck.com/mkgr/mmg/sec5/ch39/ch39a.jsp</a>
MK	Pressure Ulcers	<a href="http://www.merck.com/mkgr/mmg/sec15/ch124/ch124a.jsp">www.merck.com/mkgr/mmg/sec15/ch124/ch124a.jsp</a>
MK	Pharmacology in the Elderly	<a href="http://www.dcri.duke.edu/ccge/curtis/beers.html">www.dcri.duke.edu/ccge/curtis/beers.html</a>
MK	Unintentional Weight Loss	<a href="http://www.medscape.com/viewarticle/555217">www.medscape.com/viewarticle/555217</a>
MK	Dermatology in the Elderly	<a href="http://www.americangeriatrics.org/directory/ABIM/GRS/Derm.htm">www.americangeriatrics.org/directory/ABIM/GRS/Derm.htm</a>

Skills: At the completion of this rotation, the resident/ learner will be able to:

2. communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families (PC-1)
3. make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment (PC-3)
4. know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance (SBP-5)
5. work with health care professionals, including those from other disciplines, to provide patient-focused care (PC-9)
6. use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills (IC-2)
7. develop and carry out patient management plans (PC-4)
8. demonstrate knowledge of and participate in practice review e.g. chart review and practice profiles, and participate in practice based quality improvement activities (PBLI-1a)

Attitudes: In order to demonstrate the attitudes and behaviors expected of a resident/ learner, the resident will:

9. demonstrate an understanding of pertinent pathophysiology in making management decisions using literature and evidence based medicine to support your decisions (MK-2a)
10. use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills (IC-2)
11. demonstrate sensitivity and responsiveness to patients’ culture, age, gender, and disabilities (PR-3)
12. work effectively with others as a member or leader of a health care team or other professional group (IC-3)

**Teaching Methods:**




Teaching for the geriatric experience will generally occur during nursing home rounds, SNF consultations and care plan meetings. Specific teaching methods will include:

Teaching Methods	
Clinical Teaching	Didactic
Chart Audit	Mentoring
Role Modeling	Self-directed Modules

**Evaluation Methods:**

Feedback will be provided by formative evaluations through daily one-on-one discussions with the attending physicians and by a summative global competency evaluation at the completion of the rotation. Specific evaluation methods for each of the objectives above are listed here by the objective number & pertinent competency (*see Legend of abbreviations at the end of this document*):

		Links each Objective to its competency-based evaluation method.														
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Core Competencies	PC		GR	GR		GR		RR								
	MK	MQ								RR						
	PBL								RR							
	IPC						GR				GR		36			
	P											GR				
	SBP				MQ											

<b>Legend</b>	
<b><u>Core Competencies</u></b>	
PC	Patient Care
MK	Medical Knowledge
PBL	Practice Based Learning
ICS	Interpersonal Communication Skills
P	Professionalism
SBP	Systems Based Practice
<b><u>ACGME Best Methods</u></b>	
	Best Method of Evaluation
	Good Method of Evaluation
	Acceptable Method of Evaluation
<b><u>Evaluation Methods</u></b>	
CL	Checklist
CR	Chart Stimulated Recall
GR	Global Rating: Direct obs / summative eval
MQ	Exam MCQ
OE	Oral Exam
OS	Objective Structured Clinical Exam
PL	Procedure or Case Logs
PF	Portfolio
PS	Patient Survey
RR	Record Review
SM	Simulations
SP	Standardized Patients
36	360 Global Rating

### **Supervision:**

Resident/ learner will work one-on-one and be supervised by our senior staff. While the resident/ learner will interact with a number of health care workers in the various facilities (i.e., nurses, nurse practitioners, physician assistants, and physical therapists), supervision of patient care will be provided by a physician specializing in geriatric care and/or hospice specialist.

### **Program Evaluation & Improvement:**

The resident will evaluate the rotation and faculty members at the completion of the rotation through formal evaluation in New Innovations. While in the nursing home or clinic, formative evaluation is performed daily in the form of one-on-one feedback and chart review. Summative evaluations are accomplished through competency-based evaluations, which are completed electronically and will be reviewed with the resident. At all stages, appropriate recommendations and observations will be acted upon to improve the resident/ learner's experience and patient care.