



Geriatric Care Competency Standards in Osteopathic Undergraduate Medical Education



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Research Problem

- ↑ # of older adults & ↑ need for physicians capable of providing care
- AOA GME & ACGME Unify → Osteopathic UME **must include** AACOM + AAMC competencies
- Ensure Osteopathic UME → physicians **most** capable & interested in filling need
- UIWSOM's integrative curriculum has ability to create a Geriatric Centre of Excellence

Rationale and Significance

Medical Students lack interest in pursuing Geriatrics	Multiple modalities attempted; none maintain competency & interest after graduation
Early & continued exposure → ↑ attitudes, knowledge, & skills	Use of combined competencies → Osteopathic physicians most prepared for GME

Significance

Table 1: Recommended UME Geriatrics & Palliative Care Goals & Objectives

	Objectives
Goal: Develop New Comprehensive Goals & Objectives	Geriatric Medication Management Impact of age-related changes on: Drug selection & dosing; obtain complete drug list (Rx, herbal & OTC) & recognize interactions Changes in renal & hepatic function, body composition, & central nervous system sensitivity
	Cognitive & Behavioral Disorders In delirium, dementia, & depression: Compare & contrast clinical presentations Formulate DDx, etiology, & implement initial evaluation Perform & interpret a cognitive assessment; create a non-pharmacologic management plan
	Self-Care Capacity Baseline & current functional abilities: Identify & assess ADLs, IADLs & safety risks; recommend ways to mitigate risk Develop preliminary management plans for functional deficits using adaptive interventions & interdisciplinary teams
	Falls, Balance, & Gait Disorders All pts >65yo: Assess falls in last year; preform & interpret a "Get up & Go test" All pts who have fallen: Utilize Hx, PE, & functional assessment to construct a DDx, etiology, & plan
	Health Care Planning & Promotion Integration of pt preferences, life expectancy, & functional status on goals of care: Establish code status, health care proxies, & advance directives Perceive possible need to override standard screening test recommendations Recognize potential need to override standard treatment recommendations
	Atypical Presentation of Disease Agging impact on pt's homeostasis: Identify physiologic changes in each organ system Generate a DDx based on the unique presentations of common conditions
	Palliative Care Goals of care regarding aging, disability, & death for pts & families: Determine psychological, social, & spiritual needs & involve pertinent interdisciplinary team members Assess & manage pain & key non-pain symptoms Explain how attitudes toward aging & death can influence end of life discussions

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