*GERIATRIC FELLOWSHIP COMPETENCY CHECKLIST

EDUCATIONAL GOALS: The goal of geriatric fellowship training is to prepare fellows for competency in the following core areas:				
✓ Check and record date completed	In Patient	Date	Out Patient	Date
Osteopathic Principles and Practice a. Describe the integration of Osteopathic principles and philosophy into the care of older adults and frail older adults.				
b. Describe the musculoskeletal changes of normal and pathological aging and the limitations to consider when performing Osteopathic Manipulative Treatment (OMT).				
c. Perform complete musculoskeletal exams and diagnose abnormalities as pertinent to the nursing home environment.				
d. Perform individualized OMT to treat acute or chronic symptoms of the unique patient.				
e. Utilize caring, compassionate, holistic, person-centered behavior with older adults and their families and caregivers.				
Osteopathic Philosophy and Osteopathic Manipulative Medicine (OMM) a. The Integration of Osteopathic Principles into the daily practice of geriatrics.				
b. The appropriate application of OMM to geriatric patient management.				
The program must train fellows in the clinical application of osteopathic manipulative medicine to geriatrics patients. At a minimum this must include:				
a. Training in outpatient and inpatient settings.				
b. Documentation of OMM in the medical record.				
c. Coding and reimbursement.				

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Medical Knowledge				
a. Analyze the capacity of older adults to function optimally across many domains: physical, functional, cognitive, emotional, social spiritual, and cultural.				
b. Describe the eight determinants of health (Health Field Model): function, disease, social environment and support system, physical environment, genetic endowment, individual responses – behavior and biology, healthcare system, and well-being.				
c. Maintain current knowledge of clinical medicine that reflects the majority of patient care issues present in geriatric settings.				
d. Maintain current knowledge of behavioral medicine that reflects the majority of patient care issues present in geriatric settings.				
e. Disorders of the aging renal system.				
f. The biology, psychology and physiology of aging.				
g. Pharmacology in older adults.				
h. Cardiovascular disorders with emphasis on degenerative diseases, dysrhythmias, congestive heart failure and peripheral vascular disease.				
i. Neurologic disorders, including cerebrovascular disease, neurodegenerative disease, dementias and delirium.				
j. Endocrine disorders, including diabetes mellitus and thyroid disorders.				
k. The arthritides and osteoporotic disease.				
l. Fracture management including hip, spinal and extremity fractures.				
m. Infectious diseases of older adults.				
n. Malignant diseases.				
Patient Care				
a. Provide osteopathic geriatrics patient care service in ambulatory, continuity and inpatient sites.				
b. Accurately gather essential information from all sources including patients, care givers, other professionals, electronic sources, and paper sources.				
c. Comprehensive geriatrics assessment including cognitive, functional, and psychosocial evaluation.				
d. Preventive medicine, including proper nutrition, exercise prescription, counseling, immunizations and chemoprophylaxis.				

✓ Check and record date completed	In Patient	Date	Out Patient	Date
Patient Care – continued				
e. Physical medicine and rehabilitation, including complications to rehabilitation caused by illness.				
f. Mental health concerns such as loss of a spouse, death and dying, depression, dependency, caregiver burden and sexuality in the elderly.				
g. Special problems common in the hospitalized older adults including iatrogensis, immobility, polypharmacy and pressure ulcers.				
h. Pre-surgical evaluation and medical clearance.				
i. Post-surgical rehabilitation and recovery.				
j. Nutritional needs to include hyperalimentation and parenteral nutrition.				
k. Ethics, advance directives and end-of-life decision-making skills.				
Interpersonal & Communication Skills				
a. Develop appropriate doctor-patient relationships in all geriatrics settings.				
b. Develop effective listening, written, verbal and electronic communication skills in professional interactions with patients, families and other health professionals.				
Professionalism				
a. Demonstrate respect for patients and families and advocate for the primacy of patient's welfare and autonomy.				
b. Adhere to ethical principles in the practice of geriatrics.				
c. Demonstrate awareness and proper attention to issues of culture, religion, age, gender, sexual orientation, and mental and physical disabilities.				
Practice-Based Learning and Improvement				
a. Apply the principles of evidence-based medicine to geriatrics.				
b. Participate in practice based objective performance improvement projects in geriatrics settings.				
c. Health promotion and disease prevention, nutrition, exercise and health screening as it relates to the geriatrics patient.				
System-Based Practice				
a. Effectively function within local and national health care delivery systems to provide high quality geriatrics services.				
b. Effectively function within a team to provide care to geriatrics populations.				
c. The impact of health care cost or the elderly and public policy recommendations.				
d. Geriatrics facility administration.				

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System-Based Practice continued				
e. Training must include the interdisciplinary approach to patient care: Fellows must gain experience in collaboration with multiple professions including physician assistants, nurse practitioners, nurses, social workers, counselors, and others involved in the care of addicted patients. Training must include participation in interdisciplinary case management of nursing home patients.				
Ambulatory Continuity				
a. Each fellow must be assigned a panel of patients at the geriatrics ambulatory continuity site. The fellow will be responsible for the management of these patients, for the majority of the year of fellowship.				
Inpatient Medicine-Inpatient Care				
a. A participation in an integrated geriatrics service that includes medical and surgical services with cooperative involvement of all other related departments of the institution.				
b. Management of geriatrics acute and chronic illness.				
c. Management of geriatric patients with other health care professionals.				
d. Coordination of care.				
e. Management of transfer of care to and from the patient's residence.				
f. Production of comprehensive medical records.				
g. Utilization management and discharge planning.				
Nursing Home				
Each fellow must receive training in the care of geriatrics patients in nursing home settings. At a minimum this must include:				
a. Evaluation of new patients and completion of requirements for admission.				
b. Adherence to regulatory requirements governing nursing home care.				
c. Participation in interdisciplinary team meetings and discharge planning when appropriate.				
d. Completion of discharge duties and arrangement for appropriate follow-up.				
Home Care				
Training for home care services must be offered. At a minimum this must include:				
a. Referrals to appropriate home nursing care or hospice care services.				
b. Completion of appropriate admission and follow-up paperwork.				
c. Home care visits.				
d. Identification and utilization of community resources for care of older adult patients at home.				

*GERIATRIC FELLOWSHIP COMPETENCY CHECKLIST
SIGNATURE PAGE

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Geriatric Fellow **Name (_Please Print_)**

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Program Director **Name (_Please Print_)**

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Geriatric Fellow **Signature**   **Date**

_____ _____
Program Director **Signature**   **Date**

*Standards for checklist were taken directly from AOA (American Osteopathic Association)
**INSPECTION CROSSWALK FOR FELLOWSHIP TRAINING IN GERIATRICS
IN OSTEOPATHIC FAMILY PRACTICE
AND MANIPULATIVE TREATMENT**