	Course Course Date Instru	uctor Name			Date	Form Con	pleted _					
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ATTITUDE C	OMPETENCIES											
												
GERI-A-1	Awareness of Myths and Stereotypes Related to Older People	(AGS, OMS)										
GERI-A-2	Recognition of Negative Aspects of Ageism on Optimal Care of the Elderly	(AGS, OMS)										
GERI-A-3	Recognition of the Heterogeneity of Older Persons	(AGS, OMS)										
GERI-A-4	Openness & Willingness to Work With Other Disciplines in Caring for Older Patients	(AGS, OMS)										
GERI-A-5	Aging Self-Awareness and Personal Attitudes (Own Aging, Disability, Death)	(AGS, OMS)										
GERI-A-6	Attitude of Compassion & Understanding for Care givers of the Frail Elderly	(AGS, OMS)										
GERI-A-7	Appreciation for Improving and Optimizing Functionality for Older People	(AGS, OMS)										
GERI-A-21	Awareness of and Presentation of Palliative Care (Including Hospice) as a Positive, Active Treatment Option for a Patient With Advanced Disease	(AAMC 21)										
	GE COMPETENCIES											
BASIC SCIEN												
GERI-K-27	Demography and Epidemiology of Aging	(AGS, OMS)										
GERI-K-28	Theories of Aging (Biochemical/Molecular, Cellular, Genetic, Biopsychosoical)	(AGS, OMS)										
GERI-K-29	Normal Aging	(AGS, OMS)										
GERI-K-30	Anatomic and Histologic Changes of Aging	(AGS, OMS) (AGS, OMS)										
GERI-K-31 GERI-K-17	Pathology of Normal Aging (See also K17 below for AAMC) Physiology of Aging (Organ Systems)	(AGS, AAMC 17, OMS)										
02.1111127	AAMC 17 Requires identify 3 Physiologic Changes and Their Contribution to Homeostenosis	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
PHARMACO	LOGIC CHANGES RELATED TO AGING	(AGS, AAMC 1-3, OMS)										
GERI-K-1	Drug Selection and Dose Based on Knowledge of Age-Related Changes	(AAMC 1)										
	Familiarity with Research Foundation, Titration, Drug Half-Life Variability in Older Adults, Factors	(OMS)										
	on Rates of Absorption, on Prescription and Over the Counter Medications, and Polypharmacy.											
GERI-K-2	Identify Drugs to Be Avoided and Explain Potential Problems With Each	(AAMC 2)										
GERI-K-3	Inappropriate Prescribing of Medications	(AGS)										
	(See Under Skills Competencies Development of Patient's Med. List)											

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KNOWLEDG	E COMPETENCIES		
Osteopathic	Manipulative Medicine	(OMS)	
GERI-K-48	Osteopathic Principles & Practices Related to Geriatrics	(OMS)	
GERI-K-49	Osteopathic Manipulative Methods	(OMS)	
KNOWLEDG	E COMPETENCIES		
Health Care	Financing	(AGS, OMS)	
GERI-K-66	Mechanisms and Implications (Medicare, Medicaid, Managed Care, Capitation)		
	E COMPETENCIES		
CLINICAL PR			
Knowledge,	Diagnosis, and Differential Diagnosis of Geriatric Syndromes and Conditions		
	Including Etiology	(AGS, AAMC, OMS)	
GERI-K-4	Depression	(AGS, AAMC 4, OMS)	
GERI-K-4.1	Dementia	(AGS, AAMC 4, OMS)	
GERI-K-4.2 GERI-K-8	Delirium	(AGS, AAMC 4, OMS) (AAMC8)	
ULIN-K-0	Develop an Evaluation and Non-Pharmacologic Management Plan for Agitated Demented or Delirious Patients (AAMC 8)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
GERI-K-32	Incontinence	(AGS, OMS)	
GERI-K-33	latrogenesis (Consequences of Hosp. & Bed Rest)	(AGS, OMS)	
GERI-K-12	Falls (AAMC 12 >65 Access For Falls Past Year)	AGS, AAMC 12, OMS)	
GERI-K-34	Osteoporosis	(AGS, OMS)	
GERI-K-9	Alterations Special Senses (Vision & Hearing)	AGS, AAMC 9, OMS)	
GERI-K-35	Failure to Thrive	(AGS, OMS)	
GERI-K-13	Immobility and Gait disturbances	(AGS,AAMC12,13,OMS)	
GERI-K-26	Pressure Ulcers (AAMC 26 Requires Examination of Skin)	(AGS,AAMC 26,OMS)	
GERI-K-36	Sleep Disorders		
GERI-K-18	Atypical Presentation of Disease	(AGS, AAMC 18, OMS)	
	For AAMC 18 Must Generate Differential Diagnosis Including		
GERI-K-18.1	Acute Coronary Syndrome		
GERI-K-18.2	·		
GERI-K-18.3	Urinary Tract Infection		
GERI-K-18.4	Acute Abdomen		
GERI-K-18.5	Pneumonia		

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concepts of (I) INTERN applicatio (A) ADVAI syntheses	Competency Levels: Level of mastery of the competency. Student will demonstrate knowledge & comprehension, and an ability to identify or skills; has only limited ability to perform the skills. Needs close supervision and instruction. IEDIATE Level of mastery of the competency. Student will demonstrate knowledge, comprehension and simple n. Can describe the skill and demonstrate moderate skill ability; still needs supervision and instruction. ICED Level of mastery of the competency. Student will demonstrate knowledge, comprehension, application, analysis, & evaluation. Can synthesize, critique, demonstrate, and explain the skill to others. Knowledge and skills are advanced s still an apprentice in need of supervision.	Self Directed Structure Case Review 1059	Demonstration 4 Demonstration	ARECIGIANISTICS ACCURATIONS AC	Stelt ASSESSMENT CHINE CL Stelt OSS CARD ON CHINE CL Strail GOUS	IB Gross Lab	Sim ist onmy
KNOWLEDG	E COMPETENCIES						
Knowledge,	diagnosis, and Differential Diagnosis of Diseases common to Older People						
GERI-K-37	Rheumatological Diseases	(AGS, OMS)					
GERI-K-38	Genito-Urological Diseases	(AGS, OMS)					
GERI-K-39	Neurological diseases	(AGS, OMS)					
GERI-K-40	Cardiovascular Diseases	(AGS, OMS)				\downarrow	
GERI-K-41	Endocrinological diseases	(AGS, OMS)				\downarrow	
GERI-K-42	Cancer of Various Organs	(AGS, OMS)					
GERI-K-43	Infections	(AGS, OMS)					
GERI-K-44	Renal diseases	(AGS, OMS)					
GERI-K-45	Gastroenterological Disorders	(AGS, OMS)					
GERI-K-46	Psychiatric Diseases	(AGS, OMS)					
GERI-K-47	Others (like Fractures, Amyloidosis)	(AGS, OMS)					
-							
	E COMPETENCIES						
Prevention				1 1	I	1	1
GERI-K-58	Primary Prevention (exercise, nutrition, psychosocial interventions to aid in independent living)	(AGS, OMS)					
GERI-K-59	Secondary Prevention (Age Appropriate Screening)	(AGS, OMS)					
GERI-K-60	Tertiary Prevention Strategies	(AGS, OMS)					
OLN-R-00		(A03, 0103)					
KNOWLEDG	E COMPETENCIES						
Psychosocia							
GERI-K-50	Normal Behavioral Late Life Changes	(AGS, OMS)					
GERI-K-51	Psychopathology	(AGS, OMS)					
GERI-K-52	Under-Reporting of Symptoms & Illness	(AGS, OMS)					
GERI-K-53	Sexuality & Aging	(AGS, OMS)				1 1	1
GERI-K-54	Elder Abuse & Neglect	(AGS, OMS)				1 1	1
GERI-K-55	Suicide	(AGS, OMS)					
GERI-K-11	Home Safety (AAMC11 Requires Home Safety Assessment with Recommendations)	(AGS, AAMC 11)					
GERI-K-56	Community Resources	(AGS, OMS)					
GERI-K-57	Adaptation to Care in Alternative Living Situations	(AGS, OMS)					
KNOWLEDO	E COMPETENCIES						
	es in Geriatric Care	(AGS, AAMC 14, OMC)					
GERI-K-14	Code Status (Must Be Able to Define and Differentiate)	(AAMC 14)					
GERI-K-14.1	Health Care Proxies (Must Be Able to Define and Differentiate)	(AAMC 14)					
GERI-K-14.2	Advance Directives						
GERI-K-61	Decision-Making Capacity	(AGS, OMS)					
GERI-K-62	Euthanasia, Assisted Suicide	(AGS, OMS)					
GERI-K-63	Health Care Rationing	(AGS, OMS)					
GERI-K-64	Pain Management	(AGS, AAMC, OMS)					

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KNOWLEDGE COMPETENCIES

GERI-K-65	End-of-Life Care	(AGS, AAMC, OMS)					
GERI-K-19	Palliative Care Based on Identification of Patient's Goals for Care	(AGS, AAMC, OMS)					
GERI-K-19.1	Pain Management	(AAMC 19)					
GERI-K-19.2	Management of Non-Pain Symptoms	(AAMC 19)					
	Identify Patient's and Family's	(AAMC 20)					
GERI-K-20	Psychological Needs	(AAMC 20)					
GERI-K-20.1	Social Needs	(AAMC 20)					
GERI-K-20.2	Spiritual Needs	(AAMC 20)					
GERI-K-21	Coordinate Care With An Appropraite Interdisciplinary Team	(AAMC 21)					
GERI-K-15	Identify When Factors Override Standard Recommendations for Tests	(AAMC 15)					
GERI-K-16	Identify When Factors Override Standard Recommendations for Treatment	(AAMC 16)					

KNOWLEDG	KNOWLEDGE COMPETENCIES												
Cultural Aspects of Aging (AGS, OMS)													
GERI-K-67	Ethnic Demography	(AGS, OMS)											
GERI-K-68	Heterogeneity of Minority Groups	(AGS, OMS)											
GERI-K-69	Disease Prevalence and Risk Factors	(AGS, OMS)											
GERI-K-70	Culturally Competent Medical Care	(AGS, OMS)											

KNOWLEDO	KNOWLEDGE COMPETENCIES											
Hospital Care												
GERI-K-22	Identify Potential Hazards of Hospitalization for All Older Adult Patients (AA	AMC 22)										
GERI-K-23	Explain Risks, Indications, Alternatives, and Contraindications for Indwelling (Foley) Catheter Use in (AA	AMC 23)										
	Older Adult Patients											
GERI-K-24	Explain Risks, Indications, Alternatives, and Contraindications for physical & Pharmacological (AA	AMC 24)										
	Restraint use											
GERI-K-25	Communicate Key Components of Safe Discharge Plan and Potential Sites for Discharge (AA	AMC 25)										

SKILLS COM	SKILLS COMPETENCIES												
Geriatric As	sessment	(AGS & AAMC)											
GERI-S-9	Physical Assessment and Exam	(AGS & AAMC 9)											
GERI-S-1	Osteopathic Structural Exam	(OMS)											
GERI-S-2	Mobility Assessment	(OMS)											
GERI-S-7	Cognitive Assessment	(AGS & AAMC 7)											
	Formulate a Differential diagnosis and Implement Initial Evaluation in a Patient Who Exhibits												
GERI-S-5	Dementia, Delirium, or Depression	(AAMC 5)											
GERI-S-6	In an Older Patient with Delirium, Initiate Diagnostic work-up, to Determine Etiology	(AAMC 6)											
GERI-S-4	Emotional Assessment	(AGS)											
GERI-S-8	Social Functioning Assessment	(AGS)											
GERI-S-9	Assessment of ADLs	(AGS, AAMC 9, OMS)											
GERI-S-9.1	Assessment of IADLs	(AGS, AAMC 9, OMS)											

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SKILLS CON	PETENCIES								
GERI-S-11	Pre-operative Assessment		(OMS)						
GERI-S-3	Document Patient's Complete Medication List (Prescri	bed & Over Counter)	(AAMC 3)						
Developme	nt of a Management Plan			· · ·					
GERI-S-10	Develop a Preliminary Management Plan for Patients I Adaptive Interventions and Coordination of Interdiscip rehabilitation, nutrition, and pharmacy.)	e e e e e e e e e e e e e e e e e e e	-						

Synthesis of the competencies represented in the following sources:

AGS The American Geriatrics Society Education Committee. Areas of Basic Competency for the Care of Older Patients for Medical and Osteopathic Schools.

http://www.americangeriatrics.org/education/competency.shtml. American Geriatrics Society . New York, NY.

AAMC The Association of American Medical Colleges. Geriatric Competencies for Medical Students. Recommendations of the July 2007 Geriatrics Consensus Conference.

http://ww.aamc.org/newsroom/presskits/competencies.pdf. The Association of American Medical Colleges. Washington DC.

OMS Gugliucci, Marilyn, Giovanic, Athina; Geriatrics Curricula for Undergraduate Medical Eduation in Osteopathic Medicine, in Guidelines for Gerontology and Geriatrics Programs 2008 Update. Programs 2008 Update. Association for Gerontology in Higher Education. Washington DC.

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David Farmer PhD, UNTHSC Reynolds GET-IT Program 08/24/2009 Revised 7/27/2010 to Replace (CIL) with Problem (PLM) and Mechanism (MLM) Based Learning Modules under Methods of Subject Delivery