IT’S GREAT TO BE BACK! AGS CELEBRATES BEING TOGETHER AT FIRST IN-PERSON MEETING SINCE 2019

There is no doubt that we all appreciated one common thing about this year’s Annual Scientific Meeting: the excitement and joy of being together again, in-person, for the first time in three years. Throughout the hallways, during breakfasts and networking events, plenaries, and other sessions, friends and colleagues caught up and shared time together, re-establishing connections disrupted by the pandemic and expressing gratitude for the support they received over the tough past two years. We appreciated that everyone followed the vaccine and mask mandate, a necessary measure to ensure #AGS22 was as safe as possible for us all, while we felt the energy and excitement of being back, sharing and learning from each other again in person. Members spent their time at the meeting taking advantage of one of the most valuable benefits of membership – access to the AGS’s community of extraordinary geriatric superstars!

The meeting kicked off on Thursday morning with the Members Business Meeting and remarks by Christine Bradway, PhD, CRNP, the Annual Scientific Meeting Chair, who offered a warm welcome and set the scene for the week. Mark Supiano, MD, AGSF reported on the financial status of the AGS before Annie Medina-Walpole, MD, AGSF, the outgoing Board Chair, talked about the important advocacy work AGS has initiated, including a We Say Gay Rally that members organized to protest Florida’s “Don’t Say Gay” legislation that went into law in March and is being proposed in over a dozen other states. Outgoing President Pete Hollmann, MD, AGSF, expressed gratitude for all the support he received as a “virtual” president, acknowledging the adaptability and leadership of his fellow Board members and other AGS leaders before introducing

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For our AGS staff who put so much time and energy into organizing the meeting, coming home is a bit of a relief. I am no different, particularly given that I am an introvert playing at being an extrovert during meeting week. My fellow introverts know how exhausting this can be. This year was no different, but I’ve been reflecting on a few things that lifted me up during #AGS22 and made playing an extrovert for a week a bit easier.

Before sharing my reflections, as expected COVID did infiltrate our meeting. So many of our attendees expressed appreciation for the mitigation strategies we put in place—requiring vaccination and masking—and we appreciate everyone’s efforts to keep each other safe. At five days out from the last day of #AGS22, 2.9% of our 2,100 attendees had reported testing positive with most reporting mild symptoms. As one attendee noted, “I am grateful for vaccines.” Please know that we are aware that some attendees may not have reported to us and that our rate might be higher. The AGS is committed to doing all that we can to provide a safe learning environment for future meetings and will continue to monitor COVID as we begin to plan for 2023.

Attending a national meeting is a personal decision that is based on an assessment of our own risk tolerance. Having had COVID this March, I know I’ll still be traveling and attending meetings but with a renewed devotion to masking up and staying up to date with all recommended vaccines (as befits someone who still has her childhood vaccine card — thanks Mom!).

COVID aside, #AGS22 reflected why our AGS community is so special. From amazing sessions to a rally against hate, to supporting our Health in Aging Foundation, to an awesome dance party, the AGS meeting was a time for our members to come together to celebrate each other, to laugh together, to mourn those we have lost, and to see old – and make new – friends. Some of us even found time to soak up the Florida sunshine and visit Disney World with our friends and families.

It is always wonderful to see all the hard work of our AGS Program and Research Committees pay off. The sessions they so carefully planned sparked conversations, ideas, and new collaborations – the energy and buzz at #AGS22 was palpable. Between symposia and abstract submissions, these two committees review over 1,000 potential presentations and stitch together a meeting that offers something for everyone. Add a little dash of joy at being together after far too long apart and you have a hearty dish that will nourish all of us until we meet again at #AGS23 in Long Beach, California.

I am inspired by the over 200 AGS members who made signs and stood up for love and for families on May 12th. Florida’s Parental Rights in Education Law (also known as the “Don’t Say Gay” bill) purports to be about preventing teaching sexual orientation and gender in kindergarten through third grade (K-3). Let’s be real, these concepts are not typical K-3 curriculum modules. Families, on the other hand, are so much a part of these formative years. There is something chilling about a law that puts teachers and school systems at risk for recognizing the diversity of the families that they serve. Imagine if little Sally draws herself with her two dads or little David includes his older brother who is becoming his older sister in his drawing of family.

The sad reality is that this law will harm loving families and that is not OK in my book. That is why I was so lifted up by our attendees who rallied with us and deeply touched by Reena Karani’s saying that AGS is “an organization that is always committed to fighting discrimination, systemic injustice, and bias.” A shout out to our members who are working to eliminate bias and discrimination and my deep gratitude to our AGS members who were not able to attend our rally but who have taken action in our advocacy center (cqrcengage.com/geriatrics/?0), and who contributed to freetosaygay.org, thetrevorproject.org, and/or sageusa.org. You inspire me every day. For more on our “We Say Gay” Rally and related actions, see page 1.

A standing ovation for our attendees and AGS members who support the AGS Health in Aging Foundation (HiAF)! We raised over $3,800 on site from sales of shirts and socks and over $6,300 was contributed through our meeting registration. Thank you not just on behalf of the HiAF board, but also on behalf of the trainees we supported to attend our meeting, present their research, meet with senior mentors, and meet other trainees from across the country. The seeds we plant at our meeting sprout in surprising ways with some trainees pursuing careers in geriatrics and others bringing a geriatrics lens to the work that they do. Regardless of where they land, they have joined us in our efforts to ensure that continued on page 5
MEET THE NEW AGS PRESIDENT
MICHAEL HARPER, MD, AGSF

Q. What are you looking forward to most about being AGS President this year?
A. AGS has a long and distinguished history of advocating for what’s right and for taking up causes that seek to make the lives of every older adult more healthy, safe, and happy. My two predecessors, Drs. Annie Medina-Walpole, and Peter Hollmann, along with our CEO, Nancy Lundebjerg and the AGS staff, have expertly guided our organization through two of the most tumultuous years in healthcare and civic life that most of us have ever experienced. The COVID-19 pandemic collided with the civil unrest that followed the death of George Floyd and later that year, AGS responded by embarking on a long-term, sustained effort to address the intersection of structural racism and ageism. That work is underway, and I am particularly looking forward to collaborating not only with other AGS leaders and staff, but with all of our members to achieve our aims. This initiative will help eliminate discrimination and other forms of bias from healthcare; ensure AGS educational programs and products address the diversity of older adults; and work towards meeting our aspirational goal of having all research published in JAGS and presented at the AGS Annual Scientific Meeting take full account of ethnicity, gender, disability, age, and sexual orientation in design, undertaking, and reporting by 2031. I’m under no illusion that this will not be easy and we will undoubtedly make mistakes along the way, but as my friend Dr. Medina-Walpole has said, “This is who we are.”

Q. What inspired you to become a geriatrician?
A. I started my internal medicine residency in 1991 having never met a geriatrician. My very first ward attending was a geriatrician, Dr. John Burton, and he asked me questions that I had never contemplated as a medical student. For example, “Why is Mr. M still in bed?” and “Why is Ms. R still getting IV fluids?” Until that time I had assumed that being in bed and getting IV fluids were part and parcel of any hospitalization. Over the next 3 years I was lucky that I got to work with and be taught by many amazing geriatricians including Drs. Thomas Finucane, William Greenough, Richard Bennett, Michele Bellantoni, William Russell, Jan Busby-Whitehead, and Michael Gloth. Each of them challenged my thinking and understanding of what it meant to care for older adults. I was also inspired by my patients. I always seemed to gravitate to my older patients. I loved hearing their stories of growing up in an era I had only read about in books or learned about in school. And they reminded me of my great-grandmother who with her eighth grade education was the wisest and kindest woman I’ve ever known.

Q. How do you think geriatrics has been impacted by COVID-19?
A. I think it will be years before we know the full impact that COVID-19 has had on geriatrics and older adults. We certainly know that older adults and particularly those from communities of color and in long-term care institutions were impacted the most in the early days of the pandemic. Unfortunately, the impact went beyond the higher risk of infection and severe illness. For example, we’ve learned a lot more about the negative effects of isolation and loneliness on older adults, and I have certainly seen this in my housecalls practice. We also learned that while telemedicine mitigated some healthcare access issues, it also increased the potential for worsening health disparities among those older adults who had no or limited access to the technology needed for video visits. We saw the disruption in chronic care. Many patients, with understandable fear of COVID-19 exposure, elected to postpone or avoid care for chronic issues like heart disease and diabetes.

Q. What advice would you give to young AGS members?
A. Say yes and get involved! The AGS has many ways for new and young members to engage with the Society. If you’re looking for mentorship, we have both an in-person mentoring program at the Annual Meeting as well as a virtual mentor match program jointly run with ADGAP. If you have a particular area of interest, for example in wound care or interprofessional education, then chances are we have a Special Interest Group (SIG) that will meet your needs. At my last count we had 37 SIGs and that’s not to mention our 10 Sections who represent AGS members from different professions including nursing, pharmacy, and social work. Visit https://www.americangeriatrics.org/about-us/leadership-and-staff/special-interest-groups-sections to learn more. I’d also encourage young members to apply for committee service and to submit your work for presentation at the Annual Scientific Meeting. And lastly, AGS has a very active online community called MyAGSOnline where members can connect and engage with one another virtually to share ideas and seek advice.

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FROM OUR PRESIDENT
MICHAEL HARPER, MD, AGSF

As I was reviewing speeches and schedules for the Annual Meeting—the AGS staff keeps the incoming President very busy!—I had trouble containing my own excitement about being back together. I am incredibly lucky to be a part of the AGS community of passionate and committed individuals. The energy was palpable as the meeting got underway and it was clear that others, like me, were overjoyed to be together again. Although we have the tools to engage remotely, nothing can replace the feeling of connection that comes from being in-person. And nothing can replace the dance party! One thing I’ve always appreciated about our meeting is seeing the next generation of health professionals with an interest in geriatrics. They give me hope and optimism for the future and this year was no different. Watching them reminded me of one of the things that makes our meeting great—how we welcome and provide a forum for people who are interested in potentially pursuing careers in geriatrics. If I had to sum up my feelings at the end of the meeting—-it’s great to be back! I hope everyone took advantage of the many networking sessions we held and made their own connections within our community. Whether attending one of our breakfasts, a special interest group meeting, or an evening reception, there were so many opportunities to be a part of the action and build the relationships that are a foundational part of being an AGS member. Our leaders were out in force this year and I hope they inspired some new—and not-so-new—members to get involved. Now more than ever, the AGS community is poised to realize its vision to enable us all to contribute to our communities and maintain our health, safety and independence as we age. I encourage every member to find what works for them and contribute in whatever way they can.

Over the course of the week I was impressed, as always, by the quality and breadth of work that was shared and celebrated. This year’s plenary paper presenters addressed topical issues such as prescribing practices in emergency rooms, early mobility programs, and models for evaluating mortality risk and dementia. I was honored to introduce Dr. Sharon Brangman, our 2022 Edward Henderson Lecturer, who focused on the importance of including older adults who have been historically excluded from or exploited in medical research in her Henderson State-of-the-Art lecture. It was remarkable to hear about Sharon’s work. Our Yoshikawa Award winner, Dr. Amy Kelley, presented her work that is focused on advancing the care of older adults in the context of serious illness, with an emphasis on advancing policies that align healthcare with patient needs and values.

I am forever grateful to my fellow Board members, including outgoing Board chair Annie Medina-Walpole and Pete Hollman, the outgoing AGS President and incoming Board Chair, for their leadership and guidance. We are fortunate that Annie will continue to co-lead our project focused on the intersection of structural racism and ageism with Lena Makaroun and Nancy Lundebjerg. Like me, Annie, Pete, and our AGS Board members are committed to ensuring that healthcare is free of discrimination and bias. For me, leaving the meeting is always a bit bittersweet. I am looking forward to seeing my family and at the same time wishing I had more time to spend with AGS members. It is so great to be together with like-minded people who are committed to supporting all of us as we age. I can’t even begin to tell you how you lift me up. You are all my geriatrics superheroes.
TWO WINNERS SHARE THE STATE AFFILIATE ACHIEVEMENT AWARD AT #AGS22

The AGS State Affiliate Achievement Award is given each year to a state affiliate that has shown success in one of five areas: membership recruitment/retention; innovative educational programming in geriatrics; public outreach; advocacy; and affiliate growth.

This year two affiliates, The Louisiana Geriatrics Society and The Oregon Geriatrics Society, were recognized with this award for their demonstrated exceptional performance in 2021.

Despite setbacks following Hurricanes Katrina and Rita, the effects of the COVID-19 pandemic, and a change in leadership, The Louisiana Geriatrics Society revitalized their organization. They successfully sustained their activities, identified new leadership, elected a new Board, and created a new website. They hosted their first event in several years: a webinar on pain management in older adults (PAIN COACH) presented by The University of Kentucky and the France Foundation, which was well attended. Board members and other volunteers continue to actively engage current and prospective members with a common goal of providing the highest quality of care and patient advocacy. They are a case study on how important a state affiliate is to its community.

The Oregon Geriatrics Society decided to take the challenges of the COVID-19 pandemic and turn it into an opportunity, raising the bar rather than continuing with business as usual. They started a Deprescribing Task Force that recommended developing an educational program on deprescribing. Partnering with Oregon Post-Acute & Long-Term Care (ORPALTC) and Oregon Chapter American College of Physicians (ORACP), they launched an innovative program, Tackling Prescription Overload: A 4-Part Series To Help You Design A Plan For Deprescribing. The planning committee worked closely with presenters for each session to establish objectives/goals, useful resources, and employed a case-based format that took into consideration how the content could keep learners engaged. The event received overwhelming positive feedback and the recorded sessions were used by both Oregon Health & Science University Family Practice Residency and the Ohio VA Medical Center to teach trainees. Their success helped promote the Oregon Geriatrics Society brand and helped attract interest from the state medical society.

AGS Welcomes New Class of Fellows

The AGS honored 20 leading health professionals who joined the newest class of AGS Fellows—a select group of experts recognized for their deep commitment to the AGS and to advancing high-quality, person-centered care for us all as we age.

- Martine Sanon, MD, AGSF
- Quratulain Syed, MD, AGSF
- Rosemary S. Browne, MD, AGSF
- Sara M. Bradley, MD, AGSF
- Anupam Chandra MD, CMD, AGSF
- Tsewang Ngodup, MD, AGSF
- Christine Kistler, MD, MASc, AGSF
- Jeannie K. Lee, PharmD, BCPS, BCGP, FASHP, AGSF
- Lee A. Jennings, MD, MSHS, AGSF
- Kourosh Arthur Philip Moshiri, MD, CMD, HMDC, FACP, FAACWS, AGSF
- Joshua Raymond, MD, MPH, AGSF
- Xiangrong Shao, MD, FACP, AGSF
- Andrea W. Schwartz, MD, MPH, AGSF
- Mark R Katlic, MD, MMM, FACS, AGSF
- Maryjo L. Cleveland, MD, AGSF
- Lobna Ali, MD, CMD, AGSF
- Jonny Macias Tejada, MD, AGSF
- Amy S. Kelley, MD, MSHS, AGSF
- Saeeduddin Khan, MD, FACP, CMD, AGSF
- Sangeeta A. Rana, MD, MPH, AGSF

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we are all supported as we age. Our future is indeed bright.

Finally, who doesn’t love a dance party? We are so grateful to Annie Medina-Walpole (our first ALL virtual AGS President and Board Chair) for bringing the joy and the dance to the party. And kudos to the in inventive dancers who strung together feather boas so we could have a limbo contest! For those of you who took #AGS20 shirts home, please don’t forget to wear them on Thursday, May 4, 2023 to commemorate “the Long Beach meeting that wasn’t.”

If I could sum the impact this meeting has on all of us, this introvert is ready for #AGS23 and I hope you are too!

*signature*
Dr. Mike Harper, MD, AGSF, our new AGS President. Dr. Harper acknowledged and thanked our outgoing Board and Committee Members from the last two years, taking the time to extend the in-person show of appreciation to leaders who served their time virtually and were thanked virtually at last year’s meeting. We wrapped up the morning by recognizing our 20 fellows who join the AGS’s prestigious community of individuals whose AGSF designation indicates their lifetime dedication to the AGS and geriatrics.

The members’ enthusiasm and commitment to working together to improve care for all of us as we age echoed throughout the meeting while students, residents, and fellows-in-training presented their research to each other, senior colleagues, and experts – work that will shape the future of geriatric care. Nearly 100 of these trainees were supported by travel stipends made possible through donations to the AGS Health in Aging Foundation (HealthinAging.org/donate). Many of these trainees were able to network and make connections while taking advantage of the meeting’s many learning opportunities for the first time in their careers. Their excitement for being together and in the same physical space was infectious in Atlantic Hall and at events such as the Fellows-in-Training breakfast, a networking event that brought together fellows with experienced geriatricians to discuss a dozen of relevant topics such as careers in academia, PACE, research opportunities, and more.

#AGS22 showcased excellence in geriatrics scholarship with the Plenary Paper presentations, beginning a day focused on informative sessions covering different topics throughout the day. Dr. Elizabeth Goldberg’s presentation on Enhancing the Quality of Prescribing Practices for Older Adults Discharged from the Emergency Department (EQUiPPED) showed that applying the medication safety program significantly decreased the potentially inappropriate medications prescription rate after implementation in the largest hospital system in Rhode Island, making a case for rolling it out more widely across the country and using its findings to shape national policy. Dr. Lynnae Edwards-Carolina presented her study comparing the effectiveness of nurse-driven Get Up and Go™ (GuG) early mobility protocol on hospitalization outcomes. She concluded that although there was no significant impact over a control group in length of hospital stay, discharge disposition, or incidence of delirium, there was an improvement in delirium scores and reduction in degree of functional decline. The final plenary paper, presented by W. James Deardorff, developed a model for evaluating the mortality risk of older adults with dementia living in community dwellings. The resulting risk predictions could help guide clinicians and patients in their discussions about disease management and advance care planning.

At a much-anticipated session on updates to the AGS Beers Criteria® for Potentially Inappropriate Medication Use in Older Adults, members of the expert panel presented proposed
changes that are currently under review and are due to be released later this year. Draft recommendations will be finalized and ready for public comment by late summer, with publication scheduled for the end of 2022.

This year’s Henderson State-of-the-Art Lecture, delivered by Dr. Sharon Brangman, MD, FACP, AGSF, discussed the importance of inclusive participation in aging research and put into context the challenge geriatricians face in making informed healthcare decisions for patients and families from groups who are excluded or underrepresented in clinical research trials. Dr. Brangman’s statistics about the current lack of diversity in research coupled with a brief history of the exploitation of Black participants in research studies was a sobering reminder of the work that still needs to be done to remove discrimination and bias from our healthcare system. She emphasized the importance of community engagement to improve participation rates but highlighted some of the faults in recruitment and retention efforts, stressing how fundamental, institutional change is the only way full, meaningful inclusivity will be achieved.

On Friday, Dr. Mike Harper opened the #AGS22 Awards Ceremony, celebrating excellence across the AGS in a wide array of categories and showcasing the outstanding work of our outstanding scholars and experts. Dr. Amy Kelley, MD, this year’s Thomas and Catherine Yoshikawa Award recipient, gave a memorable lecture about the complex layers of factors that impact the health and wellbeing of seriously ill older adults. Her study concluded that there are no conclusions, and her findings determined that much of the data that needs to be measured is not yet measured to determine the research, policy and workforce changes that need to be made to improve care. Her study did determine that personal factors such as functional decline, nearby relatives, incidence of chronic diseases, and ethnicity are significant determinants of treatment intensity and regional factors such as supply of resources and local practice patterns are also independently associated with treatment intensity an individual would receive. She discussed how these interwoven personal, family, and contextual factors need to be incorporated when crafting healthcare interventions or policy change that is equitable for all. With these challenges difficult to define and harder to resolve, she emphasized that a broad array of perspectives and a wide range of diverse voices need to be a part of the solution.

The 2022 Annual Scientific Meeting drew to a close with a feeling of optimism for the future. The AGS community made it through two challenging years and emerged stronger than ever, together. We have solidified our unwavering commitment to improving care for all of us as we age, and to advocate for the changes that will make sure no one is excluded because of background, ethnicity, race, or gender. We look forward to seeing you at the next beach dance party in Long Beach, CA for #AGS23 (May 4-6, 2023)!
Nascher/Manning Award
The AGS honored this year past AGS President Jerry C. Johnson, MD, AGSF, with the prestigious Nascher/Manning Award, given biannually at the AGS Annual Scientific Meeting. Having served as Chief of the Division of Geriatric Medicine at the University of Pennsylvania Perelman School of Medicine from 2001-2018, Dr. Johnson is now a Professor Emeritus at this institution and he remains committed to health professionals in training through teaching and mentorship. He joins an elite cadre of geriatrics healthcare professionals recognized with the Nascher/Manning Award since its inception in 1987.

“Dr. Johnson was one of the first awardees of a Certificate in Geriatrics Competency by the American Board of Internal Medicine in 1988. The Certificate of Added Qualification recognizes excellence among those Diplomates whose practice emphasizes care for older adults,” noted outgoing AGS President Peter Hollmann, MD, AGSF. “Dr. Johnson has devoted his professional life to studying, practicing, and teaching about the ailments that are common among the older population. Through his teaching and clinical care, he has influenced the careers of health professionals from every discipline. He has accelerated the two-way conversations between patients and provider institutions in every setting in which older adults receive care;” added Dr. Hollmann.

Dr. Johnson has been a leader in research and education with a special focus on delirium as well as in minority health and community participatory research methods. He was the principal investigator on numerous clinically focused grants as well as training grants. Most recently he served as the principal investigator on a Geriatric Workforce Enhancement Program. In addition to leading many innovative studies and programs, he has achieved prominence as a researcher, distinguished lecturer, and author on issues in geriatrics.

As a board member and the 2002-2003 past President of the American Geriatrics Society, Dr. Johnson was central to the development of the AGS Ethnogeriatrics Committee. He pioneered the development of the AGS resource Doorway Thoughts to help geriatrics healthcare professionals understand how the interaction between patients’ and providers’ cultures may affect communication about care. He continues to be an AGS leader, acting as Vice Chair of the AGS Health in Aging Foundation since 2010.

Dr. Johnson has been awarded multiple times for his work on behalf of older Americans. He has several “Best Doctor” distinctions and holds fellowships in leading societies, including the American Geriatrics Society, the American College of Physicians, and the Gerontological Society of America. He has been honored with many community service awards.

The Nascher/Manning Award celebrates a geriatrics pioneer like Dr. Johnson, whose work has been foundational for the AGS. Ignatz Leo Nascher, MD, was the first clinician to advocate for establishing a specialty focused on the care of older adults.

Edward Henderson State-of-the-Art Lecturer Award
This past May, the AGS celebrated Sharon A. Brangman, MD, FACP, AGSF as the recipient of the 2022 Edward Henderson Award for her research and clinical achievements in geriatrics, particularly for her work in Alzheimer’s disease, hospice and palliative medicine, depression, and end of life care. Dr. Brangman delivered the Society’s Henderson State-of-the-Art Lecture on the topic of diversity in study populations and community engagement at #AGS22.

Dr. Brangman is a Distinguished Service Professor and Chair of the Department of Geriatrics at SUNY Upstate Medical University in Syracuse, NY, and Director of the Upstate Center of Excellence for Alzheimer’s Disease (CEAD).

“Dr. Brangman has long been a prominent AGS leader. Currently, she is most focused on working toward a future of healthcare that is free of discrimination and bias,” noted outgoing AGS President Peter Hollmann, MD, AGSF. “She has helped us understand how destructive structural racism and ageism are, particularly within a health context, and through AGS, she works toward creating strategies our membership can use to counter these biases on behalf of older adults;” he adds.
Like the geriatrician for whom her award is named, Dr. Brangman has selflessly shared her talent and energy with the American Geriatrics Society (AGS). She was a member of the Board of Directors of the American Geriatrics Society for ten years and completed terms as Society President and Board Chair. She is also a past President of the Association of Directors of Geriatrics Academic Programs (ADGAP). Dr. Brangman currently serves as a member of the board of the Health in Aging Foundation.

Dr. Brangman received her undergraduate degree in biology from Syracuse University and in 1981 received her medical degree from SUNY Upstate Medical University in Syracuse. She completed residency training in internal medicine at Montefiore Medical Center in the Bronx, New York, where she also completed fellowship training in geriatric medicine. Dr. Brangman is board-certified in internal medicine and geriatric medicine as well as hospice and palliative care.

**David H. Solomon Memorial Public Service Award**

For only the second time in its near 80-year history, the AGS awarded one of its highest honors typically reserved for individuals to West Health, a family of nonprofit organizations dedicated to lowering healthcare costs to enable older adults to successfully age in place.

At #AGS22, West Health received the David H. Solomon Memorial Public Service Award for its visionary and trailblazing work to improve healthcare and increase its affordability for America’s aging population.

West Health, which includes the Gary and Mary West Foundation, West Health Institute, and West Health Policy Center, combines the power of philanthropy, research, policy, and advocacy to fuel new models of older adult-specific care, improve health and social outcomes for older people, and reduce healthcare costs.

Since 2006, West Health, through the Gary and Mary West Foundation, has awarded more than $223 million to create or support programs and research focused on aging and lowering healthcare costs. The organization is a driving force behind California’s first Master Plan for Aging, which is expected to be completed later this year, and the growth of geriatric emergency departments and home-based care throughout the nation.

The visionary group also continues to shine a spotlight on the skyrocketing cost of healthcare and call for reforms that lower prescription drug prices, increase price transparency, and expand value-based care.

Established by the AGS in 2002, the David H. Solomon Memorial Public Service Award celebrates the legacy of David H. Solomon, MD, AGSF, a renowned geriatrician committed to community service and advancing knowledge about the care of older individuals.

**Dennis W. Jahnigen Award**

At #AGS22, the AGS honored Mitchell T. Heflin, MD, MHS, with the 2022 Dennis W. Jahnigen Award for his dedication to advancing health professions education that enables health care providers in a variety of settings to care effectively for older adults.

Dr. Heflin, a tenured Professor of Medicine, is Vice Chief for Education in the Division of Geriatrics and Associate Dean for Interprofessional Education and Care at the Duke University Schools of Medicine and Nursing.

As a Principal Investigator on a prestigious Geriatric Workforce Enhancement Program (GWEP) grant from the Health Resources and Services Administration (HRSA), Dr. Heflin made lasting connections with many agencies that support older adults. In addition, he has mentored and supported scores of fellows and junior faculty from multiple specialties and professions who aspire to become advanced clinicians and educators.

“Heartfelt clinical skills, compassion, and commitment to service and outreach embody the spirit of the late Dr. Dennis W. Jahnigen, for whom this award is named.”

Dr. Heflin’s career in geriatrics has focused on development, deployment, and evaluation of education programs aimed at learners from a variety of health disciplines and professions, and the introduction of innovative models of care with a specific emphasis on community-based and perioperative care of frail older adults.

He served as Duke Medical School’s Geriatrics Fellowship Program Director for 11 years and, over the same span, directed the HRSA-funded Geriatrics Education Programs at Duke, including the Geriatric Workforce Enhancement Program. He served as the site director at Duke for the Donald W. Reynolds Foundation Program on Faculty Development to Advance Geriatrics Education (FD-AGE) from 2004-2016. Dr. Heflin also led the implementation of the Duke Perioperative Optimization of Senior Health (POSH) program and co-directed the VA Office of Academic Affiliations (OAA) funded Specialty Care
Education Center of Excellence for the VA POSH Program. As Associate Dean and Director of the Interprofessional Education and Care (IPEC) Center, Dr. Heflin works with educators and clinicians across campus in the design and implementation of educational programs aimed at improving our ability to use interprofessional collaborative practice to deliver safe, effective, person-centered care.

**Thomas and Catherine Yoshikawa Award and Lecture for Outstanding Scientific Achievement in Clinical Investigation**

At #AGS22, the 2022 Thomas and Catherine Yoshikawa Award for Outstanding Scientific Achievement in Clinical Investigation was awarded to **Amy S. Kelley, MD, MSHS**, Vice Chair of Health Policy and Faculty Development and Hermann Merkin Professor in Palliative Care in the Brookdale Department of Geriatrics and Palliative Medicine, and Senior Associate Dean for Gender Equity in Research Affairs at the Icahn School of Medicine at Mount Sinai. As a part of the conference program, Dr. Kelley delivered a lecture on Embracing Complexity: A Geriatrician’s Approach to Understanding Serious Illness.

“Dr. Kelley is an outstanding clinical researcher who embodies the spirit of the Thomas and Catherine Yoshikawa Award,” said outgoing AGS President Peter Hollmann, MD, AGSF. “She exhibits the core elements fundamental to the award as a geriatrics scholar who represents the early promise of the Yoshikawas’ own illustrious careers. She explores health problems for older adults and is actively involved in direct patient care.”

Dr. Kelley’s work focuses on advancing the care of older adults by improving care quality in the context of serious illness and promoting healthcare services and policies that help align treatment with patient needs and values.

She has received support from the National Palliative Care Research Center, Brookdale Leadership in Aging Fellowship, the NIA-sponsored Beeson Scholars Award, and holds current R01, P01 and K24 awards. She has also completed and disseminated the results of many patient-oriented research projects and has become a nationally visible contributor in the field of aging and palliative care research.

Dr. Kelley has introduced several crucial innovations to aging-focused health services research in areas of work previously completed primarily by medical economists. First, she has changed the paradigm of how we account for costs. In addition to only considering costs paid by Medicare or insurers, she has insisted on a patient-centered view of costs that considers out of pocket expenses and the enormous labor provided by family caregivers. Second, she has changed the paradigm of cost determinants, considering not just medical diagnoses, but geriatric measures including function and cognition. Third, her work has examined the benefits and burdens of medical expenditures by considering the higher cost and increase in care needs at the end of life.

Her approach has had multiplicative effects, as it has been replicated by dozens of Health and Retirement Study (HRS) and National Health and Aging Trends Study (NHATS) researchers, and because of her extensive and generous commitment to mentoring at Mount Sinai and nationally.

Through the course of her work, Dr. Kelley has mentored many students, fellows, and junior faculty, with an emphasis on women and investigators from populations underrepresented in science. Her mentees have disseminated their research through national presentations and peer-reviewed publications and received awards and grants for their scholarship. Dr. Kelley is a two-time honoree as “Clinician of the Year” from graduating fellows at the Icahn School of Medicine at Mt. Sinai.

**Arti Hurria Memorial Award for Emerging Investigators in Internal Medicine Who are Focused on the Care of Older Adults**

The AGS and the AGS Health in Aging Foundation conferred one of their newest honors on **Anil N. Makam, MD, MAS**, Assistant Professor of Medicine at the University of California San Francisco (UCSF) School of Medicine. Dr. Makam received the fifth Arti Hurria Memorial Award for Emerging Investigators in Internal Medicine Who are Focused on the Care of Older Adults at the AGS 2022 Annual Scientific Meeting.

“Across his body of work, Dr. Makam’s cutting-edge research is at the intersection of geriatrics, hospital medicine, and post-acute care, specifically focusing on the role of long-term acute care hospitals (LTACs),” noted outgoing AGS President Peter Hollmann, MD, AGSF. “Like the namesake for this award, Dr. Arti Hurria, his passion is evident in his work—in his case, for evidence-based medicine and critical appraisal of the clinical scientific literature.”

Dr. Makam completed his residency in Internal Medicine at UT Southwestern before his Primary Care Research
Fellowship at UCSF. His research interest stemmed from a simple observation that while Dallas had many long-term acute care hospitals (LTACs), San Francisco had very few—yet he cared for similarly sick and frail hospitalized older adults in both places. With funding from an NIA GEMSSTAR grant (2016-2018) and an NIA K23 Career Development Award (2016-2021), Dr. Makam applies health services research and epidemiological methods using Medicare claims, electronic health records data, and prospective observational cohort data to examine predictors and variation in LTAC use, comparative effectiveness of the LTAC model of care versus alternative care settings, and patterns of recovery for older adults transferred to LTACs. Most recently, with funding from the Donaghue Foundation, he is leading a national, multicenter cohort to study recovery after the most severe and prolonged illness from COVID-19 among older adults in LTACs.

Dr. Makam’s research has been published in leading medical journals, including the Journal of the American Geriatrics Society (JAGS), JAMA, JAMA Internal Medicine, Circulation, BMJ Quality & Safety, Journal of General Internal Medicine, and the Journal of Hospital Medicine. His work has been cited by the National Academy of Medicine and Medicare Payment Advisory Commission reports, and has been featured in prominent news outlets, including The New York Times. He has received several research awards, including the New Investigator Award in 2018 from the American Geriatrics Society. He is Co-Director of Academic Development & Research for the Division of Hospital Medicine at San Francisco General Hospital. Nationally, he is an Associate Editor for the Journal of Hospital Medicine and consults for the Institute for Clinical Economic Review.

Jeffrey H. Silverstein Memorial Award for Emerging Investigators in the Surgical and Related Medical Specialties

At #AGS22, Lauren Southerland, MD of Ohio State University’s Wexner Medical Center, was named this year’s recipient of the Jeffrey H. Silverstein Memorial Award for Emerging Investigators in the Surgical and Related Medical Specialties. The award is in recognition of Dr. Southerland’s pioneering multidisciplinary geriatric models of care for older adults who have emergency healthcare needs.

“Since its inception, the AGS has worked to advance the care of older adults and to ensure that all our practitioners are skilled in delivering the specialized health care older adults require as they age. In particular, emergency care for our patients has its own unique challenges,” said outgoing AGS President Peter Hollmann, MD, AGSF. “Pioneering leaders like Dr. Southerland are making great strides to ensure that our patients receive the treatment they need when they are taken to the ED.”

As an emergency medicine clinician-researcher, Dr. Southerland has been a strong advocate for improving the care of older adults throughout her medical career. She joined the faculty at OSU in 2013 after completing her fellowship in Geriatric Emergency Medicine at Beaumont Hospital in Michigan.

Since then, her research has focused on quality improvement, implementation science, and the incorporation of multidisciplinary geriatric care into the care of older adults with emergency healthcare needs. Dr. Southerland is the Principal Investigator of a NIA K23 grant evaluating the implementation and effectiveness of geriatric screening tools in the ED. She has 15 first-author and six last-author publications on topics in geriatrics, including a Tideswell Leadership in Aging scholarly project that evaluated a cost/reimbursement model for incorporating geriatricians or geriatric nurse practitioners, physical therapists, and pharmacists into the ED care of patients. Another recent article with significant impact in geriatric emergency medicine was a description of operational models of Geriatric EDs that reached the 97th percentile for citations and 92nd percentile for social media impact in the past year.

Dr. Southerland has previously presented her work at AGS meetings as well as SAEM, ACEP, GSA, and other national research forums. At #AGS22, she discussed an investigation of evaluation of capacity to consent practices in clinical trials in the ED.

Board-certified in emergency medicine, Dr. Southerland graduated from Duke University School of Medicine, where she subsequently served her internship and residency. She is the Director of Clinical Research for Emergency Medicine at The Ohio State University Wexner Medical Center. In addition, Dr. Southerland serves her community as the medical representative for the Franklin County interdisciplinary team that focuses on preventing elder abuse and neglect.

AGS Clinician of the Year

The AGS named Helen S. Kao, MD, as its 2022 Clinician of the Year. Dr. Kao serves as Medical Director of Clinical Innovations at Lumina Hospice & Palliative Care, and as Adjunct Professor at UCSF School of Medicine.

“Our 2022 Clinician of the Year, Dr. Helen Kao, is an exceptional physician who provides exemplary care through
many different care settings with a holistic, patient-centered focus,” said outgoing AGS President Peter Hollmann, MD, AGSF. “Dr. Kao’s colleagues have noted that the heart of her practice is preserving the rights and dignity of older adults and supporting their ability to lead lives that are as full and healthy as possible. Even further, she focuses on exploring new technology and other innovations to make care accessible to marginalized people,” added Dr. Hollmann.

Dr. Kao, a board-certified physician in internal medicine with certificates of added qualifications in geriatrics and hospice and palliative care, has created programs to serve older adults with advanced and terminal illnesses. She directed UCSF’s house calls program and was responsible for tripling its capacity to serve older adults. In her current role at Lumina Hospice and Palliative Care in Corvallis, Oregon, Dr. Kao continues to develop and provide palliative and geriatrics services by overseeing a growing palliative case management program.

Promoting diversity in geriatrics is an essential aspect of Dr. Kao’s career. As Chair of the Residential Ombudsman and Public Guardian Advisory Board (ROPGAP), she advocates for Oregonians with disabilities and helps elevate the caregiver workforce, which is predominantly made up of women and Black, Indigenous and people of color (BIPOC). In this role, Dr. Kao helps shape the advocacy priorities of the board, which focus on protecting the rights of people with dementia, mental health conditions, and intellectual or developmental disabilities.

Invited to present to scores of regional and national meetings and symposia, Dr. Kao has authored or co-authored textbooks on topics in geriatrics, and her articles have been published in leading peer-reviewed medical journals.

An AGS member since 2007, Dr. Kao received her BA cum laude from Harvard and her MD from the University of California, San Francisco School of Medicine, where she served residency in the Program in Residency Investigation Methods and Epidemiology (PRIME) Internal Medicine and fellowship in Geriatrics. She has been honored for professional excellence by receiving some 20 prestigious awards—including UCSF’s Council of Master Clinicians and most recently the Elizabeth Wessinger Award, recognizing people who make a difference for end-of-life care in Oregon and across the nation.

**Health in Aging Foundation New Investigator Awards**

The Health in Aging Foundation New Investigator Awards honor individuals whose original research reflects new insights in geriatrics and a commitment to the discipline’s role in academia. This year, four outstanding colleagues were recognized for their work.

**Jason Falvey, PT, DPT, PhD,** is a physical therapist, clinician-scientist, and board-certified geriatric clinical specialist who serves as Assistant Professor in the Department of Physical Therapy and Rehabilitation Science and the Department of Epidemiology and Public Health at the University of Maryland School of Medicine. Dr. Falvey’s research focuses on disparities in patient-centered outcomes, including healthy days at home, among important subgroups of older adults including those who are newly disabled, socio-economically disadvantaged, or cognitively impaired. His AGS Annual Meeting abstract entitled “Impact of Economic Disadvantage and Dementia on Aging in Place after Hip Fracture”, used 2010-2018 Medicare claims to evaluate the extent to which poverty magnifies the relationships between dementia and healthy days spent at home after hip fracture—attempting to identify unmet needs and potential policy gaps to address in future studies. An emerging leader at the intersection of rehabilitation and aging, Dr. Falvey is only the second physical therapist in the country funded by a Paul B. Beeson Emerging Leaders Career Development Award (K76) from the National Institute on Aging, among numerous other leadership activities. Dr. Falvey’s important work on socioeconomic disadvantage and aging in place among vulnerable older adult populations has the potential to substantially improve the care of older adults recovering from catastrophically disabling hospitalizations.

**Kenneth Lam, MD, MAS,** is a geriatrician, health services researcher, and Assistant Professor in the Division of Geriatrics at the University of California, San Francisco (UCSF). Dr. Lam’s research focuses on exploring the experience of disability in late life and its role in institutionalization. He is currently funded by a KL2 grant at UCSF, where he examines the role of supports, such as caregiving and equipment,
in countering the negative effects of disability among community-dwelling older adults. In his forthcoming work “Functional Impairments Before and After Institutionalization,” Dr. Lam aims to investigate and empirically describe changes in functional impairments and caregiving hours in the time leading up to an older person’s move into a nursing home or residential care facility. Distinguished by his exceptional fluency with concepts in epidemiology and biostatistics, Dr. Lam is also a respected clinician and the recipient of the UCSF MSTAR Best Clinical Mentor award. Dr. Lam is an active new member and contributor to the AGS and serves as a Junior Reviewer for the *Journal of the American Geriatrics Society*. Dr. Lam enthusiastically tackles fundamental yet challenging questions about aging in his research. He hopes to advance the methods and conceptual models used to study the risks and benefits of institutionalization versus aging in place and produce tools that can better help patients and caregivers navigate the often unfamiliar transition to nursing homes or residential care facilities.

**Jasmine Travers, PhD, MHS, RN, AGPCNP-BC,** is an Assistant Professor at New York University (NYU) Rory Meyers College of Nursing. Her research is focused on improving health outcomes and reducing health disparities experienced by disadvantaged older adults. Dr. Travers’ study, “The Paycheck Protection Program and Nursing Home Staffing,” investigated changes in nursing home staffing hours post-distribution of funding that was appropriated toward staffing from a US government economic relief program. Findings will inform future efforts to mitigate staffing shortages in nursing homes. Among the many outlets to which Dr. Travers contributes her expertise, she is a leading expert on the National Academies of Sciences, Engineering, and Medicine (NASEM) Quality of Care in Nursing Homes Consensus Study Committee. She along with other experts are examining how our nation delivers, finances, regulates, and measures the quality of nursing home care. Dr. Travers has maintained an active involvement since joining AGS through presentations of her research at the 2019, 2020, and 2021 AGS Annual Meetings, as well as her participation in the *Journal of the American Geriatrics Society (JAGS)* Junior Reviewer program.

**Scott Martin Vouri, PharmD, PhD,** is a clinically-trained, board-certified geriatric clinical pharmacist, pharmaco-epidemiologist, and health services researcher who serves as an Assistant Professor at the University of Florida College of Pharmacy. With a research focus on prescribing cascades (treatment of drug-induced adverse events with new, potentially unnecessary medication), Dr. Vouri has published over 60 peer-reviewed articles. Funded by the National Institute on Aging K08 Career Development Award, his work measures the downstream consequences of prescribing cascades and develops approaches for clinical intervention. His article, “Quantifying Incidence and Risk of Excessive Loop Diuretic Use Relative to Dihydropyridine Calcium Channel Blocker Dose: A Prescribing Cascade Evaluation,” aimed to quantify the excess prescribing of loop diuretics following the initiation of a DH-CCB by dose. Dr. Vouri is an active member of the AGS community, serving on the *JAGS* editorial board and as co-chair of the AGS Polypharmacy and Deprescribing SIG.

**Outstanding Mid-Career Clinician Educator of the Year Award**

The Outstanding Mid-Career Clinician Educator of the Year Award is given to a faculty member for impressive works in geriatrics education. The AGS is pleased this year to recognize **Dr. Ravi Ramaswamy, MD, AGSF** for his excellence as an educator committed to enhancing the student experience through competency-based curricula, classroom and small group learning, and objective learner assessments. An Associate Professor in the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai, he has served as content editor of POGOe, a Donald W. Reynolds Foundation-funded online repository of geriatrics educational materials and as tutor in the annual McMaster University Evidence-Based Clinical Practice workshops. Dr. Ramaswamy currently serves as the Assessment Lead for Aquifer Geriatrics, the AGS national online geriatrics curriculum for health professions students, and co-directs the Ambulatory Care-Geriatrics clerkship, a 6-week core clerkship for third year medical students at Mount Sinai, which utilizes the Geriatrics 5Ms as a framework to teach and
assess geriatrics skills. Previously a member of the AGS Ethnogeriatrics and Quality and Performance Measurement Committees, Dr. Ramaswamy was elected in 2020 to the AGS/ADGAP Education Committee, a group that works to promote geriatrics education for all trainees, students, and health professionals. In 2021, he was the recipient of the Building Trust and Equity in Internal Medicine Training grant, jointly funded by the ABIM, the ABIM Foundation, AAIM, ACP and Josiah Macy Jr. Foundation to raise medical students’ awareness about ageism. With consistently stellar learning evaluations and recognition at both the local and national levels, Dr. Ramaswamy’s demonstrated commitment to geriatrics education is celebrated by colleagues, students, and mentees.

Scientist-in-Training Research Award
The Scientist-in-Training Research Award is presented to a pre-doctoral candidate with a promising career as a geriatrics scientist. The AGS is pleased to present this award to Chan Mi Park, MD, a full-time MPH student at Harvard T.H. Chan School of Public Health. With a background in practicing family medicine and geriatrics, Dr. Park is pursuing a masters degree to become a clinical scientist with the knowledge and skills needed to solve clinical problems during care transitions of older adults. Her recent study, “Perioperative Gabapentin Use and Adverse Clinical Events in Older Adults After Major Surgery: A Retrospective Cohort Study,” found that postoperative gabapentin use, which is widely used for postoperative pain management, was associated with increased rates of delirium, antipsychotic use, and pneumonia, and highlights the need for careful risk-benefit assessment before prescribing. A demonstrated emerging clinical scientist, Dr. Park is currently investigating the effectiveness of CMS Transitional Care Management (TCM) service in reducing hospitalizations for frail and non-frail older adults using Medicare data.

Clinical Student Research Award
The Clinical Student Research Award is presented to students who have submitted exceptional research for presentation at the AGS Annual Scientific Meeting. Dallas Mindo-Panusis is our 2022 recipient for his submission, “Disparities in Advance Care Planning Among Older U.S. Immigrants in a Nationally Representative Sample.” Mr. Mindo-Panusis’s research investigates the disparities in advance care planning (ACP) experienced by US immigrants. The study found that ACP engagements were lower for older adult US immigrants compared to those born in the United States, particularly for those that recently immigrated. A recipient of the prestigious UCSF TL1 Pre-doctoral Training Grant to conduct aging research, Mr. Mindo-Panusis has demonstrated a deep commitment to studying and meeting the health needs of older immigrants.

Edward Henderson Student Award
The Edward Henderson Student Award is presented to a student pursuing a career in geriatrics with demonstrated excellence contributing to the field. The AGS is pleased to honor Justine Enns, a medical student at Johns Hopkins University School of Medicine, as this year’s recipient in recognition of her significant efforts in clinical research, academic excellence, and community service. Prior to starting medical school, Ms. Enns served over 200 hours at a local palliative care unit in Arizona, working closely with staff to provide direct patient care, and further volunteered in Montreal while a student at McGill University, working in the kitchen and delivering food for older adults in the surrounding community. Since that time, Ms. Enns has co-authored several articles published in peer-review journals, and was, most notably, published in the Journal of General Internal Medicine as first-author of the article, “Discontinuing Cancer Screening for Older Adults: a Comparison of Clinician Decision-Making for Breast, Colorectal, and Prostate Cancer Screenings.” Her research findings were presented at the AGS Annual Scientific Meeting in 2021.

Outstanding Junior Research Manuscript Award
The AGS Outstanding Junior Research Manuscript Award is presented to a junior investigator for an outstanding peer-reviewed article on a topic in geriatrics. Claire Ankuda, MD, MPH, MSc, has been honored this year for her work on “Family and Friend Perceptions of Quality of End-of-Life Care in Medicare Advantage vs Traditional Medicare,” published in the Journal of the American Medical Association Network Open in 2020. Dr. Ankuda’s
cross-sectional study of people who died while enrolled in Medicare found that friends and family of those in Medicare Advantage (MA) reported lower-quality end-of-life care compared with the family and friends of those enrolled in traditional Medicare. These important findings suggest that, given the rapid growth of Medicare Advantage, Medicare should take steps to ensure that MA plans are held accountable for quality of care at the end of life. The publication exemplifies Dr. Ankuda’s research interests at the intersection of geriatrics, palliative care, and health policy, and was recently cited in a Government Accountability Office Report to Congress on disenrollment from Medicare Advantage at the end of life. An Assistant Professor at the Icahn School of Medicine at Mount Sinai and funded by a 5-year National Institute on Aging Beeson K76 Award, Dr. Ankuda’s important contributions work toward her overarching career goal to improve Medicare policies to better support older adults with functional disabilities and serious illness.

Outstanding Junior Clinician Education Manuscript Award
The AGS Outstanding Junior Clinician Education Manuscript Award is presented to a junior investigator for an outstanding peer-reviewed article on a topic in geriatrics and medical education. The AGS is pleased this year to recognize Patricia G. Ng, MD, FACP, for her work on “Using the Jigsaw Teaching Method to Enhance Internal Medicine Residents’ Knowledge and Attitudes in Managing Geriatric Women’s Health” published in MedEdPortal: The AAMC Journal of Teaching and Learning Resources in October 2020. Despite studies showing that internal medicine residency program directors identify geriatric women’s health as an essential curriculum topic, a persistent gap in published women’s health curricula for IM residents exists. Through the study, Dr. Ng and her IM residency program performed a needs assessment, which revealed that the majority of residents were unsatisfied with current curricula, and most were not confident managing geriatric women’s health. Dr. Ng presents in the study a 2-hour geriatric women’s health jigsaw workshop that aims to increase categorical IM residents’ knowledge and confidence in addressing menopause, osteoporosis, urinary incontinence, and abnormal uterine bleeding. As Assistant Professor of Clinician Medicine at Stony Brook University School of Medicine, where she also serves as Associate Program Director/Primary Care Track Director of the Internal Residency Program, Dr. Ng aims to increase resident knowledge and confidence in managing women’s health conditions in the outpatient setting.

Outstanding Junior Clinician Educator of the Year Award
The AGS is pleased to present the 2022 Outstanding Junior Clinician Educator of the Year Award to Norka Quillatupa, MD, a passionate clinician and Assistant Clinical Professor at Kern Medical in Bakersfield, California. Dr. Quillatupa is responsible for clinical education for both Internal Medicine and Family Medicine residents, nurse practitioner students, and third-year medical students. Upon her arrival at Kern Medical, Dr. Quillatupa found that there was no existing outpatient geriatrics practice, so she set out to singlehandedly grow her geriatrics panel to include more than 150 patients. Further, Dr. Quillatupa developed a geriatrics curriculum based on the “5Ms” (Mind, Mobility, Medications, Multi-complexity, and Matters most), as well as an Objective Structured Clinical examination station for first year residents. In recognition of her deep commitment to geriatrics education, Dr. Quillatupa was awarded the “Unsung Hero Award” in March 2021 based on positive resident reviews during their experience in geriatrics. Dr. Quillatupa has a deep interest in ethnogeriatrics and providing culturally informed care and has presented two posters with medical students: “Cultural Background Influence on the Diagnosis of Dementia” and “Polypharmacy Management in Geriatrics Patients: A Case Report;” at the American Geriatrics Society Annual Meeting in 2021. In August 2020, Dr. Quillatupa addressed COVID-19 and the care of older adults in the Hispanic community on an episode of the podcast “Simplemente Medicina” (Simply Medicine). An active member of the AGS community, Dr. Quillatupa has served as a member of the review committee for the AGS/ADGAP COVID-19 Educational Toolkit, participated on multiple committees at Kern Medical such as the Pain Management and the End-of-Life Care Committees, and has volunteered as a mentor to junior members of the AGS to provide guidance to the new generation of geriatricians.

Outstanding Junior Investigator of the Year Award
Presented to early career investigators with a demonstrat- ed focus on geriatrics research, the Outstanding Junior Investigator of the Year Award this year honors Ariel Green, MD, MPH, PhD, a geriatrician and Associate Professor
of Medicine at Johns Hopkins University. Dr. Green’s research focuses on improving communication between older adults, family caregivers, and clinicians about unnecessary and potentially harmful interventions. As the most junior member of the AGS Clinical Practice and Models of Care Committee, Dr. Green was actively involved in writing the AGS Choosing Wisely® recommendations, which she presented during a plenary session at the AGS Annual Meeting in 2013. Her current research is evaluating the impact on patient and care partner outcomes of interventions to optimize prescribing for older adults with dementia. She has obtained a competitive grant as Principal Investigator from the NIA Impact Collaboratory to pilot a pragmatic, pharmacist-led deprescribing intervention in primary care for people living with dementia and their caregivers. Findings from Dr. Green’s work on communication about deprescribing also informed the development of educational materials for patients, caregivers, and clinicians that are the centerpiece of OPTIMIZE, a randomized clinical trial of a pragmatic deprescribing intervention for patients with dementia. Dr. Green’s research accomplishments led to her selection for the US Deprescribing Research Network’s Junior Investigator Intensive, and her receipt of a pilot award from the Network. In addition to her impressive body of work, including 32 peer-reviewed publications with 13 as first author, Dr. Green is an award-winning health journalist whose essays about geriatrics have been published in the Annals of Internal Medicine, The Washington Post, and The New York Times.

Choosing Wisely® Champion Award
The Choosing Wisely® Champions program helps expand the Choosing Wisely® campaign by highlighting stories of people whose leadership in choosing tests and treatments wisely has inspired others to promote high-quality, person-centered care. For the 2022 award, the AGS congratulates Lee A. Lindquist, MD, MPH, MBA, Chief of the Division of Geriatrics at the Northwestern University Feinberg School of Medicine. Dr. Lindquist has done extensive work on the dissemination of the Choosing Wisely® Geriatrics campaign by educating community-based geriatricians, internists, and family practitioners through talks and meetings. Dr. Lindquist reached over 3000 providers during virtual presentations and 700 providers during in-person talks in 2021, and published results of most commonly asked questions by providers during the sessions. Dr. Lindquist also identified through a national survey the gaps in real-world practice utilization of Choosing Wisely geriatrician/internists/family practitioners guidelines. She continues to promote the Choosing Wisely® program in her role on the EPIC HER Geriatrics Advisory Board (Verona, WI), where she advocates for Choosing Wisely® guidelines to be used as reference materials. Dr. Lindquist is a role model for colleagues, and the AGS applauds her for her work.

Meet the New AGS President continued from page 3

Q. How do you spend your free time?
A. As the father of two school-age boys, I spend a good bit of my free time at sporting events and shuttling them from one practice or game to another. We are also a family of devoted Golden State Warriors fans so if a Warriors game is on television, that’s almost certainly where you will find me.

AGS22 Presidential Poster Award Winners
The AGS presented awards to posters in 11 categories during the #AGS22 Awards Ceremony on Friday, May 13. Congratulations to the following winners:

- Case Series & Case Studies: Kanishk Deep Sharma
- Clinical Innovation & Quality Improvement: Vanessa Ogundipe
- Clinical Trials: Nicholas M. Pajewski
- Epidemiology: W. James Deardorff
- Ethics & Qualitative Research: Allison Schierer
- Geriatric Bioscience: Ramkumar Thiyagarajan
- Geriatric Education: Cheryl Ann Sadowski
- Geriatric Medicine in Other Specialties: Ahmed Ijaz Shah
- Geriatric Syndromes: Tiffany M. Driesse
- Health Services & Policy Research: Nancy L. Schoenborn
- Neurologic & Behavioral Science: by A. S. Yusuf
We Say Gay Rally continued from page 1

team of organizers included Ryan Chippendale and Meghan Young with AGS Board member Reena Karani and 2021 Annual Meeting Program Chair Joe Shega providing guidance at every step of the way. Our thanks also to our fabulous AV team from Cogent Communications who scoured up a megaphone and a very tall ladder for the official photographer with only 48-hours notice. So too, we appreciate outgoing Board Chair Annie Medina-Walpole for getting us all organized and standing in the right spot for our photo.

We rallied against the recently enacted Florida Parental Rights in Education Law (also referred to as the “Don’t Say Gay” Law) that prohibits classroom discussion of sexual orientation or gender identity in kindergarten through third grade (K-3). In his welcoming remarks, Mike Harper noted that “The AGS has long been committed to achieving its future vision of a society where all people are protected equally and treated fairly. When Colleen, Jessica, Anna, and Mariah came to us, the AGS Board was unanimous in wanting AGS to stand against discriminatory and harmful policies targeting LGBTQ+ individuals in Florida, Texas, Alabama, Utah, and other states.” In her remarks, Reena Karani reminded us that “AGS is a place where we can be who we are without fear of discrimination or bias—I am proud that so many came together to stand up against hate at the “We Say Gay” rally in Orlando and that AGS also put together a set of actions to demonstrate our continued commitment to the LGBTQ+ community. As a proud out woman of color, I am deeply moved by the support and passionate advocacy of allies and friends today. We are stronger together always.”

When planning our rally, we realized that we wanted to provide opportunities for all AGS members to take action and we invite you to call on your elected officials to oppose discriminatory laws and to enact polices that support all of us as we age – visit our Health in Aging Advocacy Center for more information on how you can get involved. We also identified three organizations that are supporting LGBTQ+ individuals through advocacy and programs and hope that you will consider making a contribution:

- **Free to Say Gay** is working on the ground in Florida against Governor Ron DeSantis’ “Don’t Say Gay” law to defend the rights of all students to have a healthy environment to learn and thrive and for all parents to know their families are included and respected.
- **SAGE USA** is a national advocacy and services organization that’s been looking out for LGBTQ+ older adults since 1978. SAGE offers housing, meals, wellness checks, a 24/7 national hotline, and programs for anyone in need of a social outlet, assistance, or caring voice. SAGE also advocates to advance aging policies that improve the lives of all LGBTQ+ older adults across the country so they can age with the dignity, community, and security they deserve.
- **The Trevor Project** is the world’s largest suicide prevention and crisis intervention organization for LGBTQ+ young people. The Trevor Project also provides programs, services, and advocacy.

![We Say Gay Rally photos]
I knew I wanted to be a geriatrician the first time I realized there was such a thing. I was in my second year of medical school when a tall, quiet, and rather unassuming doctor brought a patient to help demonstrate movement disorders in older patients. He and the patient were both amazing. I just could not get enough of this idea that a doctor could only take care of older patients. It was truly inspiring.

Now, like most geriatricians, I really came to this point much earlier in life though. I was fortunate to have been raised close to my grandparents, whom I adored. They were wonderfully kind, compassionate country folks who never met a stranger and often fed numerous friends and family on any given night. They worked hard, even into retirement years, but always had time for us grandkids. And we knew it. I have such fond memories of those times and also of the gaggle of “adopted” grandparents with whom I was blessed. These older adults were close family friends who lived in our small community and helped care for my brother and me when we were younger. They also had lasting impacts on both of our lives.

Given this immensely rich experience, how could I not be a geriatrician? In the classic flow through medical school rotations, I tinkered with the excitement of OB deliveries, the adrenaline of the ED, and the intrigue of infectious diseases, but I always quickly came back to geriatrics. It was simply meant to be. And when I had the opportunity as a fourth year student to rotate on geriatrics, it sealed the deal. I had found my home.

And just as I was meant to be a geriatrician, I was also meant to be a member of AGS. When I was discovering my love of geriatrics in residency, I found a medical society comprised entirely of professionals who care for older adults! How amazing was this? I felt like I was on top of the world when I joined AGS at the end of my residency. I was so excited to go into my fellowship as a “member” of this elite group of providers who shared my passion.

How could this get any better? I was convinced I had made it. This was the definition of success. When I landed my first job as an academic geriatrician hired to build a hospital program (my personal passion!), I discovered an even bigger connection with the society. I met colleagues who were having the same struggles I was: trying to secure program support, finding mentors for projects and grants, helping with teaching slides for sudden fill-in lectures, and developing handouts for families in need of more information about dementia. I found CME opportunities focused on just what I wanted to learn, board prep materials, white papers, and more.

And then I got hooked on the meetings. I met people who really, truly got me. People who think like I do, who have the same passion, commitment, and dedication to advancing the care of older adults as I do, and who love to talk about how we can make the healthcare system better for older adults everywhere. I’ve had the opportunity to write chapters and papers, work on projects and advance programs, start pilots, etc. because I met these amazing peers. And when I needed to shift jobs, I found mentors who helped guide me through the decision process and show me what a wide breadth the field of geriatrics has to offer.

I cannot imagine my career without AGS. It’s true. This group of wonderful professionals has enriched my career for the better. And I look forward to each annual meeting as a kind of family reunion sans cool shirts with family pictures, although maybe that is an idea for a future meeting. In the meantime, I think my wife will keep telling people in May that I’ll be out of town for “Geri-palooza.”
Safe Travel Tips for Older Adults

Before you board a plane, train, cruise, or get in your car for a vacation, be sure to check out these expert tips and recommendations from the American Geriatrics Society’s Health in Aging Foundation. Whether you are traveling overseas or just a short distance from home, it is important to plan ahead for your healthcare needs.

Find out if you need to update your vaccinations

If you are traveling overseas, you may need certain vaccinations before departing—in some cases, up to 6 weeks before you leave. Visit the Centers for Disease Control and Prevention’s (CDC) Travelers’ Health website https://wwwnc.cdc.gov/travel/page/travel-vaccines to learn what measures you and your fellow travelers may be required to follow when traveling abroad.

Talk to your healthcare provider

Explain your travel plans to your healthcare provider, and discuss any travel precautions you should take. Your provider may ask you to come in for a checkup or to get any necessary shots.

Ask when you should take your medications

If you take medications, and will be crossing time zones, ask your healthcare provider whether you should take your medicines at your usual time in your home time zone, or if you should switch to the local time zone. Also ask if any new foods you might eat while traveling could interact with your medications or health conditions.

Guard against deep-vein thrombosis (DVT)

Older adults run a higher-than-average risk of DVT, which happens when blood clots form in your veins and block blood flow, usually in your legs. Sitting still for a long time on an airplane, train, or car can contribute to DVT. But some research shows that wearing “compression stockings” can help prevent this dangerous condition. Also, taking frequent breaks to walk or exercise your legs during a long ride can help protect you from developing DVT. Check with your healthcare provider.
### Get it in writing

- **Make a list of all prescriptions, including over-the-counter medications and supplements you take**, including the dose, what time you take the medications, and what they are for. Ask your pharmacist or healthcare provider to help you create this list and ask them to review it for accuracy. The list should include both generic and brand drug names and the amount of each medication you need to take with you on your trip.

- **Ask your healthcare provider for a list of current medical conditions** you have and how they’re being treated.

- **Have your healthcare providers’ contact information** in writing as well as for emergency purposes.

Having all of this on paper will make it easier for you to get through customs, and easier to get replacement medications if you lose any while traveling. Make a copy of these lists. Carry one with you, and keep the other in your suitcase.

### Keep your medications in their original containers with labels

Do this with prescription and over-the-counter medicines, and supplements. This will also make your trip through customs easier.

### Carry your medications on the plane

Pack your medications in your carry-on bag to avoid loss or damage.

### Protect yourself from infection and dehydration

- **Wash your hands or use an alcohol-based hand sanitizer**, especially after spending time on a crowded plane, train, or bus, and before eating.

- **Use common sense when choosing what to eat and drink.** Avoid brushing your teeth with water that isn’t safe to drink. The CDC travel site [http://wwwn.cdc.gov/travel/](http://wwwn.cdc.gov/travel/) includes country-by-country information on illnesses you can get from food and water and how to avoid them.

- **Drink plenty of water when traveling, especially when going by plane.** The air inside planes is dry, so bring a large bottle of water with you and drink regularly even if you do not feel thirsty. Or ask for water every time the flight attendant offers a drink instead of soda or coffee, which can dry you out even more.