

AGS NEWS

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INSIDE

- 2 AGS 360°
- 4 Candid Camera at #AGS18
- 4 New Resources Advancing Geriatrics in Surgical & Medical Specialties
- 5 Meet the New AGS President
- 6 From Our President
- 7 Why I'm an AGS Member
- 13 AGS Cocare:Ortho
- 14 Congratulations to Our New AGS Fellows and Our Committee and Board Leaders
- 15 The 5 Ms of Geriatrics

FINDING INSPIRATION AT #AGS18

"Paying it forward to the next generation of learners."

"My Mama, Grandma, and Ganny."

"Amazing colleagues and patient stories."

"Fulfilling a need."

For the past several years, the AGS has opened its Annual Scientific Meeting with a central question for members and attendees to respond to on our graffiti wall. This year, we asked: "Who or what inspired you to pursue a career caring for older adults?" The diversity of responses we received—from those above to stories and photographs of mentors, colleagues, family members, and influential older adults—all share a common thread: The community found in geriatrics. It's no surprise, therefore, that the same sense of community drove much of the dynamism behind our 2018 Annual Scientific Meeting (#AGS18).

At the Members Business Meeting, #AGS18 opened with a video commemorating member dedication to quality care for us all as we age. We thanked outgoing Board and Committee members, as well as Debra Saliba, MD, MPH, AGSF, who led us as AGS President this past year. Dr. Saliba brought her presidential tenure to a close by welcoming Laurie Jacobs, MD, AGSF, to the helm of the Society as our new President. In her opening remarks, Dr. Jacobs discussed changes in geriatric care, and where our priorities lie for the year ahead. Dr. Jacobs also got to congratulate the latest cohort of AGS Fellows, who

continued on page 3

CONGRATULATIONS TO OUR 2018 AWARD RECIPIENTS

Annually, the AGS celebrates researchers, clinicians, educators, and trainees who have made outstanding contributions to the care of older people. Please join us in congratulating 2018's award recipients, who were honored at #AGS18.

Choosing Wisely® Champion

The *Choosing Wisely* Champions program helps expand the *Choosing Wisely* campaign by highlighting stories of clinicians whose leadership in choosing tests and treatments wisely has inspired others to promote high-quality, person-centered care. For the 2018 award, the AGS congratulates **Alina Sibley, APRN, BC**, a member of the Baystate Medical Center Geri-Pal interprofessional outpatient team.

Under Ms. Sibley's leadership, Baystate's Geri-Pal team has served more than 500 patients in the

continued on page 8

AGS 360° WITH NANCY E. LUNDEBJERG, MPA

It's always a bit jarring to land back in the AGS office after the Annual Scientific Meeting. The staff is pretty exhausted from all of the activity that leads up to the meeting, and then there's actually *staffing* the meeting. Our small staff pretty much does it all: They staff sessions, booths, our Committees, and the Board Meeting. They troubleshoot any and all issues. This year some of staff were even working on a big grant proposal during the meeting, while others were reviewing proposed CMS regulations with an eye to where we need to offer comments. And then there was the trial run of the #FordSuit to make sure we knew how it worked.



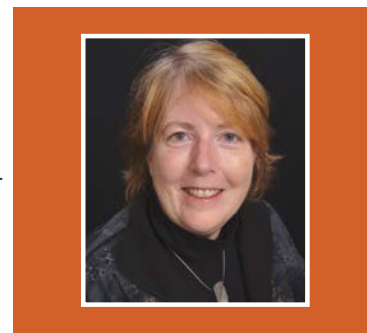
This year was my 20th AGS Annual Scientific Meeting, and so I was reflecting on how some things have changed over the years and how one thing remains the same. That one thing is the palpable joy in the air as members connect with old friends and make new ones. We debuted a new video during #AGS18 if you want to relive some of the joy

that comes with being with friends and colleagues near and far (It's available at AmericanGeriatrics.org). A big thank you to Sharon Brangman, Ellen Flaherty, Sunny Linnebur, Annie Medina-Walpole, Joe Ouslander, James Pacala, and Deb Saliba for providing the accompanying narrative about what AGS means to them.

As a staff, we return to the office both exhausted and energized by being among members, and we were #AGSProud of the response to our request for stories about what launched your careers focused on caring for older people as part of our #AGS18 graffiti wall (see p.1). As a family caregiver myself—and, more importantly, as someone who has benefitted from the support of many AGS members during that journey—it spoke volumes that so many of your photos and stories thanked parents, grandparents, friends, and mentors. These are the individuals behind our cutting-edge work, so it's great to see how our mission improving care for older people has such deep roots in what inspires our members.

As we were packing the graffiti wall up to ship back to New York, the AGS staff and I were struck by something that seemed to tie all your responses together: A commitment to honor those who inspired you by continuing to lead change and improve care. I hope you got to see much of what makes that possible at #AGS18.

For our 2,500+ attendees, our record-breaking 1,049 abstract submissions helped to highlight what the AGS and our members are doing across the country and around the world to lead geriatrics research, clinical practice, public policy, and public and professional education. Our plenary sessions touched on everything



from hypertension treatment to the thoughtful pros and cons of how health policy is evolving (with a nod to AGS expert insights, which are leading the way). And yes, even our social media (and our Twitter bingo contest) highlighted that we're thinking differently about how we discuss geriatrics (while also having fun—another value that sets geriatrics apart).

I'm confident we can and will keep that momentum going, especially for a special group of colleagues: The nearly 100 trainees who joined us at #AGS18 thanks to your generous support of the AGS Health in Aging Foundation. These colleagues are just embarking on (perhaps even just beginning to consider) careers in geriatrics. It's a testament to their potential that so many members contribute to the Foundation because they believe in the bright future trainees can have in geriatrics. And speaking of bright futures, there are some *big* changes headed to another branch of the Foundation: HealthinAging.org. I've been sworn to secrecy by the brain trust behind the big reveal, but suffice it to say your support (which remains essential; visit HealthinAgingFoundation.org/Donate to learn more) is going to make a big splash in the months ahead as we revitalize our role educating older people and those who care for them.

Looking forward to #AGS19 in Portland, OR—not just because I've never been but because I get to see all of you. ♦

now join ranks with hundreds of colleagues who have taken their dedication to the AGS and geriatrics to the next level (see p.14).

That dedication found a voice not only among our seasoned colleagues, but also among hundreds of students, residents, and fellows-in-training who joined us at #AGS18 to present research, learn from experts, and connect with each other regarding their shared passion for the care of older people. Nearly 100 of these trainees were supported by travel stipends made possible through member and attendee contributions to the AGS Health in Aging Foundation (HealthinAgingFoundation.org/donate). With more than 100 educational sessions and events making up the #AGS18 program, these trainees and all our meeting attendees certainly had their pick of learning opportunities.

New this year, a session on AGS CoCare: Ortho—the AGS’s newest platform for improving care for older adults by emphasizing geriatrics co-management (see p.13)—gave attendees an inside look at geriatrics-orthopedics collaboration in action. At the Plenary Paper Session, Rachel Ekaireb, BA; Cathleen Colon-Emeric, MD, MHS; and Kenneth Boockvar, MD, MS, delivered presentations on some of the latest and most highly sought after research at #AGS18 shaping the future of care for older adults. The “Hypertension in Older Adults” plenary session also drew large crowds, as Mark Supiano, MD, AGSF, and Jeff Williamson, MD, MHS, debated the challenges and opportunities inherent in the release of the 2017 guideline for the prevention, detection, evaluation, and management of high blood pressure in adults.

During the Henderson State-of-the-Art Lecture, 2018 Henderson Award recipient Bruce Leff, MD, AGSF, provided new models and ways of thinking about home-based care and the need to deliver effective primary care to homebound older individuals. Heather Whitson, MD, MHS, recipient of the 2018 Thomas and Catherine Yoshikawa Award for Outstanding Scientific Achievement for Clinical Investigation, discussed similar themes for improving care in her presentation on the comorbidities of vision and cognitive impairment and opportunities to improve patient outcomes.

In the highly anticipated Public Policy Lecture for 2018, attendees got a whirlwind tour of key AGS policy priorities and our work to address legislative and regulatory change in 2018 and 2019. Peter Hollmann, MD, AGSF, and Alan Lazaroff, MD, then took to the stage for a presidential-style debate regarding traditional fee-for-service versus capitation payment for primary care. Equally exciting was a plenary session covering anticipated changes for the AGS Updated 2018 Beers Criteria® for Potentially Inappropriate Medication Use in Older Adults.

Though it lasts for only three short days, the AGS Annual Scientific Meeting packs a powerful punch for forging and sustaining connections to improve care for us all as we age.

Of course, an AGS Annual Scientific Meeting wouldn’t be complete without a host of networking sessions, mentor meet-ups, and a member dance party to bring colleagues together. Though it lasts for only three short days, the AGS Annual Scientific Meeting packs a powerful punch for forging and sustaining connections to improve care for us all as we age. We hope those connections—and the inspiration drawn from everything at #AGS18, especially our graffiti wall—remain as strong as ever as we look toward Portland, OR, for #AGS19 (Mark your calendar for May 2-4, 2019!). ♦



CANDID CAMERA AT #AGS18



NEW RESOURCES CELEBRATE AGS ADVANCING GERIATRICS IN SURGICAL & MEDICAL SPECIALTIES

Since 1994, the AGS's Geriatrics-for-Specialists Initiative (GSI) has brought together organizations and leaders in the surgical and related medical specialties to increase awareness and knowledge in the care of older adults. Supported by The John A. Hartford Foundation, the GSI has provided funding for researchers and educators, and has continued to foster the development of best-practice guidelines focused on the care we all need as we age. One example of this work is the Dennis W. Jahnigen Career Development Scholars Program, supported by The John A. Hartford Foundation and the Atlantic Philanthropies. The Jahnigen

Award provided funding for junior researchers conducting research on geriatrics aspects of their specialty and, since 2011, has provided funding for professional development plans complimenting research projects funded by the National Institute on Aging and designed to encourage transitions to geriatrics research among early medical and surgical specialists. The AGS also supported similar efforts focused on internal medicine specialties with the Association of Specialty Professors at the Alliance for Academic Internal Medicine.

The GSI makes good on an AGS promise to ensure all healthcare professionals are better equipped to care

for us as we age. Now, decades of progress on both fronts are more accessible and widely available through two new resources: An open-access, virtual issue of the *Journal of the American Geriatrics Society (JAGS)* focused on geriatrics in surgical and medical specialties, and a related bundle of tools available on GeriatricsCareOnline.org.

The *JAGS* virtual journal issue offers a collection of articles addressing agenda-setting, workforce development, and education for improving older adult well-being across different specialties. It also tackles concrete efforts to advance care not only for

continued on next page

MEET THE NEW AGS PRESIDENT

Laurie G. Jacobs, MD, AGSF

At #AGS18, *AGS News* tracked down Laurie G. Jacobs, MD, AGSF, our new AGS President, to find out more about her career, her legacy as an AGS leader, and her commitment to the future of high-quality, person-centered care for older adults. Dr. Jacobs is Professor and Chair in the Department of Internal Medicine at the newly created Hackensack Meridian School of Medicine at Seton Hall. She also serves as Chair, Department of Internal Medicine, for Hackensack University Medical Center in NJ, part of Hackensack Meridian Health.

Q. What do you see as your mission as AGS President this year?

A. I look forward to getting to know all our members—a group of creative, caring, and inventive providers, researchers, educators, and advocates—and helping us work together to pursue our professional goals. What's more, I hope to support and sustain AGS's many activities advancing clinical practice, public policy, and public and professional education, while also working to enable our members to branch out and attract new providers to geriatrics and our individual practices and institutions. In a nutshell: I hope to sustain and grow our discipline.

To make that possible, I'm looking forward to participating with the AGS in larger conversations about strategies, education, training, reimbursement, and recognition for our field. Those conversations are happening in a variety of settings—but all settings where geriatrics has earned our seat at the table. It's an exciting prospect!

Q. What attracted you to geriatrics?

A. When I was doing my internship and residency in internal medicine at Montefiore Medical Center in the Bronx, NY, our clinics provided care for a significant number of people living with HIV—although we didn't fully understand what the disease was at the time (the early 1980s). But in the midst of all those young, very ill individuals, I also saw a growing cadre of overlooked older adults. I felt as if they were almost invisible

in our health system. Montefiore had a pioneering Division of Geriatrics led at the time by David Hamerman, MD, who became my mentor. I soon learned that geriatrics was my calling, and I accepted a Geriatrics Fellowship at Albert Einstein College of Medicine and Montefiore Medical Center.

Q. How have you seen the field evolve over the years?

A. I think geriatrics is still evolving as we speak! We're continually defining ourselves in terms of research, clinical care, public policy, and education (for us...and for older adults and caregivers). Importantly, the health systems where we operate are evolving, too, which creates new opportunities for us to change together. Our paradigm of looking at function and cognition—in addition to disease—is quite different than what we see in other specialties, and it holds real promise for changing how we think about care quality (as opposed to care quantity).

Q. What would you like our members to know about you?

A. I hope everyone knows that I'm really eager to hear from you and that I'm here to serve you. I've been tremendously fortunate across my career to have a stake in a variety of activities—in internal medicine, in health system management, in training and research. That's given me a depth of perspective I really value—and one I'm eager to share with our members who are working in and on so many of those frontiers. And to that end, I also think it's important to share that I

still see patients—I'd never give up my clinical practice. That's what makes me (and us) geriatrics healthcare professionals. You can't lead others without practicing what you preach!

Q. What do you do to relax?

A. I'm pretty high energy! To relax, I enjoy cooking and also going to the theater. But spending time with my children and family is probably what I treasure most. ♦

New Resources continued from page 4

specific conditions like delirium and frailty but also within specific settings like the emergency department. The GeriatricsCareOnline.org special topics bundle, *AGS Advancing Geriatrics in Surgical & Medical Specialties*, offers a companion to the JAGS virtual issue that includes an even broader array of best practice guidelines and resources.

With a focus on creating geriatrics champions within specialties, developing curricular materials, and advancing best-practice guidelines for the care of older people, the work of the GSI has been vital to building a workforce that embraces care for us all as we age. ♦

The Geriatrics-for-Specialists Initiative is committed to sharing geriatrics expertise as broadly as possible to support older adult health and well-being. To access the JAGS virtual issue, go to <http://bit.ly/GSI-JAGS> (case-sensitive). You can also visit GeriatricsCareOnline.org for the special-topic bundle of related tools.

FROM OUR PRESIDENT

LAURIE G. JACOBS, MD, AGSF



It's been an honor in itself to call so many of you colleagues and friends since I first joined the AGS in 1989. A lot's changed since then—in geriatrics, in health care, and perhaps especially in the countless communities where our care meets older people in need. What hasn't changed, however, is the dynamism, passion, and compassion of our professional society—and being part of that is an honor I've thought about often since becoming AGS President.

In part, celebrating that commitment means being able to look back to a rich history of improving care—care quality, care delivery, and care principles. And importantly, that history is as vibrant today as it was at

holding (determinedly) fast to what she calls our “true ‘North Star’”: Pursuing high-quality, person-centered care for all older adults. I'd be remiss if I didn't thank Deb for that leadership—just as I'd be remiss if I didn't thank all of you for helping make it possible. Your commitment not only to our principles but also to action on behalf of those principles has advanced everything from innovation in clinical care to our clear voice on public policy benefitting us all as we age.

Those are no small feats in 2018. We're living through one of the most pronounced shifts in health care to date. Our professions are moving from models grounded in acute, epi-

beyond geriatrics in the continuum of care. In doing so, we've continued to drive innovation for treatment and care delivery, working to measure outcomes that can ensure our best practices *in theory* can actually become best practices *in practice*.

That work can and must continue. And if pursuing high-quality, person-centered care for all older adults really is our “true ‘North Star,’” than I'll add to the continuity of our AGS leadership by suggesting some sign-posts that can get us where we need to be:

- We need to continue improving care and care delivery for older people.
- We need to commit to increasing patient and caregiver satisfaction with care.
- We need to reduce the cost of care (without shifting costs to patients!).
- And we need to improve our own satisfaction with the healthcare system—not only by rewarding geriatrics expertise adequately but also by promoting our specialty as a vibrant professional home for future colleagues.

We may not be at “true North” yet, but—together—I'm optimistic we're well on the road to the change we want to see.♦

Laurie G. Jacobs, MD, AGSF

We need to improve our own satisfaction with the healthcare system—not only by rewarding geriatrics expertise adequately but also by promoting our specialty as a vibrant professional home for future colleagues.



our founding, with the leadership of our immediate Past President, Debra Saliba, MD, MPH, AGSF, offering a compelling case-in-point.

Dr. Saliba took hold of the AGS's reigns at a time when health care—and even geriatrics—faced a great deal of uncertainty, particularly where the public policy impacting our work was concerned. But where others might shrink at such a challenge, Dr. Saliba helped our members and our AGS leaders maintain cool, collected heads—reinforcing the importance of

sodic, facility-based care to ones that value our long-term relationships with patients, our willingness to integrate technology into what we do, and our openness to rewarding the quality—rather than the quantity—of care we provide. Geriatrics isn't just rising to meet those challenges; we've been there from the start.

For years now, we've led the way identifying risks, gaps, and opportunities in the care of older people. We've worked to engage fellow providers and caregivers within but also

WHY I'M AN AGS MEMBER

TOCHUKWU C. ILOABUCHI, MD, MS, CMD

I grew up around older adults, and that stimulated my desire to learn more about their medical needs. As I studied medicine, my interest became a passion to specialize in geriatrics. During the course of my training and after I became a geriatrician, I realized how much work there is to be done in our field. I also realized that we have plenty of exciting opportunities to improve the care we provide to older adults.

Touching the lives of my patients and their families and making a positive difference for them is extremely rewarding. In my practice, being part of interdisciplinary teams and working with dedicated colleagues inspires me every single day. I also love the teaching opportunities my job offers—I enjoy working with different learners and I feel like I'm a teacher in doctor's clothing.

I've been an AGS member since 2010. I joined as a fellow and have been very active ever since. It seemed like a natural move to join—the AGS is the professional home for geriatrics healthcare professionals. Plus, I got a little push to join from my mentor and also the faculty of my fellowship program. The opportunities the AGS offers during our Annual Scientific Meetings to share work and network with other fellows was also enticing.

I happen to have a special interest in transitions of care. The AGS helps me connect and work with others who share that passion in the Transitions of Care Special Interest Group. Its members are subject-matter experts who meet to share their knowledge, ideas, and experience.

My AGS membership affords me plenty of opportunities for friendship, networking, collaboration, career development, education, and mentoring. I've made friends outside my own institution and I've worked on projects

with colleagues I've met through the AGS. What's more, I've been able to participate in activities that have contributed to my career growth, including attending career development courses, finding mentors outside my home institution, and participating in review panels.

I've only missed one AGS Annual Scientific Meeting in the eight years I've been an AGS member. To me, the meetings are like family reunions where I reconnect with friends and colleagues. I get rejuvenated and inspired from hearing about the growing recognition for our work and its relevance in health care. As we engage with each other and get to share what we're doing, I always learn something new or advance my knowledge. And I return to my institution with new ideas to share and implement.



Tochukwu C. Iloabuchi, MD, MS, CMD
Assistant Professor of Clinical Medicine
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University School of Medicine

Some meetings have been particularly memorable. In 2012, my abstract was selected for an oral presentation. As it happened, the meeting was in Seattle, where my wife's best friend and some of our family lived, so my family got to watch my presentation. That was pretty special.

In my off time, I enjoy sports, traveling, and spending time with my family and friends. I also love to make people laugh. If I have my way, I'll even do stand-up for friends and family! ♦

EWA CELEBRATES 10TH ANNIVERSARY OF *RETOOLING FOR AN AGING AMERICA*

The Eldercare Workforce Alliance (EWA)—co-convened by AGS CEO Nancy E. Lundebjerg, MPA—is celebrating the 10th anniversary of *Retooling for An Aging America: Building the Health Care Workforce*, a report from the National Academies of Sciences, Engineering, and Medicine (NASEM), formerly known as the Institute of Medicine (IOM).

This seminal report led to the establishment of EWA, a coalition of 31 organizations committed to developing practical solutions to strengthen the workforce we need as we age and to improve quality of care for older people. To recognize this anniversary over the next year, EWA will lead the #TogetherWeCare-Advancing a Well-Trained Workforce to Care for Us As We Age campaign to examine progress since the report and to share solutions for current and future workforce needs.

"The last decade has seen important strides forward in improving the workforce," said Amy York, Executive Director of EWA. "EWA will collaborate with an outstanding group of member contributors throughout the year to review how innovative solutions have been advanced to care for older Americans since the report was published a decade ago."

Each month EWA will share blogs, infographics, and other material related to important topics covered in the report. Visit the Alliance's newly redesigned website to access the material throughout the year at EldercareWorkforce.org/TogetherWeCare. ♦



community—making home visits, providing consultative ambulatory care, educating patients and families, and providing care coordination—with a pivotal focus on advanced care planning and person-centered treatment for people with dementia. The team also has facilitated training for nurses and other Baystate staff, which has helped to reduce the use of restraints, antipsychotics, and benzodiazepines—all critical priorities from the AGS *Choosing Wisely* recommendations. The AGS applauds Ms. Sibley and her team for these efforts.

Clinician of the Year

The AGS has named **J. Eugene Lammers, MD, MPH, FACP, AGSF**, 2018 Clinician of the Year. Dr. Lammers is Medical Director and Primary Care Physician at Mercy LIFE of Alabama, where he is part of an interdisciplinary team caring for 175 older adults.

Dr. Lammers has pioneered innovative approaches to care but also has worked ardently to ensure that all members of his healthcare teams are fully empowered and able to embrace their roles in promoting health and independence for older people.

Among many responsibilities, Dr. Lammers presently oversees quality of care for the Mercy LIFE of Alabama PACE (Program of All-inclusive Care for the Elderly), with its focus on helping chronically ill, under-resourced older individuals who are trying to stay in the community and avoid the nursing home. He is recognized nationally by his PACE peers, serving as a board member for Mercy LIFE-West Philadelphia and as a volunteer member of the Clinical Advisory Committee for the Care Kinesis PACE Pharmacy. He also has been a frequent collaborator for presentations at the National PACE Association.

Clinical Student Research Award

The Clinical Student Research Award is presented to undergraduate students who have submitted exceptional research for presentation at the AGS Annual Scientific Meeting. **Michael Liu**, a medical student at the University of Arizona and a Harvard University Master of Public Health candidate, is the recipient of this year's award. Mr. Liu's study presented at #AGS18, "Relationship Between Gait Speed and Survival Among Older Adults with Hematologic Malignancies," examines gait speed as a predictor of survival among 420 people 75-years-old and older living with blood cancers. Mr. Liu is a Medical Student Training in Aging Research (MSTAR) scholar. He is pursuing a research career in geriatric oncology through the Research in Aging Training Program at Brigham and Women's Hospital/Dana Farber Cancer Center in Massachusetts.

David H. Solomon Memorial Public Service Award

The AGS this year honors two of the field's most seasoned clinician-educators with one of our highest accolades. **John R. Buton, MD, AGSF**—Professor of Medicine and Co-Director of the Johns Hopkins Geriatrics Workforce Enhancement Program (GWEP) in Maryland—and **George W. Drach, MD, AGSF**—Emeritus Professor of Surgery at the University of Pennsylvania and the University of Arizona—were recognized for decades of commitment to community service and geriatrics education with the 2018 David H. Solomon Public Service Award.



With research interests in models of care, geriatric syndromes, and best practices for engaging more emerging health professionals in geriatrics expertise, Dr. Burton has led geriatrics education at Johns Hopkins for more than three decades. Across Dr. Burton's tenure, Johns Hopkins has launched a host of clinical programs benefitting older adults, including Johns Hopkins Home-Based Medicine, Hospital at Home, PACE, and the Orthopedic-Geriatric Medicine Hip Fracture Service. And while Dr. Burton has helped to accelerate the depth and breadth of geriatrics expertise at Johns Hopkins, he is also known for his role co-directing a program funded for nearly 25 years by The John A. Hartford Foundation. The GSI has helped develop educational programs and researcher career development awards, and has worked with specialty organizations to encourage geriatrics expertise for all physicians.

A passion for ensuring all health professionals are skilled in caring for older adults has also driven the work of Dr. Drach. Inspired by his own parents' struggles with geriatric care, Dr. George Drach worked to spread the greater awareness necessary in geriatric surgery. He specialized in urology after learning about it in the Navy in 1964, and later as Chief of Urology at the University of Arizona focused initially on the treatment of kidney stones. Chosen to lead

the U.S. Food and Drug Administration trials on the lithotripter, which would transform kidney stone treatment, he became known as the “Father of American Lithotripsy.” Dr. Drach also began working with the American Urological Association as a representative to the AGS and its GSI in 1995. In addition to hundreds of journal articles, book chapters, and books he has authored, Dr. Drach recently co-edited a *Primer of Geriatric Urology*, now in its second edition.

Dennis W. Jahnigen Memorial Award

Jane Potter, MD, AGSF, Chief in the Division of Geriatrics at the University of Nebraska Medical Center (UNMC), is the recipient of the 2018 Dennis W. Jahnigen Award celebrating work to train more health professionals in the care we all need as we age.

A dynamic force driving geriatrics education, Dr. Potter has not only led medical education at UNMC but also has expanded the scope of her work to lead national efforts aimed at increasing the prestige and prominence of geriatrics. Dr. Potter is a co-Principal Investigator for the AGS’s GWEP Coordinating Center—a strategic resource supported by The John A. Hartford Foundation for 44 organizations in 29 states working through the only federal program focused on increasing the number of healthcare professionals trained to care for older adults.

Dr. Potter has led several other impactful education programs through the Donald W. Reynolds Foundation and the Health Resources & Services Administration, including the Geriatric Medicine and Geriatric Dentistry Fellowship Program and the Nebraska Geriatric Education Center. Now the Neumann M. & Mildred E. Harris Professor of Geriatrics and Gerontology in Internal Medicine, Dr. Potter is a past AGS President and Board Chair and Deputy Director for the AGS GSI. Across her career, Dr. Potter has published numerous research articles and book chapters, and has worked for the AGS on its educational content, including *Geriatrics at Your Fingertips* and the *Geriatrics Review Syllabus*.

Edward Henderson Award

Bruce Leff, MD, AGSF, a Professor of Medicine and Director, Center for Transformative Geriatric Research, at Johns Hopkins Medicine and the Johns Hopkins Bloomberg School of Public Health, delivered the prestigious Henderson State-of-the-Art Lecture at #AGS18. Dr. Leff’s lecture, “Look Homeward, Medicine!” focused on our growing population of home-bound older adults, describing the spectrum of home-based medical care services and innovative models changing both where and how we age.

An internationally recognized leader and researcher on novel models of care, Dr. Leff’s research explores

not only where care takes place but also how that care can impact quality of life and well-being, particularly for homebound older adults. With a strong interest in the intersection between health care and health policy, Dr. Leff has served as a Health and Aging Policy Fellow with the American Political Science Association and as a technical expert for a range of panels brought together by the Centers for Medicare & Medicaid Services to better examine geriatrics and home health care. In these capacities, Dr. Leff has advanced much of what makes geriatrics a leading field for the future of care—from clinical practice guideline development to the evaluation and dissemination of new approaches to implementing geriatrics expertise.

Edward Henderson Student Award

The Edward Henderson Student Award is presented to an exceptional student pursuing a career in geriatrics. **Sonia Marcello**, a second-year medical student at the University of New England (UNE) College of Osteopathic Medicine in Maine, was honored this year for her extensive work across geriatrics education, research, and local community service. In her first year as a medical student, Ms. Marcello directed community outreach efforts for her school’s AGS Student Chapter, coordinating fundraisers for the Hospice of Southern Maine and organizing a coat drive for older adults. As part of UNE’s Learning by Living program, Ms. Marcello completed a two-week immersive experience living the life of an older resident. She also completed a 48-hour hospice home immersion focused on providing patient and post-mortem care as well as family support. A Certified Nursing Assistant at age 19, Ms. Marcello came to medical school with a wealth of experience caring for older adults and considers the immersion projects life-changing in a way that will impact her interactions with older adults and caregivers.

Humana Value-Based Care Research Award

With support from Humana Inc., one of the nation’s leading health and well-being companies, the AGS awarded the inaugural Humana Value-Based Care Research Awards to **Austin J. Hilt, MPH**, a medical student at Northeast Ohio Medical University, and **Morteza Komeylian, MD**, a Clinician Fellow at the University of Texas Medical Branch at Galveston.

Working with colleagues from the Division of Aging at Brigham and Women’s Hospital in Boston, Mr. Hilt explored the impact of social vulnerability on readmission rates for hospitalized older individuals. A link between the two is important for health professionals to understand, since personal relationships, social supports, social engagement, and socioeconomics all play a role in overall wellbeing as

we age, though few of these characteristics have been evaluated from a clinical perspective. Surprisingly, people with the highest social vulnerability scores in Mr. Hilt's assessment also had the lowest risk of returning to the hospital or dying. These findings suggest that more "average" patients, a group that can easily be overlooked, may benefit from increased attention in discharge planning.

Dr. Komeylian's study, "Isolated Hip Fracture Process Improvement at a Tertiary-Care Medical Center," explored ways to improve outcomes for one of the most serious and costly challenges older adults face: hip fractures following a fall. Dr. Komeylian and his colleagues looked at a specific inter-professional process for people receiving care from a coordinated group of specially trained experts. This team approach helped increase efficiency in getting patients into surgery within 48 hours while also reducing lengths of stay and in-hospital mortality. According to Dr. Komeylian and his team, the program holds promise for expanding targeted interventions to further improve care.

Jeffery H. Silverstein Memorial Award

Advancing care for older people across health specialties, the AGS and the AGS Health in Aging Foundation this year announced that **Tony Rosen, MD, MPH**—Assistant Professor of Medicine at Weill Cornell Medicine and Attending Emergency Physician at New York Cornell Medical Center—would receive the 2018 Jeffrey H. Silverstein Memorial Award for Emerging Investigators in the Surgical and Related Medical Specialties.

For his presentation at #AGS18, Dr. Rosen and colleagues evaluated more than 100 programs designed to identify, address, or prevent the mistreatment of older individuals. According to Dr. Rosen's evaluation, most programs focus on raising awareness and public education, as well as developing inter-professional healthcare teams equipped to confront the challenges of abuse. Importantly, Dr. Rosen and his colleagues note that many such programs hold promise for helping resource-constrained communities.

Nascher/Manning Award

The AGS this year honored not one but two pioneers of geriatrics expertise with the prestigious Nascher/Manning Award given biannually at the AGS Annual Scientific Meeting. **William Applegate, MD, MPH, MACP, AGSF**—Editor-in-Chief of the *Journal of the American Geriatrics Society (JAGS)* and a renowned clinician-educator at Wake Forest Health and the Wake Forest School of Medicine—and **Thomas Edes, MD, MS**—Executive Director of Geriatrics & Extended Care Operations for the U.S. Department of Veterans Affairs (VA)—now join a cadre

of less than 20 geriatrics healthcare professionals recognized with the Nascher/Manning Award since its inception in 1987.

Dr. Applegate has long been instrumental in leading change and innovation, particularly at the AGS. An AGS member since 1984 and a former Society President, Dr. Applegate has twice anchored *JAGS* as Editor-in-Chief, having returned most recently in 2016 following an earlier tenure from 1993 through 2000. In the interim, Dr. Applegate served as Chairperson of Internal Medicine and then Dean at the Wake Forest School of Medicine, as well as President of Wake Forest University Health Sciences.

That same prowess is matched by the impressive legacy of Dr. Edes. In his current work with the VA, Dr. Edes has national responsibility for a range of geriatrics and extended-care services at more than 1,200 health facilities that provide care for more than 9 million veterans. Since 2000, Dr. Edes has played a pivotal role in quadrupling access to home-based primary care for veterans with serious chronic disabling conditions who are too sick to come to clinic, including more than 15,000 veterans each day who reside in rural areas or tribal lands. During this time, Dr. Edes took the VA Medical Foster Home concept from a one-site pilot to a nationally acclaimed program now in 43 states. Dr. Edes also garnered the support of Congress to establish the first VA budget allocation for hospice care, which led to palliative care teams in every VA medical center across the U.S.

New Investigator Awards

The 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 colleagues were recognized for their work.

Lina Ma, MD, PhD, is a research fellow in the Division of Geriatric Medicine and Gerontology at Johns Hopkins University and Associate Chief Physician in the Department of Geriatrics at Xuanwu Hospital of Capital Medical University in Beijing. She has 13 years of research experience in frailty, cognitive impairment, and aging. Dr. Ma is a principal investigator on various research grants funded through the National Natural Science Foundation of China.

Anil Makam, MD, MAS, is an Assistant Professor in the Divisions of General Internal Medicine and Outcomes and Health Services Research at the University of Texas Southwestern Medical Center. His current research explores the impact of post-acute care on clinical and rehabilitation outcomes among hospitalized older adults recovering from acute illness.

Brienne Miner, MD, MHS, is an internist with subspecialty training in geriatrics and sleep medicine. Dr. Miner is a clinical instructor in the Section of Geriatrics at Yale University School of Medicine. A Butler-Williams and Yale Pepper Scholar, Dr. Miner's work focuses on dyspnea and insomnia. In addition to clinical training in geriatrics and sleep medicine, she completed a postdoctoral fellowship in Clinical Epidemiology and Aging-Related Research.

Victoria Tang, MD, MAS, is an early-career clinician-researcher at UCSF. Dedicated to a career at the crossroads of geriatrics and surgery, Dr. Tang hopes to improve care planning and outcomes in the growing population of older adults undergoing surgery. She has published 11 peer-reviewed articles on topics ranging from hospice referral utilization to functional recovery after hip fracture.

Outstanding Junior Clinician Education Manuscript Award

The Outstanding Junior Clinician Education Manuscript Award is given to a junior faculty member who has been first-author on an important peer-reviewed clinical education article published in a scientific journal. This year, the AGS congratulates **Rebecca Brown, MD, MPH**, for the study "Good Cop, Better Cop: Evaluation of a Geriatrics Training Program for Police," published in *JAGS*. In this study, Dr. Brown and co-investigators developed, implemented, and evaluated a training program in aging-related health for police officers, who increasingly serve as first responders to age-related health incidents. The results suggest that a brief training in aging-related health significantly increased police officers' self-reported knowledge and skills, showing that clinicians have an important opportunity to help enhance safe and effective community policing for older adults.

Outstanding Junior Clinician Educator of the Year Award

The AGS is pleased to present the 2018 Outstanding Junior Clinician Educator of the Year Award to **Andrea Wershof Schwartz, MD, MPH**, Instructor of Medicine at Harvard Medical School (HMS), Staff Physician at the VA Boston Healthcare System, and Educator in the VA's New England Geriatrics Research Education and Clinical Center (GRECC). As Site Director of VA Geriatrics for the Harvard Multicampus Geriatrics Fellowship Program, Dr. Schwartz introduced an innovative medical education curriculum into the fellowship, where she was awarded Outstanding Mentor of the Year in 2016. As a 2017-2018 HMS Academy Medical Education Fellow, Dr. Schwartz is leading the development and integration of a longitudinal geriatrics curriculum in the new Pathways curriculum at

HMS. Dr. Schwartz is a sought-after mentor and teacher for geriatric medicine fellows and internal medicine residents from Brigham and Women's Hospital, and leads geriatric educational sessions for interdisciplinary trainees.

Outstanding Junior Investigator of the Year Award

Presented to junior investigators with a demonstrated focus on geriatrics research, the Outstanding Junior Investigator of the Year Award recognizes a record of academic accomplishments. Our 2018 awardee—**John Newman, MD, PhD**—is Assistant Professor at the Buck Institute for Research on Aging, Assistant Adjunct Professor of Geriatrics at UCSF; and Staff Physician at the San Francisco VA Medical Center. A Beeson Scholar and 2015 recipient of an AGS New Investigator Award, Dr. Newman has contributed to the field of geriatrics through his innovative research linking a ketogenic diet to reduced mortality and improved cognitive function in aging mice. Dr. Newman plans to translate these findings into human research studies by identifying and testing ketomimetic agents, with an eye toward developing translational therapies for older adults with multiple medical conditions.

Outstanding Junior Research Manuscript Award

The Outstanding Junior Research Manuscript Award is presented to a junior investigator for an outstanding peer-reviewed geriatrics research article. **Benjamin Han, MD, MPH**, has been honored this year for his work on "Effect of Statin Treatment vs. Usual Care on Primary Cardiovascular Prevention Among Older Adults," published in *JAMA Internal Medicine*. Dr. Han's study was a sub-analysis of older adults who received statin treatment for primary prevention in the Lipid-Lowering Trial component of the Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial. Dr. Han and colleagues concluded that no benefit was found when a statin was given to older adults for primary prevention, and that statin treatment for older people should be individualized, especially for adults 75-years-of-age and older.

Outstanding Mid-Career Clinician Educator of the Year Award

The Outstanding Mid-Career Clinician Educator of the Year Award is given to a junior faculty member for an impressive body of work in geriatrics education. The AGS is pleased this year to recognize **Amit Shah, MD, FACP, AGSF**, for his work as a mentor, attentive clinician, and innovator developing high-quality online modules that provide a geriatrics curriculum to learners around the world. Dr. Shah spearheaded the development of web-GEMS (web-based Geriatric Education Modules,

now known as Aquifer Geriatrics), the AGS's national web-based geriatrics curriculum for medical, physician assistant, and nurse practitioner trainees. Currently Assistant Professor of Medicine and Associate Dean for Faculty Affairs at the Mayo Clinic School of Medicine in Arizona, Dr. Shah leads the school's longitudinal geriatrics curriculum and co-directs the internal medicine residency continuity clinic.

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 2018 Scientist-in-Training Research Award was presented to **Joshua Niznik, PharmD**, a licensed pharmacist pursuing doctoral studies in pharmaceutical sciences with a focus on pharmaceutical outcomes and policy research at the University of Pittsburgh. Dr. Niznik has developed a unique combination of skills through clinical pharmacy practice and the analysis of large administrative databases using statistical methods and epidemiologic study designs. His research is focused on improving the efficiency, quality, and safety of medication in health systems, particularly in nursing homes. Dr. Niznik's study, "Validating the MDS Mortality Risk Index in Older Adult Veterans Using MDS v3.0," was part of an even larger project examining variation in de-prescribing for common chronic conditions and the association of de-prescribing with clinical outcomes among VA nursing home residents.

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

The AGS and the AGS Health in Aging Foundation announced that **Heather E. Whitson, MD, MHS**, Associate Professor of Medicine and Ophthalmology at the Duke University School of Medicine and Deputy Director at Duke's Center for the Study of Aging and Human Development, would be

honored with the 2018 Thomas and Catherine Yoshikawa Award for Outstanding Scientific Achievement in Clinical Investigation. Dr. Whitson's Yoshikawa plenary presentation at #AGS18 focused on individualizing health and promoting resilience in medically complex older adults.

Dr. Whitson's interest in improving care delivery systems to better serve older adults with complex health needs has contributed to the leading role Duke's Center for the Study of Aging and Human Development has played in efforts to promote resilience to common "late-life stressors," such as surgery and sensory loss. Among several noteworthy highlights from a clinical and academic career that already spans more than a decade, Dr. Whitson developed a novel rehabilitation model for people living with both vision impairment and cognitive impairment, and she is part of an interdisciplinary team seeking to improve health outcomes for frail older adults immediately before, during, and after surgery. ♦



Presidential Poster Awardees

Case Series & Case Studies

Woody Chang, MD

Clinical Innovation & Quality Improvement

Austin Hilt, MPH

Clinical Trials

Il-Young Jang, PhD, MS

Epidemiology

Jennifer Watt, MD

Ethics & Qualitative Research

Emma Geduldig

Geriatric Bioscience

Sangwoo Kim, MD

Geriatric Education

Diane Brown, PhD, CCRN, MSN

Geriatric Medicine in Other Specialties

Rasheeda Hall, MD, MBA

Geriatric Syndromes

David Lee, MD

Health Services & Policy Research

Caroline Thirukumaran, PhD

Neurologic & Behavioral Science

Jo Wilson, MD

AGS CONTINUES TO EXPAND HIP FRACTURE CO-MANAGEMENT PROGRAM, AGS COCARE: ORTHO

With \$1.4 million in renewed support from The John A. Hartford Foundation—and now with the launch of a new website, ortho.agscocare.org—the AGS continues to mark progress with the launch of AGS CoCare: Ortho, our newest program to help health systems integrate geriatrics and orthopedic expertise for older adults hospitalized with hip fractures.

AGS CoCare: Ortho incorporates a geriatrics approach to care as soon as possible after an older adult enters the hospital for a hip fracture, helping to identify and reduce the risk for harmful events ranging from falls and delirium to infections. The model has been shown to reduce length of stay, re-admissions, and most complications, and to increase an older person's chances of going home directly from the hospital, often resulting in improved function and independence.

AGS CoCare: Ortho offers an essential resource for institutions interested in implementing a geriatrics-orthopedics co-management program. An institutional subscription to AGS CoCare: Ortho provides an institution's entire staff with unlimited access to a vast portfolio of tools and resources, including an online educational curriculum with credit for continuing medical education (CME). Now housed on the newly launched AGS CoCare: Ortho website, the program's offerings include:

- A 34-module online educational curriculum with accompanying audio companions offering both CME and Maintenance of Certification (MOC) credits
- An AGS CoCare: Ortho Co-Manager Certification Program
- An implementation toolkit with products, templates, and resources to guide hospitals and health systems through the planning and implementation phases of geriatrics-orthopedics co-management
- Online coaching and consultation as participants gear-up to adopt the AGS CoCare: Ortho model
- An online forum for sites to network and learn from one another

Since launching the initiative in 2017, AGS CoCare: Ortho staff have been hard at work developing program offerings with the Principal Investigator Nancy Lundebjerg, MPA, and project leads—Daniel Mendelson, MD, FACP, CMD, AGSF, Lead Medical Director; Richard Besdine, MD, Senior Medical Advisor; Lynn McNicoll, MD, FRCPC, AGSF, Medical Advisor; Stefan Gravenstein, MD, MPH, FACP, AGSF, Special Advisor; and Lynn Spragens, Business Consultant. Throughout 2018, the AGS CoCare: Ortho team began providing consultations and assistance to a pilot site at Northwell Health in NY, and to early adopter sites at Penn State Health, UCSF, the University of Nebraska, and the University of Rochester Strong Memorial Hospital in NY. Northwell has already launched the AGS CoCare: Ortho program at Long Island Jewish Medical Center and plans to roll the program out at three additional sites moving forward. ♦

➤ Interested in learning more about adopting AGS CoCare: Ortho? Contact Deena Sandos at 212-308-1414 or dsandos@americangeriatrics.org.



CONGRATULATIONS (AND THANKS!) TO OUR NEW AGS FELLOWS AND OUR COMMITTEE AND BOARD LEADERS

At this year's Member Business Meeting, Debra Saliba, MD, MPH, AGSF, incoming Board Chair, and AGS President Laurie G. Jacobs, MD, AGSF, honored the following outgoing Board and Committee members for their exceptional service.

Outgoing Board Member: Ellen Flaherty, PhD, APRN, AGSF

An AGS member since 1998, Dr. Flaherty is the Co-Director of the Dartmouth Centers for Health and Aging and a Co-Principal Investigator of the AGS's National Geriatric Workforce Enhancement Program Coordinating Center. She has a joint appointment in Geriatrics at the Geisel School of Medicine at Dartmouth and at the Dartmouth-Hitchcock Medical Center, where she practices in General Internal Medicine. Dr. Flaherty spent 25 years working in New York City to advance clinical practice in geriatric nursing at the NYU College of Nursing/Hartford Institute, where she received her PhD. Across her career, Dr. Flaherty has been an ardent champion for interprofessional collaboration and the importance of building an inclusive community at the AGS and in geriatrics.

Outgoing Committee Members

- Kathryn Daniel, PhD, RN, ANP-BC, GNP-BC, AGSF; Arthur Hayward, MD, MBA; and Sue Spackman, DDS, for the Clinical Practice and Models of Care Committee
- Ravi Ramaswamy, MD, AGSF, for the Ethnogeriatrics Committee
- Joshua Chodosh, MD, MHS; Elizabeth Eckstrom, MD, MPH; Stephanie Garrett, MD; and Maureen Henry, JD, for the Health Systems Innovation-Economics and Technology Committee
- Amy Ehrlich, MD, AGSF, and Alice Pomidor, MD, AGSF, for the Public Education Committee
- Elizabeth Bragg, PhD, RN; David Dorr, MD; and Terrie Ginsberg, DO, for the Public Policy Committee
- John Agens, MD, and Winnie Suen, MD, AGSF, for the Quality and Performance Measurement Committee
- George Kuchel, MD, FRCP, AGSF, and Ronald Shorr, MD, MS, for the Research Committee

Outstanding Committee Member Service Awardees

- Audrey Chun, MD, and Kathryn Daniel, PhD, RN, ANP-BC, GNP-BC, AGSF, for the Clinical Practice and Models of Care Committee
- Amy Westcott, MD, CMD, FAAHPM, AGSF, for the AGS-ADGAP Education Committee
- Anthony Caprio, MD, AGSF, for the Ethics Committee
- Ravi Ramaswamy, MD, AGSF, for the Ethnogeriatrics Committee and the Quality and Performance Measurement Committee
- Ariba Khan, MD, MPH, AGSF, for the Health Systems Innovation-Economics and Technology Committee
- Amy Ehrlich, MD, AGSF, for the Public Education Committee
- Robert Palmer, MD, MPH, for the Public Policy Committee
- Ron Shorr, MD, MS, for the Research Committee

New AGS Fellows

- Stephen Hermes, MD, FACP, AGSF
- Masaya Higuchi, MD, MPH, CMD, FAAFP, AGSF
- Beatriz Korc-Grodzicki, MD, PhD, AGSF
- Chandrika Kumar, MD, FACP, AGSF
- Fabien Madrigal Leer, MD, AGSF
- Simon Mears, MD, PhD, AGSF
- Joseph Nnodim, MD, PhD, FACP, AGSF
- Ogugua Osi-Ogbu, MD, AGSF

- Thomas Perls, MD, MPH, AGSF
- Nahid Rianon, MD, DrPH, AGSF
- Stephen Ryan, MD, MPH, AGSF
- Amy Westcott, MD, CMD, FAAHPM, AGSF
- Elizabeth Foy White-Chu, MD, CWSP, AGSF
- Sik Kim Ang, MD, AGSF
- Vivian Argento, MD, CMD, AGSF
- Serena Chao, MD, MSc, AGSF
- Katya Cruz Madrid, MD, FACP, AGSF
- Swati Gaur, MD, MBA, CMD, AGSF
- Susan Greenspan, MD, AGSF
- Jeffrey de Castro Mariano, MD, AGSF
- Mary Beth O'Connell, PharmD, AGSF
- Manisha Parulekar, MD, AGSF
- Margaret Rathier, MD, AGSF
- Fatima Sheikh, MD, AGSF
- Samir Sinha, MD, DPhil, FRCPC, AGSF



AGS COMMUNICATIONS TEAM


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AGS News is published quarterly by the American Geriatrics Society. For more information or to become an AGS member, visit AmericanGeriatrics.org. Questions and comments about the newsletter should be directed to info.amger@americangeriatrics.org or 212-308-1414.

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The 5Ms of Geriatrics

Even though people all over the world are living longer and healthier lives, our health can change over time because of the different conditions and concerns we may face. Many of us, especially as we reach our mid-70's and beyond, may develop different combinations of diseases, health conditions, and disabilities. Our health needs become more complex as we get older, and what matters most to us may vary also.

Geriatrics healthcare professionals, like geriatricians and many others who have advanced training in the care of older adults, can play an essential role in diagnosing and managing these conditions and health needs based on what matters to each person.. Geriatrics providers focus on 5 key areas, known as the Geriatric 5Ms*. The “Ms” stand for the targets that are important to care for us all as we age.

Geriatric 5Ms	Focus Areas
MIND	<ul style="list-style-type: none">• Maintaining mental activity• Helping manage dementia (a decline in memory and other mental abilities that make daily living difficult)• Helping treat and prevent delirium (an abrupt, rapid change in mental function that goes well beyond the typical forgetfulness of aging)• Working to evaluate and treat depression (a mood disorder that can interfere with all aspects of your daily life)
MOBILITY	<ul style="list-style-type: none">• Maintaining the ability to walk and/or maintain balance• Preventing falls and other types of common injuries
MEDICATIONS	<ul style="list-style-type: none">• Reducing polypharmacy (the medical term for taking several medications)• De-prescribing (the opportunity to stop unnecessary medications)• Prescribing treatments exactly for an older person's needs• Helping build awareness of harmful medication effects
MULTI-COMPLEXITY	<ul style="list-style-type: none">• Helping older adults manage a variety of health conditions• Assessing living conditions when they are impacted by age, health conditions, and social concerns
MATTERS MOST	<ul style="list-style-type: none">• Coordinating advance care planning• Helping manage goals of care• Making sure that a person's individual, personally meaningful health outcomes, goals, and care preferences are reflected in treatment plans

*© Frank Molnar & Allen Huang, University of Ottawa; Mary Tinetti, Yale University



The Team Approach

Geriatrics also is known for its team-based approach to caring for older people and working with families and other caregivers. The geriatrics care team may include (but is not limited to) any or all of the following professionals:

- Geriatricians
- Nurses
- Nurse practitioners
- Physician assistants
- Social workers
- Consultant pharmacists
- Nutritionists
- Physical therapists
- Occupational therapists
- Speech and hearing specialists
- Psychiatrists
- Psychologists

These professionals evaluate an older adult's medical, social, emotional, and other needs. The team also helps manage multiple chronic conditions and medications and focuses on health concerns common in older people, such as falls, memory concerns, and incontinence (inability to hold urine or feces).

Geriatrics team duties include:

- Evaluating a person's social supports and living situation
- Considering the person's ability to perform daily activities such as bathing, dressing, and eating
- Giving special attention to personal preferences and values when it comes to planning our care

When to Consult a Geriatrics Healthcare Professional

Consider consulting a geriatrician or other geriatrics healthcare professional when:

- You or an older person you know has health conditions that cause significant impairment or frailty. Impairment most often occurs when people are over the age of 75. Older adults who benefit most from geriatrics expertise typically have a number of diseases and disabilities, including cognitive (or memory) concerns.
- Family members and friends are under significant stress as caregivers.
- You, an older person you know, or their caregivers have trouble following complex treatments or managing relationships with many healthcare providers for multiple health conditions.

How Can I Find a Geriatrics Healthcare Professional?

You can use our free Find a Geriatrics Healthcare Professional tool (www.healthinaging.org) to get an instant list of healthcare providers in your area who are trained in the special health care needs of older adults. Search by city, state, or zip code or call 800-563-4916 to have a list mailed to you.



THE OFFICIAL FOUNDATION OF
THE AMERICAN GERIATRICS SOCIETY

DISCLAIMER: This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other healthcare provider. Always consult your healthcare provider about your medications, symptoms, and health problems. April 2018.

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