



Name of Rotation:	Geriatrics – LHSC/Parkwood
Description of Rotation:	The Geriatric Rehabilitation Unit (GRU): The GRU at Parkwood hospital is a 30 bed sub-acute inpatient unit with an average length of stay of approximately 28 days. Residents have the opportunity to complete comprehensive geriatric assessments and follow frail older adults with rehabilitation needs in order to help them regain their independence. The resident will participate as a member of a large interdisciplinary team while exploring the 5Ms of geriatrics: Multicomplexity, Mobility, Medications, Mind and what Matters most to patients and their families. The resident will be supervised by an attending geriatrician. This rotation also provides opportunity to participate in outpatient geriatric clinics and to complete consultations on inpatients at Parkwood Hospital. The resident will participate in home call (usually for 72 hours) for the GRU and Special Care Unit during the rotation.
	(CL): The geriatric CL service at LHSC provides acute care consults to older adults who are inpatients at University and Victoria campuses. The resident will be assigned to a clinical service at one site but will also have the opportunity to participate in a variety of geriatric medicine outpatient clinics. The resident will see a mix of patients experiencing common geriatric syndromes related to the 5Ms of geriatrics: Multicomplexity, Mobility, Medications, Mind and what Matters most to patients and their families.
Rotation Contact:	Jennifer Whytock
Description of Clinical Duties Performed:	GRU: Ward rounds 2 times per week, interdisciplinary rounds twice per week, consults prn,

On-Call Requirements: Description of Setting:	admissions most days, 2-4 clinics per block, 72 hours on home call CL: daily consults, 2-4 clinics per block, 72-hours home call The resident will participate in home call (usually for 72 hours) for the Geriatric Rehabilitation Unit and Special Care Unit at Parkwood Hospital during the rotation. GRU: Subacute care. Access to onsite general
Clinical Supervision:	radiology Monday to Friday 8-4. Can run IVs and draw labs at all times. CL: Acute care services The resident will be supervised by a geriatrician.
Cillical Supervision.	The resident will be supervised by a genatrician.
Clinical Context:	Delirium Dementia Falls and Mobility Multi-complexity Multi-morbidity Frailty Polypharmacy What matters most to the patient
Objectives/Expectations:	Hospital – In-patients H1. Diagnose and manage common acute/urgent/emergent medical conditions across the life cycle H2. Determine appropriateness for and complete hospital admission across the life cycles H3. Establish goals of care H4. Manage on-going care in inpatient setting H5. Diagnose and manage end-of-life/palliative medical conditions across the life cycle H6. Determine appropriateness for and complete hospital discharge H7. Perform common bedside procedures

	Ambulatory A1. Diagnose and manage common acute (urgent & non-urgent) presentations and diseases across the life cycle A2. Diagnose and manage common subacute and chronic presentations and diseases (including multimorbidity) across the life cycle A3. Provide wellness and preventive care across the life cycle A4. Diagnose and manage common mental health presentations and diseases across the life cycle
Level of Residents Accepted:	PGY1,PGY2,PGY3
Teaching:	Specialized Geriatric Services monthly grand rounds Clinical practice review once per rotation Critical appraisal topics twice per rotation Individualized teaching Medicine grand rounds
Additional Expectations:	Each resident will be expected to present a critical appraisal topic (CAT) once during the rotation. This involves posing and answering a clinical question related to a patient seen. This is a 5-10 minute oral presentation with a one-page written summary. NO SLIDES should be created.
Description of Location:	London, ON