



**BCC 7174**  
**Primary Care Geriatrics Clerkship**  
**2024-2025**

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# Overview

## **Course Description**

Primary Care Geriatrics is a four-week required fourth-year clerkship designed to provide students with an in-depth and qualitative exposure to the intricacies, subtleties, barriers, and obstacles to high-quality primary medical care for older adults. This experience takes place in available settings throughout the community. This curriculum is competency-based and focuses on the functional approach to complex patients with multiple comorbidities; patients that often fall through the cracks. The curriculum utilizes a self-directed learning approach with specific content areas described in this syllabus. These content areas detail geriatric competencies supplementing the student's clinical experiences under the guidance, direction, and supervision of selected primary care practitioners. Throughout the clerkship course competencies are met by participation in educational activities, completion of required readings, conferences, and rounds with various professionals (e.g., clerkship faculty, Clerkship Directors, APRNs, occupational therapists, physical therapists, social workers, speech therapists, pharmacists, dieticians, etc.).

## **Orientation and Syllabus Review**

Students are required to read the syllabus located on the [Office of Medical Education](#) to become familiar with expectations before beginning the clerkship. Students will also use the [Canvas M.D. Clerkships AY2024-2025](#) site Geriatrics page to access course material. A site-specific orientation will occur at the assigned clinical site before beginning clinical activities. Students are responsible for communicating with their clerkship faculty before the clerkship to coordinate meetings.

## **Scheduled Hours/On-Call**

Students should plan to be involved in required clinical activities at least 9 hours per day, 5 days per week. It is estimated that clerkship activities require approximately 180 hours per rotation to achieve proficiency in the competencies. Each student is scheduled for a minimum of one session per week with their Clerkship Director or designee to review patient encounter data, present cases, and receive didactic instruction to remain actively engaged in learning. There is no mandated night call, but students are expected to supplement with after-hours and/or weekend time as necessary to maintain continuity, knowledge of patient progress, and their active role in their patient's care. Student schedules are determined by their Clerkship Director to maximize opportunities for patient care and clinical education, using the varied and unique resources available at that regional campus. It is expected, after orientation, that students will take responsibility for knowing their schedule (e.g., knowing contact numbers, verifying when/where to show up, whom to report to, and finding an appropriate time to follow up on their continuity visits). **Work hours must be documented in the [Encounter Tracking System \(ETS\)](#) daily.**

## **Required Assignments**

There are six (6) required written assignments for this clerkship. See below for submission and evaluation information. Instructions and guidelines for the three major assignments (medication review, functional assessment, and advanced illness review) are located on the [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page.

- All assignments should reflect a student's personal effort and personal reflection based on patients that the student has personally seen and discussed with faculty during the clerkship.
- Students should not share their written work with other students and should not duplicate work created by others.
- Students should refresh their submission screens to confirm a successful upload. *If there is a problem uploading the assignment, students should email their Clerkship Director a copy of the completed assignment.*
- All students are expected to be able to complete the written assignments successfully based on information provided in the syllabus and assignment instructions and guidelines for the three major assignments (medication review, functional assessment, and advanced illness review) located on the [Canvas M.D. Clerkships AY2024-2025](#).

### **Required Assignment 1: Pre-Clerkship Self-Assessment of Geriatrics Competencies**

Students will complete and submit a document pertaining to self-assessment of geriatrics competencies for medical students. Responses should be based on all you have learned about the care of older adults within all courses,

clerkships, and other co-curricular experiences throughout your medical training. The document format is a fillable PDF where the students can click on their confidence level in consistently performing the competency for each of the 27 competency statements.

#### **Submission**

- Upload the completed pre-clerkship GER competencies self-assessment PDF to the “Project Documents” tab for the course in Student Academics by **midnight on the first day of clerkship**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Pre-Clerkship Self-Assessment of Geriatrics Competencies” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director and Education Director will review this assignment.
- Completion of this assignment and timely submission is a clerkship requirement.

#### **Required Assignment 2: Clerkship Learning Goal(s)**

Students will identify and record their future specialty choice(s) **AND** at least one clerkship learning goal to work toward during the clerkship. The clerkship learning goal(s) should be based on self-identified gaps in geriatrics knowledge and may relate to future specialty choice(s). Clerkship Director and clerkship faculty will assist students in the process of developing lifelong, adult learner skills by helping them identify the specific educational goal(s) for this clerkship.

#### **Submission**

- Upload at least one (1) clerkship learning goal(s) to the “Project Documents” tab for the course in Student Academics by **midnight of (first Wednesday) day 3 of clerkship**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Clerkship Learning Goal(s)” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director will review, and the Education Director will evaluate this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

*At the end of the clerkship, students will write a reflection on their clerkship learning goals they created in week 1.*

**Refer to Required Assignment 8.**

For **required major assignments 3, 5, and 6**, students **MUST submit ONE (1) assignment per week**. The order of assignments chosen may be determined by the student and patient encounters available.

#### **Required Major Assignment 3: Medication Review**

See the corresponding assignment instructions and guidelines document posted on [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page.

#### **Submission**

- Upload one (1) medication review to the “Project Documents” tab for the course in Student Academics by **midnight on Friday in either week 1, 2, or 3**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Medication Review” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director will review, and the Education Director will evaluate this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

#### **Required Assignment 4: MoCA Administration Training and Certification**

See corresponding registration instructions posted on [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page to complete a one-hour online Montreal Cognitive Assessment (MoCA) training and certification module. The benefits and expected outcomes of this training are to gain applicable knowledge of neuroanatomy and the cognitive domains that MoCA assesses; learn the correct method to administer and interpret MoCA; and become more confident in administering MoCA and explaining results to patients and families.

#### **Submission**

- Upload one (1) MoCA Administration Training certificate of completion to the “Project Documents” tab for the course in Student Academics by **midnight on Friday in week 2**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] MoCA Admin Training certificate of completion” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director and Education Director will review this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

#### **Required Major Assignment 5: Functional Assessment**

See corresponding assignment instructions and guidelines document posted on [Canvas M.D. Clerkships AY2024-2025 Geriatrics](#) page.

#### **Submission**

- Upload one (1) functional assessment to the “Project Documents” tab for the course in Student Academics by **midnight on Friday in either week 1, 2, or 3**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Functional Assessment” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director will review, and the Education Director will evaluate this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

#### **Required Major Assignment 6: Advanced Illness Review**

See corresponding assignment instructions and guidelines document posted on [Canvas M.D. Clerkships AY2024-2025 Geriatrics](#) page.

#### **Submission**

- Upload one (1) advanced illness review to the “Project Documents” tab for the course in Student Academics by **midnight on Friday in either week 1, 2, or 3**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Advanced Illness Review” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director will review, and the Education Director will evaluate this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

#### **Required Assignment 7: Interprofessional Collaborative Engagement**

See corresponding assignment instructions and guidelines document posted on [Canvas M.D. Clerkships AY2024-2025 Geriatrics](#) page.

#### **Submission**

- Upload one (1) interprofessional collaborative engagement assignment to the “Project Documents” tab for the course in Student Academics by **midnight on Monday of week 4**.
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Interprofessional Collaborative Engagement” in the drop-down menu.

#### **Evaluation**

- The Clerkship Director will review, and the Education Director will evaluate this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

#### **Required Assignment 8: Clerkship Learning Goal(s) Reflection**

At the end of the clerkship, each student will write a personal reflection of their clerkship learning goal(s) created in week 1. Students will record a reflection of their attempts to complete their clerkship learning goals including whether goals were accomplished, process of accomplishment, challenges, facilitators, tools utilized, and carryover, if any, to future lifelong learning goals.

#### **Submission**

- Upload learning goal reflection to the “Project Documents” tab for the course in Student Academics by **5:00 PM on (Friday of Week 4) last day of the clerkship**.

- Document completion as an **Educational Activity in ETS** by selecting “[GER] Clerkship Learning Goal(s) Reflection” in the drop-down menu.

**Evaluation**

- The Clerkship Director will review, and the Education Director will evaluate this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

**Required Assignment 9: Post-Clerkship Self-Assessment of Geriatrics Competencies**

Students will complete and submit a document pertaining to end-of-clerkship self-assessment of geriatrics competencies for medical students. Your responses should be based on your end-of-clerkship confidence level in consistently performing each competency. The document format is a fillable pdf where the students can click on the confidence level that reflects their current confidence in consistently performing the competency for each of 27 competency statements.

**Submission**

- Upload completed self-assessment to the “Project Documents” tab for the course in Student Academics by **5:00 PM on (Friday of Week 4) last day of the clerkship.**
- Document completion as an **Educational Activity in ETS** by selecting “[GER] Completion of Post-clerkship Self-Assessment of Geriatrics Competencies for Medical Students” in the drop-down menu.

**Evaluation**

- The Clerkship Director and Education Director will review this assignment.
- Completion of this assignment in a satisfactory fashion and timely submission is a clerkship requirement.

## Patient Care

**Overview**

Students will participate in the care of older adults in the Primary Care Geriatrics Clerkship, with attainment of competencies in several key areas as the focus of their educational experience. Students will care for patients in multiple settings e.g., skilled nursing facilities, inpatient rehabilitation, inpatient hospital, ambulatory clinics, home visits, hospice, and assisted living facilities. Students will attend at least one interprofessional team meeting during this clerkship and discuss with their Clerkship Director. The required problems and procedures are not site dependent. Occasionally, students may not achieve the expected level of competency even when they document the required number of encounters, types of problems, and procedures. If that happens, the Clerkship Director will supplement with alternative educational experiences to augment the required curriculum to promote a successful clerkship. Any notes a student retains must be HIPAA compliant but should have enough detail (for example: functional status, gait analysis, cognitive status, medications, goals of care) for an in-depth discussion with the faculty or Clerkship Director. Examples of clinical tools are available on the [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page under the Screening/Assessment Tools and Resources tab.

**Patient Log Requirements using the Encounter Tracking System (ETS)**

Students should enter patient encounter data into the [Encounter Tracking System \(ETS\)](#) daily. A **minimum of 40 patient encounters** are required with about half completed by the mid-point to demonstrate sufficient progress in the clerkship. Clerkship Directors may, therefore, expect to see an average of ten or more encounters entered into ETS per week. The table below lists the required problems and/or procedures including location of service and expected level of participation. Students are encouraged *but not required* to seek at least four (4) opportunities to see patients a second time to develop continuity, such encounters should be documented as “not a first visit” in ETS.

- Students who have difficulty seeing a patient within a problem or procedure category should notify their Clerkship Director with sufficient time to **enable remedial action.**
- The problems and/or procedures marked with an asterisk\* in the below table must be completed in the clinical setting and requires direct patient contact. The remaining conditions should be seen in the clinical setting but may be fulfilled by alternate educational activities as determined by the Education Director.

Min. Req.	Problem/Condition	Location of Service	Min. Level of Participation		
			Observe	Assist	Perform
1	Atypical Presentation of Disease	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x

1	Delirium	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x
1	Dementia (any type)*	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x
1	Frailty	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x
1	Immobility/ Deconditioning	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x
1	Major Depressive Disorder	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x
1	Polypharmacy	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility			x
1	Hearing Loss	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility		x	
1	Incontinence, Urinary	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility		x	
1	Vision Impairment	Home Visit/Assisted Living Facility, Inpatient Hospital, Inpatient Rehabilitation, Outpatient Clinic <b>OR</b> Skilled Nursing Facility		x	
Min. Req.	Procedures/Screening	Min. Level of Participation			
		Observe	Assist	Perform	
1	Cognitive assessment Mini-COG*			x	
1	Cognitive Assessment, MoCA or Cognitive assessment, other*			x	
1	Confusion Assessment Method (CAM)			x	
1	Creatinine Clearance Calculation or Calculate eGFR using CKD EPI 2021 Formula			x	
1	Depression screening any instrument (.e.g, GDS, PHQ2, PHQ9)*			x	
1	Functional assessment, comprehensive			x	
1	Gait assessment*			x	
1	Get Up and Go Test or Fall Risk screening (any type) *			x	
1	Medication review, comprehensive			x	
1	Nutritional assessment		x		
1	Incontinence assessment		x		

### **Written Documentation of Patient Encounters**

Students will document patient encounters in the appropriate format (e.g., admission note, SOAP note, discharge summary) either in the electronic health record or in a Word document submitted to their clerkship faculty for review. Evaluation of students' patient encounter documentation will be done by the clerkship faculty member during patient care activities. Students are expected to participate in and be evaluated on their interprofessional communication, including requesting consultations.

### **Alternate Educational Experiences**

For students unable to complete and record a required clinical encounter or other clerkship requirements due to circumstances beyond their control, the Clerkship Director in consultation the Education Director will determine an appropriate alternative educational experience. Additional clinical encounters are the preferred method to complete the requirements of this clerkship. Students may be exposed to the conditions or diseases secondarily through reading assignments, completion of Aquifer or Access Medicine Geriatrics case files, or discussions with the Clerkship Director, and will record as instructed in the ETS, and only under the direction of the Education Director. The utilization of alternative educational activities is monitored by the curriculum committee regularly.

## **Online Curriculum**

[Aquifer Geriatrics](#) has 28 cases developed in collaboration with the American Geriatrics Society (AGS) and is available as a resource along with other pertinent case resources. Additional Geriatric cases are located on the [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page under the Supplemental Reading include links to two delirium cases and several transition paper cases. This extra material is not required but may be used to supplement a student's educational experience. In some circumstances, it may be strongly encouraged by the Clerkship Director.

# Meetings

## ***Clerkship Director Meetings***

Students are required to **meet weekly with the Clerkship Director** throughout the clerkship; this may be via in-person meetings, zoom, or telephone. This meeting will include a discussion on clinical experiences, progress on documentation of patient encounters in ETS, personal educational goals, educational tasks/assignments, and any challenges or concerns regarding meeting clerkship objectives. Students should be prepared to discuss:

1. Attendance at least one Utilization Review (UR), Care Planning (CP), or Rehabilitation Team meeting.
2. An admission or discharge plan to or from any setting (i.e., nursing home, rehabilitation, hospital, assisted living).
3. Participation in serious illness conversations or advanced illness care for at least one patient in *any* setting during the rotation.

## ***Additional Educational Meetings***

Students will participate in morning rounds, noon conferences, and other educational meetings when available. Students may be asked to present to residents at one of the educational meetings, and specific topics may be assigned.

# Clerkship Examinations

## ***Summative***

At the end of the clerkship students will take an 80-question Geriatrics exam. This exam contains questions that align with the course objectives selected from the NBME question bank by the Education Director.

## ***Optional Formative Self-Assessment***

There are two formative exams available to students on [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page: a 64-question, and 77-question version.

# Learning Resources

## ***Institutional Resources***

The [Maguire Medical Library](#) offers 24/7 remote access to online resources such as [Mobile Resources](#), [Point of Care](#), and [Subject Guides](#) to support the **core clerkships**.

## ***Required Reading***

Specific resources required for this clerkship are located on the Library's [Geriatrics Subject Guide](#)

1. Geriatrics at Your Fingertips 2022 by Reuben DB, Herr KA, Pacala JT, et al.
2. Essentials of Clinical Geriatrics 2017, by Resnick B, Kane RL, et al. *Chapters 1-3, 6-10, 14-16, 18*

## ***Recommended Reading***

Specific resources recommended for this clerkship:

1. **Geriatric Review Syllabus 2022** is an excellent resource and is available in the [Geriatrics Subject Guide](#). The chapter titles are basic, serving as a primary reference. The concepts are summarized through images to simplify reading.
2. Numerous supplemental readings with review articles to be perused at the discretion of the student, depending on individual educational goals and needs are available on the [Canvas M.D. Clerkships AY2024-2025](#) Geriatrics page. Although not required, students may find it useful to skim the abstracts. Students are expected to utilize these resources according to their needs, wishes, and learning style.
3. [Gerikit](#) is a free online app currently available for the iPhone and will soon be available on android devices. The app contains tools for evaluating cognition, depression, function, strength, falls, nutrition, medication review, and advanced care planning.



# Evaluation

## **Formative Evaluation**

A mid-clerkship evaluation is completed by the Clerkship Director to provide feedback on student progress toward the achievement of clerkship objectives, competencies, assignments, and required encounters. A student workflow guide is available on the [Canvas M.D. Clerkships AY2024-2025](#) homepage.

## **Summative Evaluation**

An evaluation of student clinical performance will be completed by the assigned clerkship faculty at the end of the clerkship, as well as by the resident the student worked with during the clerkship. A final summative report will be completed by the Clerkship Director at the end of the clerkship. The Education Director will review all components of the clerkship and include an assessment of each in the final grade summary.

# Grading

## **Years 3 and 4 Grading Policy**

The standardized Years 3 and 4 Grading Policy for clerkships and courses is located on the [Office of Medical Education](#) site. The final grade is assigned by the Education Director and is based on all aspects of the clerkship, including clinical performance, attitude, performance during weekly Clerkship Director meetings, and the results of the NBME Clinical Subject Exam. There are no grade quotas, and any student can earn a grade of honors.

## **Clerkship-Specific Grading Criteria**

Passing this course requires a demonstration of required competency areas. An honors performance is demonstrated by comprehensive performance *above and beyond* those minimum competency expectations. Geriatric-specific *knowledge*; history/physical exam with assessment/procedure *skills*, and *attitudes* about caring for the older adult patient are assessed as follows.

1. Any breach in professionalism renders a student ineligible for honors
2. Any assignment submitted late or which requires remediation renders the student ineligible for honors and will result in the assignment of an initial grade of IR (Incomplete Remediation) until remediation has been completed
3. Failure to document timely and accurate work hours renders a student ineligible for honors
4. Clinical performance and content knowledge must be exemplary to be considered for honors or high pass
5. Geriatrics end of clerkship examination must be at the
  - a. 86% or higher to be eligible for Honors final grade
  - b. 80% or higher to be eligible for High Pass final grade
  - c. 70% or higher for Pass final grade
6. Active participation in weekly Clerkship Director meetings (pass/fail)
7. Satisfactory Clerkship Faculty and Clerkship Director evaluations documenting competency in all required domains

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8. Satisfactory documentation of **at least 40 patient encounters** at specified location of service in ETS (pass/fail)
9. Satisfactory completion and documentation of all required encounters, problems, and procedures at the indicated level of participation in ETS (pass/fail)
10. At least two (2) of the three (3) major required written assignments (medication review, functional assessment and advanced illness review) **MUST** be “above expectations” to be considered for honors or high pass
11. Satisfactory completion and timely **submission/upload of pre-clerkship self-assessment of geriatrics competencies** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
12. Satisfactory completion and timely **submission/upload of clerkship learning goal(s)** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
13. Satisfactory completion and timely **submission/upload of medication review** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
14. Satisfactory completion of MoCA administration training **AND** timely **submission/upload of MoCA training completion certificate** into Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
15. Satisfactory completion and timely **submission/upload of functional assessment review** in Student Academics

- AND** document as an Educational Activity in ETS (pass/fail)
16. Satisfactory completion and timely **submission/upload of advanced illness review** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
  17. Satisfactory completion and timely **submission/upload of interprofessional collaborative engagement** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
  18. Satisfactory completion and timely **submission/upload of clerkship learning goal reflection** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)
  19. Satisfactory completion and timely **submission/upload of post-clerkship self-assessment of geriatrics competencies** in Student Academics **AND** document as an Educational Activity in ETS (pass/fail)

## Course Objectives

The following tables outline clerkship objectives and assessment methods for each and are intended to be used as a guide for student learning. Each clerkship objective is mapped to the [FSU COM Educational Program Objectives \(EPOs\)](#) and the [ACGME Core Entrustable Professional Activities \(EPAs\)](#).

GERIATRICS CLERKSHIP COURSE OBJECTIVES		EPO
GER-1	Demonstrate the ability to gather information from multiple sources including older adult patients and their families/caregivers and document about multiple domains of relevance in the geriatric population (using the 4Ms Framework of an Age-Friendly Health System: mind/mentation, mobility, medications, what matters most) through history taking, physical examination, and geriatric assessment procedures.	1
GER-2	Demonstrate the ability to select and apply appropriate assessment tools for screening and to support diagnosis in multiple domains of relevance in the geriatric population including functional status, fall risk, mood, and cognition.	1, 7
GER-3	Develop diagnostic, treatment, and management plans, as part of an interprofessional team, appropriate to geriatric presentations that incorporate the preferences of patients and their caregivers/families by applying the concept of shared decision making.	1, 7
GER-4	Identify and share relevant community resources, and counsel and educate older adult patients and their caregivers/families while empowering them to participate in their care, showing consideration for their perspective and goals of care throughout treatment.	1, 4, 7
GER-5	Apply principles of social-behavioral sciences to provision of geriatric patient care, including assessment of the impact of psychosocial-cultural influences and social determinants of health on adherence to care plans and barriers to care.	2, 7
GER-6	Participate in effective communication and collaboration with individuals from other health professions and in interprofessional teams in a climate of mutual respect, dignity, diversity, ethical integrity, and trust, while recognizing the expertise of other healthcare professionals to enhance team performance, serve the patient's needs, improve patient safety, and maximize the quality of geriatric patient care.	4, 7
GER-7	Recognize and apply compassion, integrity, and respect for patients, peers, faculty, and clinical staff as core values and principles of medical professionalism to provide person-centered care to the geriatric population.	5
GER-8	Demonstrate the ability to identify, address, and manage learning needs, comfort with ambiguity as part of geriatrics clinical health care, patient privacy and confidentiality, professional accountability, balance between personal and professional responsibilities, and personal health and wellness while recognizing their impact on professional conduct and quality of geriatric patient care. Seek support, utilize available resources based on self-awareness of needs and responsibilities, and incorporate feedback to improve performance and optimize professional accountability and quality of geriatric patient care.	3, 5

Component	Learning Objectives	Assessment
General Patient Care  Maps to: GER-1, GER-2, GER-3, GER-4,	1. Recognize presentation and initial evaluation of listed common geriatric syndromes and related contribution of aging physiology and disruption of homeostasis: Atypical Presentation of Disease, Delirium, Dementia (any type), Frailty, Immobility/Deconditioning, Major Depressive Disorder, Polypharmacy, Hearing Loss, Incontinence, Urinary, Vision Impairment. (GER-1)	<ul style="list-style-type: none"> <li>• Faculty observation</li> <li>• Oral Presentation</li> <li>• Patient encounter documentation</li> <li>• Online modules</li> <li>• Clerkship Director observation</li> <li>• Clerkship Director</li> </ul>

<p>GER-5, GER-6, GER-7</p>	<ol style="list-style-type: none"> <li>2. Perform, discuss, and document comprehensive, person-centered medication reviews for older adults with application of key geriatrics principles of care. (GER-1, GER-3)</li> <li>3. Perform, discuss, and document comprehensive, person-centered, interprofessional functional status assessments and care plans for older adults with application of key geriatrics principles of care utilizing the expertise of other healthcare professionals, relevant community resources, and adaptive interventions. (GER-2, GER-3)</li> <li>4. Assess, address, discuss, and document medical, psychological, social, and spiritual needs of older adults with advanced illness utilizing the expertise of other healthcare professionals, and formulate and/or assess the effectiveness of a care plan that matches those needs and incorporates patient's and family's goals of care. (GER-1, GER-3, GER-4)</li> <li>5. Apply knowledge of epidemiologic factors like age, education, hearing impairment, vision impairment, vascular risks, alcohol, genetics, and exercise when screening a patient for cognitive impairment. (GER-1, GER-2)</li> <li>6. Participate in effective communication and collaboration with individuals from other health professions and in interprofessional teams in a climate of mutual respect, dignity, diversity, ethical integrity, and trust. (GER-6)</li> <li>7. Recognize one's own role and the roles of other health professionals in interprofessional teams for the provision of patient-centered care that is safe, timely, efficient, effective, and equitable. (GER-6)</li> <li>8. Perform and discuss screening/ assessment for functional status including fall risk, cognition, and mood in the geriatric patient with use of appropriate standardized assessment tools and discuss with faculty. (GER-1, GER-2)</li> <li>9. Apply knowledge of social behavioral sciences and key geriatrics principles of care to a differential diagnosis and treatment of a geriatric patient who has a positive mood disorder screen and discuss with faculty. (GER-1, GER-2)</li> <li>10. Apply knowledge of social behavioral sciences and key geriatrics principles of care to a differential diagnosis and treatment of a geriatric patient who has a positive cognition screen and discuss with faculty. (GER-1, GER-2)</li> <li>11. Apply knowledge of social and behavioral sciences to identify barriers to adherence to a plan of care. (GER-5)</li> <li>12. Recognize and apply compassion, integrity, and respect for patients, peers, faculty, and clinical staff as core values and principles of medical professionalism to provide person-centered care to the geriatric population. (GER-7)</li> </ol>	<p>review of and feedback for assignments</p> <ul style="list-style-type: none"> <li>• Education Director evaluation of and feedback for assignments</li> <li>• End of clerkship exam</li> </ul>
<p>Required Patient Encounters</p> <p>Maps to: GER-1, GER-2, GER-3</p>	<ol style="list-style-type: none"> <li>1. Document at least 40 patient encounters. (GER-1, GER-3)</li> <li>2. Document the following problems at the specified minimum number and level of participation: Atypical Presentation of Disease, Delirium, Dementia (any type), Frailty, Immobility/Deconditioning, Major Depressive Disorder, Polypharmacy, Hearing Loss, Incontinence, Urinary, Vision Impairment. (GER-1)</li> <li>3. Document the following procedures at the specified minimum number and level of participation: Cognitive assessment, Confusion Assessment Method (CAM), Creatinine Clearance Calculation, Depression screening (any instrument), Functional assessment, comprehensive, Gait assessment, Get Up and Go Test or Fall Risk screening (any type), Medication review comprehensive, Nutritional assessment comprehensive, Incontinence assessment. (GER-1, GER-2, GER-3)</li> </ol>	<ul style="list-style-type: none"> <li>• Weekly review of patient log in ETS by Clerkship Director</li> </ul>
<p>Required experiences and assignments</p> <p>Maps to: GER-1, GER-2, GER-3, GER-4, GER-6, GER-8</p>	<p>Assignment: Pre-clerkship self-assessment of geriatrics competencies</p> <ol style="list-style-type: none"> <li>1. At start of clerkship, complete a self-assessment of geriatrics competencies for medical students based on all you have learned about care of older adults within all your courses, clerkships, and other co-curricular experiences throughout your medical school years until now. (GER-8)</li> </ol> <p>Assignment: Clerkship Learning Goal(s)</p> <ol style="list-style-type: none"> <li>1. Create and implement at least one clerkship learning goal based upon gaps in geriatrics knowledge and future specialty choice, and then discuss it with faculty and other students. (GER-8)</li> </ol>	<ul style="list-style-type: none"> <li>• Clerkship Director review</li> <li>• Education Director review</li> <li>• Clerkship Director review</li> <li>• Education Director review</li> </ul>

	2. Utilize available resources based on self-awareness of needs and responsibilities and incorporate feedback to improve performance and optimize professional accountability and quality of geriatric patient care. (GER-8)	
	<p>Assignment: Montreal Cognitive Assessment (MoCA) Administration Training and Certification</p> <p>1. Complete a one-hour online MoCA training and certification module to gain applicable knowledge of neuroanatomy and the cognitive domains that MoCA assesses, learn the correct method to administer and interpret MoCA, and become more confident in administering MoCA and explaining results to patients and families. (GER-1, GER-2)</p>	<ul style="list-style-type: none"> <li>• MoCA Administration Training certificate of completion</li> </ul>
	<p>Major Assignment: Medication Review</p> <p>1. Demonstrate and document an investigative and analytic approach to medication review for the geriatric patient using the available guideline and related instructions. (GER-1, GER-3)</p>	<ul style="list-style-type: none"> <li>• Clerkship Director review and feedback</li> <li>• Education Director evaluation and feedback</li> </ul>
	<p>Major Assignment: Functional Assessment</p> <p>1. Demonstrate and document an investigative and analytic approach to functional status assessment of the geriatric patient using the available guideline and related instructions. (GER-2, GER-3)</p>	<ul style="list-style-type: none"> <li>• Clerkship Director review and feedback</li> <li>• Education Director evaluation and feedback</li> <li>•</li> </ul>
	<p>Major Assignment: Advanced Illness Review</p> <p>1. Demonstrate and document an investigative and analytic approach to assessment and care planning of the geriatric patient with advanced illness using the available guideline and related instructions. (GER-1, GER-3, GER-4)</p>	<ul style="list-style-type: none"> <li>• Clerkship Director review and feedback</li> <li>• Education Director evaluation and feedback</li> </ul>
	<p>Assignment: Interprofessional Collaborative Engagement Assignment</p> <p>1. Discuss and document engagement with at least one non-physician professional, participation in interprofessional team meetings, and identification of interprofessional collaborative practice opportunities and their impact on delivery of quality geriatric patient care. Use available guideline and related instructions. (GER-6)</p> <p>2. Include a reflection about your engagement with other types of healthcare professionals in your future specialty training and/or clinical practice and their impact on your ability to provide quality patient care. Use available guideline and related instructions. (GER-6, GER-8)</p>	<ul style="list-style-type: none"> <li>• Clerkship Director review</li> <li>• Education Director review and feedback</li> </ul>
	<p>Assignment: Clerkship Learning Goal(s) Reflection</p> <p>1. Utilize available resources based on self-awareness of needs and responsibilities, incorporate feedback to improve performance and optimize professional accountability and quality of geriatric patient care. (GER-8)</p> <p>2. After the clerkship, self-assess and document progress on achievement of clerkship learning goal(s). (GER-8)</p>	<ul style="list-style-type: none"> <li>• Clerkship Director review</li> <li>• Education Director review and feedback</li> </ul>
	<p>Assignment: Post-clerkship self-assessment of geriatrics competencies</p> <p>1. At the end of your clerkship, complete a self-assessment of geriatrics competencies for medical students based on your post-clerkship/current level of confidence in consistently performing each competency. (GER-8)</p>	<ul style="list-style-type: none"> <li>• Clerkship Director review</li> <li>• Education Director review and feedback</li> </ul>
<p>Weekly Clerkship Director Meetings</p> <p>Maps to: GER-3, GER-6, GER-8</p>	<p>1. Demonstrate oral presentation skills. (GER-3, GER-6)</p> <p>2. Demonstrate clinical reasoning skills. (GER-3, GER-6)</p> <p>3. Demonstrate time management skills through work hours and related documentation (GER-8)</p> <p>4. Demonstrate completion of course objectives and learning objectives through discussion of clinical experiences, progress on documentation of patient encounters, personal learning goals, educational tasks/assignments, and any challenges or concerns regarding meeting clerkship objectives. (GER-8)</p>	<ul style="list-style-type: none"> <li>• Weekly verbal feedback from Clerkship Director</li> <li>• Review of student work hours and patient log in ETS by Clerkship Director</li> <li>• Mid-rotation feedback by Clerkship Director</li> <li>• End of clerkship summary evaluation</li> </ul>

		by Clerkship Director
NBME CAS end of clerkship exam  Maps to: GER-1, GER-2, GER-5	1. Demonstrate knowledge and clinical reasoning to analyze clinical scenarios and answer basic, clinical, behavioral, and social science questions about older adult patients by applying key geriatric principles of care. (GER-1, GER-2, GER-3, GER-5)	<ul style="list-style-type: none"> <li>Minimum score of 70%</li> </ul>

## Policies

### ***Absence and Attendance Policy***

The College of Medicine has detailed attendance policies as they relate to each cohort and events that conflict with course schedules. See the [FSU COM Student Handbook](#) for details of the attendance policy, a notice of absences, and remediation. Students must use the [student absence request form located on Student Academics](#). Extended absences from the clerkships are not permitted. Any absence from the clerkships must be **pre-approved by the Regional Campus Dean** before the beginning of the clerkship, using the student absence request form. The clerkship faculty, Clerkship Director, and Education Director must be notified of any absence in advance by the student, once approved by the campus dean. Under no circumstances should a student arrange with the clerkship faculty or elective faculty to be away from the rotation without first obtaining the approval of the campus dean. Any approved absence from a required clerkship may result in the student receiving a grade of “incomplete” and the student is expected to make up missed time and/or complete alternative/additional assignments before a final grade will be assigned. **Unapproved absences during the clerkship are considered unprofessional behavior, will result in a grade of “incomplete” until remediated, and may result in a grade of “fail” for the clerkship.** In the case of illness or other unavoidable absence, follow the same procedure outlined above, and notify everyone as soon as possible.

### ***Academic Honor Policy***

The Florida State University Academic Honor Policy outlines the University's expectations for the integrity of student's academic work, the procedures for resolving alleged violations of those expectations, and the rights and responsibilities of students and faculty members throughout the process. Students are responsible for reading the Academic Honor Policy and for living up to their pledge to "...be honest and truthful and...[to] strive for personal and institutional integrity at Florida State University." (Florida State University Academic Honor Policy, found at <http://fda.fsu.edu/academic-resources/academic-integrity-and-grievances/academic-honor-policy>.)

### ***Americans with Disabilities Act***

Florida State University (FSU) values diversity and inclusion; we are committed to a climate of mutual respect and full participation. Our goal is to create learning environments that are usable, equitable, inclusive, and welcoming. FSU is committed to providing reasonable accommodations for all persons with disabilities in a manner that is consistent with the academic standards of the course while empowering the student to meet the integral requirements of the course. To receive academic accommodations, a student: (1) must register with and provide documentation to the Office of Accessibility Services (OAS); (2) must provide a letter from OAS to the instructor indicating the need for accommodation and what type; and, (3) should communicate with the instructor, as needed, to discuss recommended accommodations. A request for a meeting may be initiated by the student or the instructor. Please note that instructors are not allowed to provide classroom accommodations to a student until appropriate verification from the Office of Accessibility Services has been provided. This syllabus and other class materials are available in an alternative format upon request. For more information about services available to FSU students with disabilities, contact the Office of Accessibility Services, 874 Traditions Way, 108 Student Services Building, Florida State University, Tallahassee, FL 32306-4167; (850) 644-9566 (voice); (850) 644-8504 (TDD), oas@fsu.edu, <https://dsst.fsu.edu/oas/>.

### ***Clinical Experience and Education Policy (formerly Duty Hours or Work Hours)***

The FSU COM uses the ACGME requirements regarding clinical experience and education as a guideline for our policy. Our goal is to provide a structure that supports patient safety and student education and facilitates personal-professional balance and well-being.

- Clinical experience and scheduled educational activities must be limited to no more than 80 hours per week when averaged over 4 weeks.
- Students must have at least one day out of every 7 completely free from clinical duties and required educational activities when averaged over 4 weeks.
- Clinical experience must not exceed 24 hours of continuously scheduled assignments, with the exception that up to 4 hours of additional time may be used for effective transitions of care or student education. No additional patient care responsibilities may be undertaken during these 4 hours. After 24 hours continuously on call, students must have at least 14 hours free of clinical work and scheduled educational activities.
- Students should have 8 hours off between scheduled clinical experience and education periods.

**Documentation** of time spent on clinical experience and education:

Students will use ETS to document by self-report their daily work hours on required clerkships and courses. Students must enter daily hours to include both clinical experience and required educational activities. Failure to report work hours is considered a breach of professionalism.

Students will report the following:

- Clinical experience, including documentation in the medical record
- Required educational meetings (i.e. Doctoring 3, clerkship meetings, meetings with clerkship faculty, educational meetings at residency programs)
- **Hours that should not be included** in self-reported "work" hours include reading about patient conditions and procedures, self-directed study for clerkships/courses, work completed for assignments, learning modules, and assigned reading.

### ***Office of Student Counseling Services***

Candidates for the M.D. degree must be able to fully and promptly perform the essential functions in each of the following categories: Observation, Communication, Motor, Intellectual, and Behavioral/Social. However, it is recognized that degrees of ability vary widely between individuals. Individuals are encouraged to discuss their disabilities with the College of Medicine's Director of the Office of Student Counseling Services and the FSU Office of Accessibility Services (OAS) to determine whether they might be eligible to receive the accommodations needed to train and function effectively as a physician. The Florida State University College of Medicine is committed to enabling its students by any reasonable means or accommodations to complete the course of study leading to a medical degree.

### ***Patient Log (ETS) Monitoring Policy***

Encounter data are monitored by the Clerkship Directors to assure that students are meeting clerkship requirements. If it becomes apparent that students are not encountering the required patient conditions, efforts will be made to specifically select the patients with the required conditions. The level of participation in the care of patients is determined by the student's involvement during the history, physical exam, assessment, and treatment plan. The complexity of these components will vary, but to choose a level of participation, three categories have been created, all of which include supervision of the medical student. The student will select the level of participation that most closely describes their involvement in the patient encounter and will receive credit for documented participation at the required level or higher.

- **Observe** should be selected when the student observes a clinician conducting a patient encounter.
- **Assist** should be selected when the student assists a clinician in conducting the patient encounter.
- **Perform** should be selected when the student leads or conducts the patient encounter.

### ***Student Mistreatment Policy***

"Mistreatment" arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of physical punishment, sexual harassment, psychological cruelty, and discrimination based on race, religion, ethnicity, sex, age, or sexual orientation. If a student feels they are being mistreated, the student should report this concern to the Division of Student Affairs (Student Support Coordinator, Assistant or Associate Dean for Student Affairs, or the Regional Campus Dean). We treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind. Please refer to the Student Mistreatment Policy in the [FSU COM Student Handbook](#) and [report incidents of mistreatment](#) as soon as possible.

***Syllabus Change Policy***

Except for changes that substantially affect the implementation of the evaluation (grading) statement, this syllabus is a guide for the course and is subject to change with advance notice.