

OREGON HEALTH AND SCIENCE UNIVERISTY
GERIATRIC PSYCHIATRY ROTATION
Covid-19 Modified Curriculum
Dr Katherine Tacker, Dr Mary Lajoy

During the Covid-19 pandemic, OHSU psychiatry residents are temporarily unable to work at clinical sites typically utilized during their PGY2 Geriatric Psychiatry clinical rotation. Furthermore, given evidence early-on during the Covid-19 pandemic that older patients were likely to be at higher risk for negative outcomes from infection, there was additional motivation to mitigate exposure risk from face to face contact with this population in a clinical setting. The curriculum below was created as an alternative educational experience that strives to 1) provide an effective combination of distance learning and tele-health clinical experience, 2) reduce risk of infection exposure to the older patient population, and 3) meet the ACGME criteria for a Geriatric Psychiatry Rotation. At OHSU, this curriculum was designed for a duration of 6 weeks so that residents could continue to participate in their adult psychiatry half-day continuity clinic and general psychiatry didactic half-day, yet still meet the 1-month FTE equivalent ACGME requirement for geriatric-focused education.

OVERVIEW

- **6-WEEK CURRICULUM (DEFAULT):**

- The curriculum provided below is designed to combine a tele-psychiatry geriatric psychiatry clinical experience augmented with an online/distance learning component.
- If your residency program has a shorter-duration Geriatric Psychiatry rotation than 6 weeks and/or an unpredictable tele-health workload (or other clinical workload) week to week:
 - For the most part, an individual week’s curriculum can theoretically be removed without significantly impacting the other weeks.
 - Some weeks of the curriculum have lighter or heavier study “workload” than others. Therefore, it may be possible to reallocate some of the online study materials in order to consolidate the curriculum into a shorter timeframe or adjust to accommodate the current telehealth workload.
 - Supervisors can help prioritize the online educational activities for each week so that residents can be selective, when necessary, by focusing their available time on the most high-yield activities for that week.

- **EVERY WEEK INCLUDES:**

- **TELEPSYCHIATRY CLINIC:** mix of observation of attending and direct resident participation in provision of care via Veteran’s Administration Video Connect platform with real-time supervision by the PGY2 Geriatric Psychiatry Rotation Director or other attending supervisor (up to 4 days per week as clinic schedule and technological resources permit)
 - **PATIENT POPULATION/TYPICAL DIAGNOSES**
 - Older, U.S. Armed Forces veterans seeking mental health services for:
 - Anxiety Disorders/Panic Disorder
 - Post-Traumatic Stress Disorder
 - Major Depression
 - Bipolar Disorder
 - Schizophrenia
 - Mild Neurocognitive Disorder
 - Neurocognitive Disorder with Behavioral Disturbance

- LOGISTICS:
 - The VA Video Connect platform allows for telepsychiatry visits through home computers, tablets or smartphones.
 - The resident participates in this telepsychiatry clinic from their own home.
 - The rotation director (or other supervisor) participates in this telepsychiatry clinic from their own home or clinic setting.
 - The patient/family participate in this telepsychiatry clinic either from their own home or a remote VA CBOC clinical site.
 - Both resident and attending have access to the patient's chart during the tele-visit using remote VA connection, either through government-furnished equipment or the VA CAG.
 - An email invitation is generated before the visit and sent to both the patient and the psychiatry resident.
 - All parties then connect to the Virtual Meeting Room at the time of the appointment from their respective locations, which is particularly important at this time to effectively limit exposure to illness.
 - Either the attending or resident conducts a clinical interview while all parties are visible on screen.
 - The attending is able to clinically observe the patient throughout the encounter and provide direct supervision and feedback to the resident following the interview.

- **ONLINE CURRICULUM:** 1-2 topic(s) of focus per week pertaining to issues unique or highly pertinent to the care of older patients
 - WEEKLY TOPICS:
 - Fundamental Geriatric Issues
 - Neurocognitive Disorders
 - Delirium
 - Capacity/Guardianship
 - Geriatric Psychosis + Complex Medical Issues
 - Geriatric Considerations in Psychopharmacology
 - Geriatric Depression/Suicide
 - Trauma-Informed Care in Geriatric Populations
 - Psychosocial Theories of Aging

 - Readings (journal articles, presentation slides, etc.)
 - Publicly or commercially available resources are cited
 - Copies of less readily-available materials are provided in appended attachments
 - Written Assignment to Submit AND/OR Self-Assessment Activity
 - Videos:
 - Publicly or commercially available videos are cited
 - Videos of the indicated **OHSU Psychiatry Grand Rounds** presentations can be found at <https://www.ohsu.edu/school-of-medicine/psychiatry/psychiatry-grand-rounds>. Once on the website, scroll down to the yellow button labeled "**Grand Rounds Archive**"

 - **FINAL WEEK OF ROTATION:**
 - Didactic Session: "*Complex Geriatric Clinical Case Presentation*"
 - Due to sensitive features of the clinical case used for this activity with OHSU students, specific example case materials for this particular session are not provided here.
 - We implement this session via synchronous online format via secure Webex video platform.
 - The goal of this activity is to select a complex case that highlights multiple features of geriatric psychiatry care. Ideally, this is a live session over video to facilitate discussion. However, if live discussion is not feasible and there is low risk of disclosing potential patient identifiers in the case you are presenting, it would be reasonable to record a didactic session and post a video for asynchronous viewing by residents.

ACGME GERIATRIC PSYCHIATRY CORE REQUIREMENTS

Resident experience in geriatric psychiatry must include 1-month FTE of organized experience focused on areas unique to the care of the elderly.

IV.C.3.i).(1) EACH RESIDENT'S GERIATRIC PSYCHIATRY EXPERIENCE MUST INCLUDE:

- A) Diagnosis and management of mental disorders in geriatric patients with coexistent medical disorders
- B) Diagnosis and management, including management of the cognitive component, of degenerative disorders
- C) Basic neuropsychological testing of cognitive functioning in the elderly
- D) Management of drug interactions

WEEK 1: FUNDAMENTAL GERIATRIC ISSUES + NEUROCOGNITIVE DISORDERS (NCD)

SUBTOPICS	EDUCATIONAL MATERIALS	ASSIGNMENTS	ACGME
"NUTS & BOLTS"	<ul style="list-style-type: none"> • Inouye SK. <i>Enhancing Cognitive Aging: Clinical Highlights of a Report from the Institute of Medicine</i>. Annals of Internal Medicine. www.annals.org. June 23, 2015. • <i>Neurocognitive Disorder Background Info</i> (ATTACHMENT) 	ASSIGNMENT: <ul style="list-style-type: none"> • Review this compilation of foundational concepts re: Dx and Tx of NCD 	A B C
COGNITIVE SCREENING	<ul style="list-style-type: none"> • MoCA Instructions https://www.mocatest.org/ • MoCA Exam Template https://www.mocatest.org/ • SLUMS Instructions and Exam https://www.slu.edu/medicine/internal-medicine/geriatric-medicine/aging-successfully/assessment-tools/mental-status-exam.php 	ASSIGNMENT: <ul style="list-style-type: none"> • Review these tools for clinic-based/bedside cognitive screening 	B C
	OHSU GRAND ROUNDS <i>Update on Dementia: Understanding the Symptoms</i> 5.7.2019	ASSIGNMENT: <ul style="list-style-type: none"> • View this presentation video online 	
NCD Dx + STAGING	<ul style="list-style-type: none"> • Siberski J. <i>Dementia and DSM-5: Changes, Cost, and Confusion</i>. Aging Well. Vol. 5 No. 6 P. 12. https://www.todaysgeriatricmedicine.com/archive/110612p12.shtml • OBryant SE et al. <i>Staging Dementia Using Clinical Dementia Rating Scale Sum of Boxes Scores</i>. ArchNeurol. Vol 65 (No 8) Aug 2018. • Reisberg, B. <i>Functional Assessment Staging (FAST)</i>. Psychopharmacology Bulletin. 1988;24: 653-659. • Reisberg B. <i>The BEHAVE-AD Assessment System: A Perspective, A Commentary on New Findings, and a Historical Review</i>. Dement Geriatr Cogn Discord. 2014; 38(1-2):89-146. • UpToDate: selected articles on <i>NCD Subtypes</i> (ATTACHMENT) 	ASSIGNMENT: <ul style="list-style-type: none"> • Review these files related to NCD assessment 	B C
	OHSU GRAND ROUNDS <i>Senescent Changes, Nothing Acute Unpacking Cerebral Atrophy in Dementia</i> 2.16.2016	OHSU GRAND ROUNDS <i>Epigenomic Trajectories: Neuropsychiatric and Neurodegenerative Disease</i> 9.18.2018	

<p>SPECTRUM OF APPROACHES to NCD Tx</p>	<ul style="list-style-type: none"> • Mitchell SL. <i>Advanced Dementia</i>. NEJM. 372;26. June 25, 2015. • Kales HC, et al. <i>Management of Neuropsychiatric Symptoms of Dementia in Clinical Settings: Recommendations from a Multidisciplinary Expert Panel</i>. JAGS. 62:762-769, 2014. • <i>Dementia Sensory Strategies Chart (ATTACHMENT)</i> • ONeil M, et al. <i>A Systematic Evidence Review of Non-pharmacological Interventions for Behavioral Symptoms of Dementia</i>. Dept VA Evidence-based Synthesis Program. March 2011. • Mead R. <i>The Sense of an Ending</i>. New Yorker. Vol 89. Issue 14, p. 1-103. May 20, 2013. • Banu O, et al. <i>Pharmacotherapy for Inappropriate Sexual Behaviors in Dementia: A Systematic Review of Literature</i>. Am J Alzheimer's Dis Other Demen. 2008;23:344. May 28, 2008. • Valle Padilla D, et al. <i>Dementia Associated Wandering, Preventing Escape Attempts: A Case Report</i>. International Psychopharm (2013), 25:3,500-504. • Joller, et al. <i>Approach to Inappropriate Sexual Behaviors in People with Dementia</i>. Can Fam Physician 2013;59:255-60. • Martinez-Lapiscina EH, et al. <i>Mediterranean Diet Improves Cognition: the PREDIMED-NAVARRA Randomised Trial</i>. Neurol Neurosurg Psychiatry 2013;84:1318–1325. • UpToDate: selected articles on <i>NCD Treatment (ATTACHMENT)</i> 	<p>ASSIGNMENT:</p> <ul style="list-style-type: none"> • Review these files related to NCD management 	<p>B D</p>
	<p>AQUIFER CASE Geriatrics #04 85-year-old female with dementia https://ohsu-md.meduapp.com/document_sets/3182</p>	<p>ASSIGNMENT:</p> <ul style="list-style-type: none"> • Complete this Aquifer case module online 	
<p>SELF-ASSESSMENT</p>	<ul style="list-style-type: none"> • Tacker K. <i>NCD Game (ATTACHMENT)</i> 	<p>ASSIGNMENT:</p> <ul style="list-style-type: none"> • Conduct your own literature search on “Delirious Mania” or “Bell’s Mania” • Then QUIZ yourself! Open this “Jeopardy” style computer game via powerpoint in “slideshow” view, click on the “Home” icon button (bottom center of screen) and work your way through the Jeopardy board. (Ignore the links in the game that assume there is more than 1 team playing) 	<p>B C D</p>
<p>WEEKS #1-2 CLINICAL CASE STUDY + QUESTIONS (getting started...)</p>	<ul style="list-style-type: none"> • <i>Geriatric-Neurocognitive Disorder Case with Questions (ATTACHMENT)</i> 	<p>ASSIGNMENT:</p> <ul style="list-style-type: none"> • This documents the admission of a real geriatric inpatient. There are 32 geri-relevant questions in the right margin stimulated by factors in this patient’s case. • Conduct your own literature search and use the materials above to help you answer the imbedded case questions • [BY THE END OF WEEK #2: submit your answers to these 32 questions to the rotation director/supervisor for feedback] 	<p>A B C D</p>

WEEK 2: DELIRIUM & CAPACITY/GUARDIANSHIP

SUBTOPICS	EDUCATIONAL MATERIALS	ASSIGNMENTS	ACGME
DELIRIUM	<ul style="list-style-type: none"> Inouye SK. <i>Delirium in Elderly People</i>. The Lancet. Vol 383 March 8, 2014. Teslyar P, et al. <i>Prophylaxis with Antipsychotic Medication Reduces the Risk of Post-Operative Delirium in Elderly Patients: a Meta-Analysis</i>. <i>Psychosomatics</i> 2013;54:124-131. <i>Delirium Pocket Card (ATTACHMENT)</i> 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files pertaining to Delirium Dx and Tx Conduct a literature review to determine if “delirium prevention with peri-operative antipsychotics” is considered recommended practice in 2020. 	A C D
	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> AQUIFER CASE Geriatrics #06: 85-year-old female with delirium https://ohsu-md.meduapp.com/document_sets/3182 </td> <td style="width: 50%; text-align: center;"> AQUIFER CASE Geriatrics #05: 79-year-old female with agitation https://ohsu-md.meduapp.com/document_sets/3182 </td> </tr> </table>		
AQUIFER CASE Geriatrics #06: 85-year-old female with delirium https://ohsu-md.meduapp.com/document_sets/3182	AQUIFER CASE Geriatrics #05: 79-year-old female with agitation https://ohsu-md.meduapp.com/document_sets/3182		
CAPACITY + GUARDIANSHIP	<ul style="list-style-type: none"> Tacker K. <i>Capacity Basics</i> presentation slides (ATTACHMENT) Applebaum PS. <i>Assessment of Patients’ Competence to Consent to Treatment</i>. <i>NEJM</i>. 2007;357:1834-40. Moye J, et al. <i>A Conceptual Model and Assessment Template for Capacity Evaluation in Guardianship</i>. <i>The Gerontologist</i>. Vol 47, No 5, 591-603. Marson DV, et al. <i>Clinical Interview Assessment of Financial Capacity in Older Adults with Mild Cognitive Impairment and Alzheimer’s Disease</i>. <i>J Am Geriatr Soc</i>. 2009 May;57(5):806-814. Yazzolino W. <i>Capacity and Guardianship Oregon Elderlaw</i> presentation slides (ATTACHMENT) 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files pertaining to Capacity and Guardianship 	A B C
	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> POGOE GeriPod: Medical Decision Making in Assessing Capacity https://pogoe.org/productid/20853 </td> <td style="width: 50%; text-align: center;"> OHSU GRAND ROUNDS Speak for Yourself: The Wisdom of Preparing an Occupational Living Will 11.13.2018 </td> </tr> </table>	POGOE GeriPod: Medical Decision Making in Assessing Capacity https://pogoe.org/productid/20853	
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SELF-ASSESSMENT	<ul style="list-style-type: none"> McKenna K. <i>Delirious Mania Game (ATTACHMENT)</i> 	ASSIGNMENT: <ul style="list-style-type: none"> QUIZ yourself! (same instructions as in Week #1 Game) 	
WEEKS #1-2 CLINICAL CASE STUDY + QUESTIONS (continued)	<ul style="list-style-type: none"> <i>Geriatric-Neurocognitive Disorder Case with Questions (ATTACHMENT)</i> 	ASSIGNMENT (continued from Week 1): <ul style="list-style-type: none"> Conduct your own literature search and use the materials above to help you answer the 32 imbedded case questions BY THE END OF WEEK #2 (this week): Submit a written copy of your answers to these 32 questions to the rotation director/supervisor for feedback 	A B C D

WEEK 3: GERIATRIC PSYCHOSIS & COMPLEX MEDICAL ISSUES

SUBTOPICS	EDUCATIONAL MATERIALS	ASSIGNMENTS	ACGME
GERIATRIC PSYCHOSIS DIFFERENTIAL	<ul style="list-style-type: none"> Kyomen HH, Whitfield TH. <i>Psychosis in the Elderly</i>. Am J Psychiatry 166:2, February 2009. Cooke A, ed. <i>Understanding Psychosis and Schizophrenia</i>. British Psychological Society. Revised 2017. ISBN: 978-1-85433-748-1 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to Dx of psychosis in geriatric patients 	A D
	POGOE <i>Evaluation and Management of Late Life Psychosis</i> https://www.gerisage.com/modules/psychosis/1_Intro/1/intro1.htm	ASSIGNMENT: <ul style="list-style-type: none"> View this presentation video online Complete this POGOE module online 	
GERIATRIC PSYCHOSIS Tx	<ul style="list-style-type: none"> Hamer AM. <i>Pharmacologic Considerations in the Treatment of Schizophrenia and Psychosis</i> (ATTACHMENT) Rado J, Janicak PG. <i>Pharmacological and Clinical Profile of Recently Approved Second Generation Antipsychotics</i>. Drugs Aging (2012) 29:783-791. SGA Tx of Geriatric Schizophrenia <i>Clozapine Rems ANC Table</i>. Clozapine and the Risk of Neutropenia: An Overview for Healthcare Providers. Version 2. December 23, 2014. (ATTACHMENT) 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to treatment of psychosis Conduct your own literature search for any more current recommendations – do they differ? 	A D
CATATONIA	<ul style="list-style-type: none"> Tandon R, et al. <i>Catatonia in DSM-5</i>. Schizophrenia Research 150 (2013) 26-30. Dhossche DM, et al. <i>Etiopathogenesis of Catatonia</i>. J ECT 2010;26:253-258. Obregon DF, et al. <i>Memantine and Catatonia: A Case Review</i>. Journal of Psychiatric Practice. Vol 17, No 4. July 2011. Detweiler MB, et al. <i>Delirious Mania and Malignant Catatonia: A Report of 3 Cases and Review</i>. Psychiatric Quarterly. March 2009, Vol 80, Issue 1, pp 23-40. 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to catatonia 	A D
	OHSU GRAND ROUNDS <i>Catatonia in Residential Psychiatry</i> 5.3.2016	OHSU GRAND ROUNDS <i>Catatonia in Medically Ill: Trends and Novel Approaches</i> 1.23.2018	
WEEK #3 CLINICAL CASE STUDY + QUESTIONS	<ul style="list-style-type: none"> Complex Medical and Psychosis Case with Questions (ATTACHMENT) 	ASSIGNMENT: <ul style="list-style-type: none"> This Discharge Summary describes the hospitalization of a real geriatric inpatient. Conduct your own literature search and use the materials above to help you answer the imbedded case questions BY THE END OF WEEK #3: submit a written copy of your answers to these 14 questions to your rotation director/supervisor for feedback 	A D

WEEK 4: GERIATRIC CONSIDERATIONS in PSYCHOPHARMACOLOGY

SUBTOPICS	EDUCATIONAL MATERIALS	ASSIGNMENTS	ACGME
GERIATRIC GENERAL PHARM ISSUES	<ul style="list-style-type: none"> AGS 2019 Updated Beers Criteria for Potentially Inappropriate Medication Use in Older Adults. American Geriatrics Society. 2019. https://qioprogram.org/sites/default/files/2019BeersCriteria_JAGS.pdf Corsonello A, et al. <i>Explicit Criteria for Potentially Inappropriate Medications to Reduce the Risk of Adverse Drug Reactions in Elderly People: from Beers to STOPP/START Criteria.</i> Drug Saf. 2012;35 Suppl, 1:21-28. 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to common geriatric pharmacologic considerations 	A D
GERIATRIC PSYCHIATRIC PHARM CONSIDERATIONS	<ul style="list-style-type: none"> Ruelaz Maher A, et al. <i>Efficacy and Comparative Effectiveness of Atypical Antipsychotic Medications for Off Label Uses in Adults.</i> JAMA. 2011;306(12):1359-1369. Jeste DV, et al. <i>ACNP White Paper: Update on Use of Antipsychotic Drugs in Elderly Persons with Dementia.</i> Neuropsychopharmacology. (2008) 33, 957-970. Hermida J, Tutor JC. <i>A Theoretical Method for Normalizing Total Serum Valproic Acid Concentration in Hypoalbuminemic Patients.</i> J Pharmacol Sci. 97, 489-493 (2005). 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to geriatric psychopharm considerations 	A D
DRUG INTERACTIONS	<ul style="list-style-type: none"> Sandson NB, Armstrong SC, Cozza KL. <i>Med Psych Drug Drug Interactions Update: an Overview of Psychotropic Drug Drug Interactions.</i> Psychosomatics. 2005; 46:464-494. Bentue-Ferrer D, Tribut O, Polard E, Allain H. <i>Clinically Significant Drug Interactions with Cholinesterase Inhibitors.</i> CNS Drugs. 2003; 17(13):947-963. Plowchalk DR, Rowland Yeo K. <i>Prediction of Drug Clearance in a Smoking Population: Modeling the Impact of Variable Cigarette Consumption on the Induction of CYP1A2.</i> Eur J Clin Pharmacol (2012) 68:951-960. Desai HD, Seabolt J, Jann MW. <i>Smoking in Patients Receiving Psychotropic Medications.</i> CNS Drugs. 2001; 15(6)464-494. 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to drug interaction issues 	A D
ADVERSE EFFECTS	<ul style="list-style-type: none"> <i>Risperidone and Hypothermia Case Report Chart (ATTACHMENT)</i> Andersohn F, et al. <i>Priapism Associated with Antipsychotics.</i> J Clin Psychopharmacol. 2010;30:68-71. (unknown author) <i>Antipsychotics Adverse Effect Table (ATTACHMENT)</i> (unknown author) <i>Antipsychotic Cardiovascular Effects (ATTACHMENT)</i> Aebi C. <i>Adverse Drug Reactions Part I</i> presentation slides (ATTACHMENT) Aebi C. <i>Adverse Drug Reactions Part II</i> presentation slides (ATTACHMENT) Burkhard PR. <i>Acute and Subacute Drug Induced Movement Disorders.</i> Parkinsonism and Related Disorders. 20S1 (2014) S108-S112. 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to drug adverse effects 	A D
PSYCHOTROPIC DRUG INTERACTIONS + SELF-ASSESSMENT	<ul style="list-style-type: none"> Tacker K. <i>Psychotropic Medications Drug Drug Interactions presentation slides (ATTACHMENT)</i> Tacker K. <i>Psychotropics Drug Drug Interactions Quiz (ATTACHMENT)</i> 	ASSIGNMENT: <ul style="list-style-type: none"> Review this Powerpoint on Psychotropic Drug Drug Interactions and then use the associated Powerpoint Quiz as a self-assessment 	A D

WEEK 5: GERIATRIC DEPRESSION / SUICIDE & TRAUMA-INFORMED CARE

SUBTOPICS	EDUCATIONAL MATERIALS		ASSIGNMENTS	ACGME
GERIATRIC DEPRESSION	<ul style="list-style-type: none"> El Bayoumi H, et al. <i>Treatment Resistant Depression in Later Life. J Psychiatry and Neurosci.</i> 2015:40(6). Lee JK. <i>Depression in Older Adults-Pharmacotherapy. Elder Care – Resource for Interprofessional Providers.</i> University of Arizona Center on Aging. January 2020. UpToDate: selected articles on <i>Late Life Depression (ATTACHMENT)</i> 		ASSIGNMENT: <ul style="list-style-type: none"> Review these files on geriatric depression 	A C D
	OHSU GRAND ROUNDS <i>Interventional Psychiatry: ECT, TMS, and Ketamine</i> 12.4.2018	OHSU GRAND ROUNDS <i>Psychiatric Considerations in Menopause</i> 6.25.2019	ASSIGNMENT: <ul style="list-style-type: none"> View these presentation videos online 	
	POGOE <i>GeriPod: Depression in Older Adults Part 1 (Risks and Dx)</i> https://pogoe.org/productid/20599	POGOE <i>GeriPod: Depression in Older Adults Part 2 (Tx)</i> https://pogoe.org/productid/20745	ASSIGNMENT: <ul style="list-style-type: none"> Listen to these POGOE GeriPod podcases online. 	
	AQUIFER CASE Geriatrics #03: <i>65-year-old female with insomnia</i> https://ohsu-md.meduapp.com/document_sets/3182	AQUIFER CASE Geriatrics #07: <i>78-year-old male with depression</i> https://ohsu-md.meduapp.com/document_sets/3182	ASSIGNMENT: <ul style="list-style-type: none"> Complete these Aquifer Case Modules online 	
GERIATRIC SUICIDE	<ul style="list-style-type: none"> <i>Promoting Emotional Health and preventing Suicide: A Toolkit for Senior Centers.</i> HS Publication No. SMA-15-4416. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 2015. Szanto K, et al. <i>Research to Reduce the Suicide Rate Among Older Adults: Methodology Roadblocks and Promising Paradigms.</i> Psychiatr Serv. 2013 June;64(6):586-589. 		ASSIGNMENT: <ul style="list-style-type: none"> Review these files on suicidality in geriatric patients 	A
GERIATRIC TRAUMA INFORMED CARE	OHSU GRAND ROUNDS <i>Trauma Informed Approach: Understanding the Impact of How We Provide Services</i> 4.19.2016	OHSU GRAND ROUNDS <i>Listening to the Trauma Story</i> 11.1.2016	ASSIGNMENT: <ul style="list-style-type: none"> View these presentation videos online 	A B
	OHSU GRAND ROUNDS <i>Trauma Informed for Medical Clinicians</i> 3.21.2017	OHSU GRAND ROUNDS <i>Mental Healthcare for Elderly Refugees and Immigrants</i> 10.3.2017		
	AQUIFER CASE Geriatrics Case #08: <i>86-year-old female and elder abuse</i> https://ohsu-md.meduapp.com/document_sets/3182	AQUIFER CASE Geriatrics #25: <i>85-year-old male and restraints</i> https://ohsu-md.meduapp.com/document_sets/3182	ASSIGNMENT: <ul style="list-style-type: none"> Complete these Aquifer Case modules online 	
	<ul style="list-style-type: none"> <i>Formulation Brainstorming Tool: 4Ps BPS Chart (ATTACHMENT)</i> Phillips S. <i>Trauma Informed Care for Geriatric Patients Presentation Slides (ATTACHMENT)</i> <i>Trauma Informed Formulation Assignment Instructions (ATTACHMENT)</i> 		ASSIGNMENT: <ul style="list-style-type: none"> Review these files Complete assignment and submit/present to rotation director/supervisor by END OF ROTATION 	

WEEK 6: PSYCHOSOCIAL THEORIES OF AGING

SUBTOPICS	EDUCATIONAL MATERIALS	ASSIGNMENTS	ACGME	
PSYCHOSOCIAL THEORIES OF AGING	<ul style="list-style-type: none"> Bergstrom MJ, Holmes ME. <i>Lay Theories of Successful Aging After the Death of a Spouse: a Network Text Analysis of Bereavement Advice</i>. Health Communication. 2000, 12:4, 377-406. Schroots, J.F. Theoretical Developments in the Psychology of Aging. The Gerontologist. 1996, Vol 36, No 6, 742-748. Wang P. <i>Profiling Retirees in the Retirement Transition and Adjustment Process: Examining the Longitudinal Change Patterns of Retirees' Psychological Well-Being</i>. Journal of Applied Psychology. 2007, Vol 92, No 2, 455-474. Hao Y. <i>Productive Activities and Psychological Well-Being Among Older Adults</i>. Journal of Gerontology: Social Sciences. 2008, Vol 63B, No 2, S64-S72. Adams KB. <i>Changing Investment in Activities and Interests in Elders' Lives: Theory and Measurement</i>. Intl J Aging and Human Development. Vol 58(2) 87-108, 2004. Nimrod G, Kleiber DA. <i>Reconsidering Change and Continuity in Later Life: Toward an Innovation Theory of Successful Aging</i>. Intl J Aging and Human Development, Vol 65(1) 1-22, 2007. Carstensen LL, et al. <i>Taking Time Seriously: A Theory of Socioemotional Selectivity</i>. American Psychologist. March 1999, Vol 54, No 3, 165-181. 	ASSIGNMENT: <ul style="list-style-type: none"> Review these files related to psychosocial theories of aging 		
	<p style="text-align: center;">AQUIFER CASE Geriatrics #09: <i>82-year-old female and functional status and home safety</i> https://ohsu-md.meduapp.com/document_sets/3182</p>	<p style="text-align: center;">AQUIFER CASE Geriatrics Case #26: <i>78-year-old male and cultural competency in geriatric care</i> https://ohsu-md.meduapp.com/document_sets/3182</p>	ASSIGNMENT: <ul style="list-style-type: none"> Complete these Aquifer Case modules online 	A B C D
	<ul style="list-style-type: none"> <i>Psychosocial Theories of Aging Assignment Instructions (ATTACHMENT)</i> 		ASSIGNMENT: <ul style="list-style-type: none"> Complete assignment and submit/present to director/supervisor by END OF ROTATION 	