

Agenda

Geriatrics for Primary Care & Hospitalist - Comprehensive Live Virtual Review

Topic	Speaker
Introduction (5 minutes) 4 Ms	Dr. Taffet
Capacity and Behavioral Issues in Dementia	Dr. Naik
Rapid Geriatric Assessment	Dr. Naik
Optimizing Prescribing in Older Adults	Dr. Fernandez
Cognitive Assessment: Differentiating Normal Aging, MCI, Dementia versus Delirium	Dr. Imam
Hypertension	Dr. Taylor

Breakout groups (Hospitalists)

Topic	Speaker
Transitions of Care (include infection management)	Dr. Sohail
Behavioral and Psychological Symptoms of Dementia in Acute Care	Dr. Catic

Breakout groups (Primary Care)

Topic	Speaker
Dementia Treatment: When to Start, When to Stop	Dr. Catic
Practical Parkinson's for Primary Care	Dr. Imam

Learning Objectives

Topic	Learning Objectives
Introduction (5 minutes) 4 Ms	Introduction of 4 M of Geriatrics
Capacity and Behavioral Issues in Dementia	
Rapid Geriatric Assessment	
Optimizing Prescribing in Older Adults	<ol style="list-style-type: none">1. Provide overview of medication prescribing practices in aging patients in the United States2. Familiarize learners with current recommendations (eg. Beers criteria/STOPP/START criteria) regarding prescribing in aging patients3. Discuss how medication reconciliation and the process of deprescribing can help to optimize medication use in the aging population
Cognitive Assessment: Differentiating Normal Aging, MCI,	<ol style="list-style-type: none">1. <u>How</u> to differentiate normal aging, MCI, Dementia and different types of dementia Clinically2. <u>Why</u> it is important to differentiate3. <u>What</u> to do if MCI: Best Practice

Dementia versus Delirium	
Hypertension	<ol style="list-style-type: none"> 1. Be familiar with the advantages of routinely assessing orthostatic hemodynamics before starting and after changing medications in the ambulatory elderly. 2. Be aware that blood pressure treatment goals in the elderly are similar to those in middle-aged hypertensive individuals and that morbidity and mortality benefits of achieving those blood pressure goals are similar in elderly and middle-aged hypertensive individuals. 3. Be familiar with those medications that are most likely to successfully reduce elevated blood pressure in elderly hypertensive individuals in the inpatient and outpatient setting.

Breakout groups (Hospitalists)

Topic	
Transitions of Care (include infection management)	<ol style="list-style-type: none"> 1. Recognize patients who at risk for complex transitions 2. Identify challenges to post-discharge transitions 3. Discuss system-based solutions for effective care transitions.
Behavioral and Psychological Symptoms of Dementia in Acute Care	<p>At the conclusion of this presentation, participants will</p> <ol style="list-style-type: none"> 1. Be familiar with the most common psychotic and nonpsychotic behavioral and psychological symptoms of dementia 2. Understand common nonpharmacologic treatment measures which can be implemented in the acute care setting to address behavioral and psychological symptoms of dementia 3. Recognize when pharmacologic therapy may be indicated to address behavioral and psychological symptoms of dementia in the acute care setting

Breakout groups (Primary Care)

Topic	
Dementia Treatment: When to Start, When to Stop	<p>At the conclusion of this presentation, participants will</p> <ol style="list-style-type: none"> 1. Be familiar with FDA prescribing guidelines for the most common pharmacologic treatments for dementia (acetylcholinesterase inhibitors and memantine) 2. Understand how to address the risks/benefits of initiating pharmacologic dementia treatment with older adults and their families 3. Recognize the common indications for discontinuing pharmacologic dementia treatments and possible impacts on older adults with dementia
Practical Parkinson's for Primary Care	<ol style="list-style-type: none"> 1. Approach to diagnosis of Parkinson disease 2. Appreciate non-motor and non-traditional symptoms of Parkinson disease 3. Approach to differential diagnosis of Parkinsonism 4. Pharmacological and non-pharmacological treatments for Motor & Non Motor symptoms