Geriatric Medicine

COD 1b - Communication with patient and family

Part B: Communication with patient and family

Key Features

- This EPA builds on the competencies of the Foundations stage to focus on generating a feasible management plan using CGA, including communicating prognosis, care planning, and managing transitions of care
- This EPA includes creating a prioritized problem list with a patient- and/or family-centred management plan that projects functional status trajectory of, and assesses for, rehabilitative potential
- The observation of this EPA includes the completion of a CGA STACER* and is divided into three
 parts: management plan; communication with patient and family; communication with referring
 source

Target

- Collect 2 observations of achievement
- At least 2 different assessors
- At least 1 with CGA STACER

Case presentation

cognitive impairment; mood disorders; functional impairment/decline; railty/multicomplexity; mobility/falls/gait disorders; bone health; orthostatic hypotension; dizziness; sarcopenia and deconditioning; incontinence; weight loss and optimal nutrition; optimal prescribing; pressure ulcers/injuries; driving safety awareness

Setting

• inpatient consult; geriatric unit; outpatient clinic; day hospital; outreach

Assessor

Geriatrician

Milestones in Elentra

- COM 1.1 Communicate using a patient-centred approach that facilitates patient trust and autonomy and is characterized by empathy, respect, and compassion
- COM 3.1 Share information and explanations that are clear and accurate while checking for patient and family understanding
- COM 4.3 Answer questions from the patient and family about next steps