



Department of Medicine
Division of Geriatric Medicine

Resident Manual

**Sunnybrook Health Sciences Centre
2075 Bayview Avenue
Toronto, Ontario
Canada
M4N 3M5**

Main Tel: 416-480-6100 ext 6888

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1. INTRODUCTION

Welcome to Sunnybrook! This manual will assist in orienting you to Sunnybrook Health Sciences Centre (SHSC) and the Division of Geriatric Medicine. We hope that you will find this an educational and resourceful rotation.

1.1 Getting Started

On the first day of your rotation meet at the ICT office D480 at 9 a.m. You will receive a brief orientation to Specialized Geriatric Services (SGS) and your rotation here. This manual will also serve to orient you to the (SGS).

Registering: On your first day meet with Sinthujah Santhirasiri to register in the office of Postgraduate Education, Room E324, ext. 85044. She will assist you with the following:

Photo ID	Computer Training
IP & C Training	Mask Fit testing
Library privileges	Lab coats
Parking	Pager

Locker: To access a locker, please see Esther Williams in the Undergraduate Office, E313A

1.2 Useful facts about Sunnybrook:

Address: Sunnybrook Health Sciences Centre
2075 Bayview Ave.,
Toronto, Ontario, M4N 3M5
416-480-6100

Sunnybrook is accessible via TTC from the Lawrence or Davisville stations. Once you have SHSC staff identification you can take the Sunnybrook Shuttle from the Holland Centre, 43 Wellesley St., East, or Women's College, 76 Grenville St. or Yonge/Lawrence subway station. Parking is available at the Sunnybrook campus, please go to the parking office at Sunnybrook on C ground.

Locating: Locating (or communications) is located in Room DG27, ext. 4244

Paging: To page someone use SMART Paging on the Intranet, or dial 744. You will be prompted to enter the pager ID number of the person you want to page and your call back number

Library: The Library is located in room EG29. There is a full compliment of journals and texts. There are computers for literature searches and photocopying machines.

McLaughlin Lecture Theatre: EG 61, location of Medical Grand Rounds.

Medical Education Offices: Located on E3. Through the undergraduate office, you can access a laptop computer for presentations.

Computer Room: This is open to residents in the Department of Medicine. It contains computers, printers and scanners. You may use this room to access email, medical literature searches, word processing, and Power Point. The computer room is in Room D475 and is a locked room. Contact Dr. M. Cheung for the access code (ext 4991).

Stairwell access codes: K wing: 4589
L wing: 4589

Drug Information Services: This is an invaluable resource. The office is in EG03, ext 4513. You can call to get advice about medications, and the office also houses journals and articles that you are welcome to browse through and photocopy.

1.3 Division of Geriatric Medicine

Div. Geriatric Medicine Staff Physician	Room	Ext.	Pager ID#	Email
Dr. Barbara Liu	H481	6766	8304	barbara.liu@sunnybrook.ca
Laurie Kent→Admin Asst. to Dr. Liu	H479	6802		Laurie.kent@sunnybrook.ca
Dr. Rajin Mehta	L 101D	3956	7016	Rajin.Mehta@sunnybrook.ca
Samantha Ramsammy→Admin. Asst. to Dr. Mehta	HG62	5495		Samantha.ramsammy@sunnybrook.ca
Dr. Mireille Norris	HG40C	7840	8531	mireille.norris@sunnybrook.ca
Meera Chail→Admin Asst. to Dr. Norris	HG 39	7341		Meera.chail@sunnybrook.ca
Dr. Rory Fisher	L101B	6858	7073	Rory.Fisher@sunnybrook.ca
Dr. Dov Gandell	L101B	3640	TBA	Dov.Gandell@sunnybrook.ca
Dr. Giovanni Marotta	N/A	N/A	TBA	Giovanni.marotta@sunnybrook.ca

Secretaries	Affiliation	Ext.
Nordene Lyon	Divisional MD's and Clinic	4076
Sharon Melrose	Single Entry and SGS Admin	6888
Marian Mitchell	Day Hospital and Outreach	4033
Central Fax for Geriatrics	SGS	4778

1.4 Specialized Geriatric Services (SGS)

The Division of Geriatric Medicine is referred to as the Specialized Geriatric Services (SGS) and includes the following:

Internal Consultation Team (ICT)	D480
Geriatric Outpatient Clinic (GOC)	HG69
Geriatric Day Hospital (GDH)	HG71
Geriatric Outreach Team (GOT)	HG69

All of these programs focus on the frail elderly person, both in the hospital and within the community. Each service is staffed with a multidisciplinary team and the flow of patients is co-ordinated through the single entry office ext. 6888.

1.4.1 Single Entry System

All referrals to the specialized geriatric services are co-ordinated by the single entry →
Phone 416 480-6888.

Fax 416 480-4778.

Referral information is called or faxed to the Intake Secretary, which is then forwarded to the appropriate specialized geriatric service.

1.4.2 Goals of SGS

- to provide, in collaboration with the RGP, appropriate and timely specialized geriatric services to inpatients and to outpatients, within our catchment area, and to act as a tertiary referral centre of geriatric care
- manage our programs in a manner consistent with our philosophy to maximize patient benefit and minimize consumption of resources.
- develop our human resources by providing opportunities for participation in decision-making, for development of knowledge and skills and for interdisciplinary team work.
- develop and practice innovative educational methods in clinical teaching and patient and family education.
- engage in clinical research and in health service research directed toward appropriate, effective efficient use of the health care resources.
- provide knowledge of healthy aging
- provide knowledge of the physiological aspect of the aging process
- education on prevention, diagnosis, treatment and rehabilitation of illness and disability in the aged
- provide dissemination of new knowledge
- interdisciplinary collaboration in the care of seniors

1.5 What is Specialized Geriatric Services

SGS is comprised of a variety of services, which includes:

- Internal Consult Team
- Outpatient Clinics
- Outreach Team
- Day Hospital

All services are described below.

1.5.1 Internal Consult Team (ICT)

During your rotation you will be expected to complete consultations throughout the hospital. The consultations will be distributed amongst all housestaff.

Internal Consultation Team		Ext.	Pager ID#
Cathy Bald	Nurse Clinician	3194	1213
Ingrid Otten	Physiotherapy	2436	8222
Janna Di Pinto	Social Work	2505	1271

All consultations will be called into the Single Entry Office and are then given to the Nurse Clinician who co-ordinates the consultations.

Responsibilities during your rotation:

- Contact Cathy Bald, every morning to touch base about the plans for the day
- Complete comprehensive Geriatric Consultations as requested
- Review consultations completed by the interdisciplinary team (**Fellow**)
- Conduct written follow-up on the consultations completed re: labs and radiology tests
- Update the sign-out list
- Ensure ongoing communication with the referring team
- Provide a presentation on a Geriatric Issue that is of interest to you
- Attend teaching rounds given by the attending Geriatrician
- Conduct weekly formal teaching rounds with the Housestaff (**Fellow**)
- Provide supervision to the Junior Housestaff
- Be available for consultation to the emergency room. (**Fellow**)
- Geriatric Medicine Fellows will be assigned to a 1-2 month rotation (**Fellow**)

1.5.2 Geriatric Outpatient Clinics

The clinics include general geriatric assessment as well as specialized programs, including the Falls Prevention Program (see Day Hospital). The outpatient clinics are located in HG69.

Responsibilities during your rotation:

- Obtain an orientation to the Geriatric Clinic with Nordene Lyon ext. 4076
- Attend at least 2 clinics a week to assess new patients and any follow-ups on patients you have seen. (During the rotation you should ensure that you attend each of the geriatrician's clinics to broaden your exposure.)
- Follow up with the referring family physician as appropriate
- Communicate with any other team members as appropriate
- Dictate consultations
- Review and sign off consultation reports in a timely fashion
- Follow up on any investigations ordered on patients seen
- Assess new patients for the Day Hospital through the outpatient clinic and follow them in the Day Hospital. **(Fellow)**.
- Become familiar with administrative issues with SHSC and the RGP by contacting Dr. Liu ext 6766 or Dr. Mehta ext 3956. Contact them to set up educational sessions. We would also strongly suggest that you conduct an administrative project during your rotation. **(Fellow)**
- Geriatric Medicine Fellows will be assigned to a 1 month rotation in the clinic **(Fellow)**

1.5.3 Multidisciplinary Memory Clinic

Monday 12:30 in Ambulatory Clinic, E209

The Multidisciplinary Memory Clinic is a unique consultation clinic made up of 6 doctors (three staff members and three rotating fellows or residents-in-training) from the disciplines of Geriatrics, Neurology and Psychiatry, a social worker and a clinical coordinator. Contact the clinic coordinator Jennifer Bray who is located in room A421 ext. 2317 pager 7361.

Responsibilities during your rotation:

- Contact Jennifer Bray to arrange to attend at least one Memory Clinic during your rotation

1.5.4 Geriatric Outreach Team (GOT):

The GOT assesses elderly person living in the community with complex problems related to health, day to day functioning and social concerns. The Geriatric Assessment is conducted by one, or more members, of the GOT, in the client's home. Family members, family physicians, caregivers and other health care professionals already providing care are involved in the consultative process. Recommendations are made to improve the client's level of health, functioning and independence.

New referrals are discussed at the multidisciplinary case conference on Thursdays 12:00 – 13:00 in Room H483. Accepted referrals are assigned to a primary worker among the team members. The team acts in a consultative fashion, with limited long term follow up of cases. Cases are reviewed with a consulting Geriatrician when possible.

The catchment area for the is bordered by Steeles Avenue to the North, St. Clair Ave to the South, Avenue Road to the west and Victoria Park to the East.

Geriatric Outreach Team Member	Ext.	Room	Email
Sharon Van Vroenhoven, Nurse Clinician	3034	H-449	sharon.vanvroenhoven@sunnybrook.ca
Ingrid Otten, Physiotherapist	2436	H-447	ingrid.otten@sunnybrook.ca
Marian Mitchell, Secretary	4033	HG-75C	Marian.mitchell@sunnybrook.ca

Expectations during your rotation:

- Arrange at least one home visit with the Outreach Team (contact Sharon Melrose ext 6888)
- Become oriented to the Falls Prevention Program (contact Ingrid Otten, PT, ext 2436)
- Participate as a member of the Geriatric Outreach Team, attending case conferences and completing physician consultative home visits with the team
- Observe at least 2 home safety assessments with the occupational therapist and 2 mobility assessments with the physiotherapist of the GOT. **(Fellows)**

1.5.5 Geriatric Day Hospital:

The Geriatric Day Hospital (GDH) is located at the end to the HG 75c hallway. Patients of the GDH are frail elderly patients that would benefit from ongoing assessment and treatment. Most patients in the GDH attend twice a week, for a ½ day, and spend their time receiving therapy. The team members include, physicians, PT, OT, Nursing, Speech Therapy, Recreational Therapy, Psychology and Social Work.

The Falls Prevention Program is a 40 minute exercise based program, held twice a week for 6 weeks, including one session with the OT to discuss home safety issues.

Responsibilities during your rotation:

- Assess new patients for the day hospital through the outpatient clinic
- Follow any patients that you have seen that go on to attend the Day Hospital
- Contact Angela, Nurse (ext 4033) to tour the day hospital

Internal Medicine Housestaff may participate in the GDH if they desire.

2. EDUCATION PROGRAM

At SHSC there is an extensive educational program both in the Division of Geriatric Medicine and the Department of Medicine, which include:

- Formal review of the main geriatric syndromes with the Geriatrician on staff or Fellow
- Noon educational rounds. See calendar outside of office
- D470. Rounds are located in Room E115 at 12:00
- Aging rounds, usually Monday's, see SHSC e-mail news
- HOPE Curriculum
- Morning Report H421
- Grand Rounds, Wednesday 12 noon, McLaughlin Lecture Theatre
- Opportunities to teach ASCM II students

Please make full use of these programs.

3. EVALUATION

Evaluation of the geriatric medicine resident's performance during the 3 month rotation will be done at the middle and the end of the rotation, using the standard ITER.

Internal Medicine residents will receive feedback at 2 weeks and at the end of the rotation.

4. ROYAL COLLEGE EDUCATIONAL OBJECTIVES

Fellows in Geriatric Medicine will spend three months at SHSC in the first year of the subspecialty program. The three month block has been broken into two rotations.

The ambulatory rotation focuses on the outpatient clinics and home visits. Residents will be oriented to administrative issues and unique programs at SHSC.

The inpatient rotation focuses on comprehensive inpatient consultations and working with the multidisciplinary team members. You will be oriented to administrative issues and unique ambulatory programs at SHSC. Each rotation also has educational objectives.

Objectives for the Internal Medicine Residents will be tailored to the level of training and duration of the rotation. The objectives will be achieved through the review of comprehensive consultations and follow up cases as well as the formal educational program. Internal Medicine Residents will be given the opportunity to weight their rotation towards an inpatient or outpatient focus, depending on their personal objectives.

Educational Objectives

The educational objectives are encompassed in the objectives of the Royal College of Physicians & Surgeons of Canada. These may be obtained from the program director.

The Rotation specific objectives at SHSC for both in-hospital and clinic rotations include:

Medical Expert:

The medicine resident shall:

1. Understand the basic science of aging including the age related physiologic changes and how this may impact on the medical care of the elderly.
2. Demonstrate a clear understanding of the difference between age-related changes and disease.
3. Understand the basic pathophysiology of the main geriatric syndromes.
4. Demonstrate knowledge and an evidence based approach to the investigation and management of elderly patients in a legal and ethical aspect as it pertains to geriatric medicine with particular reference to the following areas:
 - Delirium
 - Dementia
 - Depression
 - Falls
 - Gait and balance disorders
 - Urinary and fecal incontinence
 - Behavioral disturbances
 - Weight loss
 - Functional decline
 - Pain syndromes
 - Osteoporosis
 - Pressure Sores
 - Neurodegenerative disorders

- Nutritional disorders
 - Preventive strategies
5. The trainee shall also demonstrate proficiency in the comprehensive geriatric assessment including:
 - Cognitive competency assessment
 - Gait assessment
 - Nutritional assessment
 - Functional Assessment
 6. The resident shall also be able to formulate an appropriate plan of investigation, management, and follow up of an elderly patient.

Communicator:

The medicine resident shall demonstrate:

1. The ability to obtain a thorough, comprehensive history from a geriatric patient.
2. The ability to obtain a collaborative history from the family, caregivers, and family physician of the elderly patient.
3. Demonstrate the ability to conduct an effective family meeting, interprofessional case conference and ward rounds where appropriate.
4. Demonstrate appropriate skills needed to effectively communicate with a hearing impaired patient.
5. Demonstrate appropriate communication skills with patients, family members, caregivers, referring physicians, community agencies, and members of the interprofessional team with the specialized Geriatric Services at SHSC.

Collaborator:

The medicine resident shall:

1. Participate and work effectively with the interprofessional team in the assessment and management of an elderly patient.
2. Have an understanding of the role of the members of the various interprofessional teams at SHSC and appropriately consult and interact with members of the interprofessional team.
3. Understand the interaction between the different components of the specialized geriatric services at SHSC in the provision of care for patients including clinics, day hospitals, home visits, and the Internal Consult Team.
4. Effectively interact with the members of the interprofessional team through daily interactions, and participation in case conferences.

Manager:

The medicine resident shall:

1. Under the appropriate supervision by the attending staff, take a leading role in managing the different components of the specialized geriatric services from a medical perspective.
2. Become familiar with the administrative issues both in local programs at SHSC and at the level of the Regional Geriatric Program of Toronto.
3. Understand the role that Specialized Geriatric Services (SGS) have in the care of

the elderly person and its interaction with other agencies including the RGP community agencies and long term care institutions.

4. Be aware of ageism and its impact on health care resource allocation.

Health Advocate:

The medicine resident shall:

1. Understand the impact of medical, psychosocial, and economic factors, which impact upon geriatric diseases and syndromes.
2. Understand the importance of preventive strategies in the care of a geriatric patient with particular relevance to:
 - Delirium
 - Polypharmacy
 - Falls
 - Influenza
 - Osteoporosis
 - Cancer
 - Stroke Prevention
 - Functional Decline

Scholar:

The medicine resident shall:

1. Demonstrate effective teaching skills through the participation in teaching of medical students, residents, and members of the interprofessional team.
2. Develop teaching skills both in an individual and group teaching situation.
3. Effectively appraise the geriatric medicine literature and apply this to the care of the elderly patient

Professional:

The medicine resident shall:

1. Demonstrate appropriate professional behaviors in their interactions with patients and other health care professions.
2. Demonstrate an appropriate degree of responsibility including self learning and self directed learning, follow-up of appropriate tasks, and timelines as well as appropriate time management.