

Geriatrics Home Visit Student Worksheet

- Introduce yourself & thank the older adult for volunteering to teach you and for allowing you to visit in their home.
 - Please clean your hands. If they have hearing impairment, speak clearly, slow down and lower your pitch.
 - Explain that you will be asking them about a few aspects of their health as part of the “Geriatric 5Ms” of Mobility, Mind, Medications, Multicomplexity and What Matters Most (Tinetti et al, JAGS 2017).
1. **First, life in general:** First, ask the older adult to tell you about them. You can start by asking about their life story in general – where did they grow up, their social roles in their family, work, religious community, military, etc.

 **Mobility**

2. **Function:** Take a functional history (ADLs and IADLs). Start by asking “Tell me about a typical day”. Whatever the open ended question didn’t answer, fill in the rest below. For each item, ask if the patient performs the ADL or IADL *independently, with assistance* or is *dependent* on others. If they need help – who provides it? How often?

ADL	Level of Function/Assistance	IADL	Level of Function/Assistance
1. Feeding		1a. Telephone use 1b. Computer use	
2. Bathing		2. Shopping	
3. Grooming (include foot care)		3. Food Preparation	
4. Dressing		4. Housekeeping, Laundry	
5. Toilet use, incontinence		5. Mode of Transportation	
6. Transfers (from bed to chair)		6. Medications	
7. Mobility (include stairs)		7. Finances	

Notes:

3. **Mobility assessment: Timed Up and Go “TUG” test** (including chair stand): if safe to do so, ask the volunteer to stand up without using their arms, and then walk 10 feet and back to the chair. See here for the Timed Up and Go instructions: https://www.cdc.gov/steady/pdf/TUG_Test-print.pdf ; >12 seconds indicates higher fall risk.
- Chair stand: [] able without using arms [] able using arms [] unable
 - TUG time: Stand up, walk 10 feet and back in _____ seconds. Assistive device used? [] none [] cane [] walker
 - Observations:
4. **Fall risk assessment:** Has the volunteer had any falls or near falls? Ask about and list some of their intrinsic and extrinsic (environmental) fall risk factors.

Mind

5. Assess for **sensory impairment**:

- Ask about vision
- Ask about hearing and if they have had an 'ear cleaning' for wax
 - Do finger rub test
- Ask about teeth and dentition

6. **Memory**: Perform and interpret a brief cognitive screening with the Mini-Cog™ tool

1. Repeat 3 words (banana, sunrise, chair), give 2 attempts
2. Draw a clock, put in all the numbers, set the time at ten past 11
3. Can you tell me the three words?

Medications

7. **Medications**: If the volunteer is comfortable sharing, ask them about their medications. Take a medication inventory (don't worry about doses for today) and begin to understand the concept of polypharmacy

- How many medications? How do they keep track? Any adverse effects? *If time, ask:*
 - *How many times a day? How many routes of administration (pill, liquid, inhaler, drops, etc.)?*
 - *Who manages the meds? Is there a pillbox? How many prescribers are involved? Pharmacies?*

Multicomplexity

8. Ask about social determinants of health
9. How do your medical conditions affect your life?

Matters Most

10. Current Care Planning: What is most important to you when it comes to your health? What are some of your goals?
11. Advanced care planning: Ask if they have a health care proxy - Who would they want to make decisions for them in case of an emergency? Have they drawn up a POLST form and/or advance directive? Where is it located?
12. What advice do you have for medical or dental students in general? What do you wish all doctors knew/did when caring for older adults?

Thank the volunteer for allowing you in to their home and for helping you learn!

Hand sanitize and join your preceptor back in the community room of the building to debrief the visit together.