

EPAs are the critical activities that define a specialty. These are written from the perspective of an end-of-training geriatrics fellow who is ready to enter into unsupervised practice. They are not intended to capture every entrustment decision that occurs over the course of fellowship training. To present a manageable list and allow flexibility in how programs assess fellow competence for the ACGME Next Accreditation System (NAS), these EPAs are intentionally broad.

Geriatricians entering into unsupervised practice, in and across all care settings, are able to:

- 1. Provide patient centered care that optimizes function and/or well-being.**
- 2. Prioritize and manage the care of older patients by integrating the patient's goals and values, co-morbidities and prognosis into the practice of evidence-based medicine.**
- 3. Assist patients and families in clarifying goals of care and making care decisions.**
- 4. Prevent, diagnose and manage geriatric syndromes.**
- 5. Provide comprehensive medication review to maximize benefit and minimize number of medications and adverse events.**
- 6. Provide palliative and end-of -life care for older adults.**
- 7. Coordinate healthcare and healthcare transitions for older adults with multimorbidity and multiple providers.**
- 8. Provide geriatric consultation and co-management.**
- 9. Skillfully facilitate a family meeting.**
- 10. Collaborate and work effectively as a leader or member of an interprofessional health care team.**
- 11. Teach the principles of geriatric care and aging-related health care issues to professionals, patients, families, health care providers and others in the community.**
- 12. Collaborate and work effectively in quality improvement and other systems-based initiatives to assure patient safety and improve outcomes for older adults.**

This list has been developed and refined over the past two years by geriatrics educators in various settings including at AGS, ADGAP and Reynolds grantees meetings. The Working Group consisted of:

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