

Content Blueprint for the Geriatric Medicine CAQ Examination

The Geriatric Medicine CAQ Content Blueprint provides information on how exam questions are allocated to the different medical content categories and associated task categories that have been deemed important for PAs working within the specialty area.

The examples provided for each medical content category are indicative of the types of information that will be included on the examination. It is not possible to include all topics on a single examination, and it may be possible that some questions on a single examination cover content that is not listed in the examples.

Medical Content Categories

1.	Medical Conditions in Older Adults	33%
2.	Geriatric Syndromes	25%
3.	Behavioral Health in Older Adults	20%
4.	Special Considerations for Older Adults	10%
5.	Ethical/Legal Issues and Advance Care Planning	12%

Task Categories

A. Geriatric Assessment	25%
B. Diagnostic Studies	8%
C. Diagnosis and Prognosis	15%
D1. Nonpharmaceutical Management	20%
D2. Pharmaceutical Management	20%
L. Ethical/Legal Issues and Advance Care Planning	12%

Medical Content Categories

1. Medical Conditions in Older Adults (33%)

- A. Cardiovascular
 - Arrhythmia
 - o Coronary artery disease
 - Heart failure
 - Hypertension/hypotension
 - Orthostatic hypotension
 - o Peripheral artery disease
 - Valvular disease
- B. Dermatology
 - o Cellulitis
 - Dermatitis
 - Malignancies
 - Pressure injuries and staging
 - o Pruritus
 - Skin tears

- C. Ears, nose, and throat
 - Hearing impairment
- D. Endocrine
 - o Diabetes mellitus
 - Osteoporosis
 - Thyroid disorders
- E. Gastrointestinal
 - Constipation
 - o Dysphagia
 - o Fecal incontinence
 - o Gastroesophageal reflux disease
 - o Gastrointestinal bleed
 - o Hepatic disorders
 - Small-bowel obstruction
 - Vitamin deficiencies
- F. Genitourinary
 - Benign prostatic hyperplasia

- Sexual dysfunction
- Urinary incontinence
- Urinary retention
- Urinary tract infections
- Vaginal atrophy
- G. Hematology/oncology
 - Blood dyscrasias
 - Complications of malignancies
- H. Infectious disease
 - Atypical presentations
 - o Clostridioides difficile infection
 - Sepsis
- Musculoskeletal and rheumatology
 - o Common geriatric fractures
 - o Gout
 - Osteoarthritis
 - Psoriatic arthritis
 - o Rheumatoid arthritis
- J. Nephrology
 - o Acute kidney injury
 - o Chronic kidney disease
 - Electrolyte imbalances
- K. Neurology
 - Dementia and moderate to major neurocognitive disorder
 - Alzheimer disease
 - Frontotemporal dementia
 - Lewy body dementia
 - Vascular dementia
 - o Essential tremor
 - Mild cognitive impairment (minor neurocognitive disorder)
 - o Parkinson disease
 - Seizures
 - o Stroke
 - Traumatic brain injury
- L. Ophthalmology
 - Cataracts
 - o Glaucoma
 - Macular degeneration
- M. Oral health
 - Dentures
 - o Thrush
- N. Pulmonary
 - Acute respiratory failure
 - Asthma
 - o Chronic obstructive pulmonary disease
 - o Pneumonia
 - o Pulmonary embolism
 - o Sleep apnea

2. Geriatric Syndromes (25%)

- A. Deconditioning
- B. Delirium/encephalopathy
- C. End-of-life care
 - Hospice care
 - Medical aid in dying
- D. POLST
- E. Healthcare policy and advocacy

- F. Dizziness and lightheadedness
- G. Frailty
- H. Nutrition and weight issues
 - Failure to thrive
 - Involuntary weight loss
 - Obesity
 - o Undernutrition
- I. Pain
- J. Sleep disturbances
- K. Syncope

3. Behavioral Health in Older Adults (20%)

- A. Adjustment disorders
 - Acute grief reaction
 - Prolonged grief disorder
- B. Bipolar disorders
- C. Mood disorders
 - Anxiety
 - Depression
- D. Psychotic disorders
- E. Substance use disorders
- F. Suicidality
- G. Other psychiatric disorders
 - o Neuroleptic malignant syndrome
 - Personality disorders
 - o Serotonin syndrome
 - Somatic symptom and related disorders

4. Special Considerations for Older Adults (10%)

- A. Common iatrogenic problems
- B. Complementary/alternative and integrated medicine
- C. Cultural, religious, and spiritual aspects of aging
- D. Palliative medicine
- E. Sexual health

5. Ethical/Legal Issues and Advance Care Planning (12%)

- A. Ethical principles of care
 - Accountability
 - Autonomy
 - o Beneficence
 - Justice
 - Nonmaleficence
- B. Shared decision-making
- C. Capacity/competency
- D. Mandatory reporting
 - Driving
 - Health department
 - o Protective services
- E. Advance directive
- F. Code status



Task Categories

A. Geriatric Assessment (25%)

		Recognize components of a comprehensive geriatric assessment (e.g., sensory impairment, fall risk, nutrition, cognitive screening, ADLs and IADLs, patient goals) Recognize characteristics that contribute to multimorbidity Identify patient's support network Recognize need to engage a trusted source to obtain additional information Recognize signs of potential mistreatment/neglect and determine appropriate assessment Identify appropriate age-based and preventative screening (e.g., frailty, cognition, nutrition status, incontinence, behavioral health, substance use, fall risk, neglect and mistreatment) Use shared decision-making to identify appropriateness of screening and to recommend appropriate follow-up Recognize the role of the five Ms (what Matters most, Medications, Mentation, Mobility, Multicomplexity) Understand how aging affects physiology Recognize normal aging Recognize social and economic determinants of health and aging and environmental safety risks
В.	Diagno	ostic Studies (8%)
		Identify the indications and contraindications of a diagnostic test or procedure Identify the risks and benefits of invasive testing that may impact quality of life Select the appropriate diagnostic test or procedure Interpret results of a diagnostic test or procedure for a patient with a known diagnosis Recognize age-adjusted normal values
C.	Diagno	osis and Prognosis (15%)
		Determine the differential diagnosis Recognize age-related risk factors of common medical conditions Identify potential reversible causes of symptoms (e.g., infection, medication, injury, environment, latrogenic causes) Recognize constellations of symptoms that may indicate a syndrome and the implications thereof Use test results as well as history and findings on physical examination to make a diagnosis Identify or predict possible complications of a condition on the basis of functional status and comorbidities Identify potential impact of diagnosis and treatment on functional outcomes Recognize when to calculate and discuss prognosis with a patient and/or family
D1.	Nonp	harmaceutical Management (20%)
	00 000	Interpret results of screening to determine appropriate follow-up Identify appropriate patient education and follow-up instructions to patient and family/caregiver (e.g., lifestyle and diet modifications, physical activity) Identify appropriate immunizations Determine appropriateness of age-related screening Select the appropriate intervention on the basis of function, patient goals, and care setting (e.g., referrals to specialists, community-based resources, interprofessional team members; durable medical equipment; nonintervention such as reassurance or do nothing) Recognize age-related risk factors of common medical conditions and procedures Recognize when to recommend transition to a new care setting



Pharmaceutical Management (20%)			
	Recognize appropriate indications for medication use in older adults Identify medications that require monitoring		
	Use evidence-based tools to identify high-risk medications (e.g., anticholinergics, NSAIDs, benzodiazepines, antipsychotics, anticoagulants, antibiotics)		
	Identify alternatives to high-risk medications		
	Recognize risks of adverse effects, drug interactions, and contraindications		
	Identify appropriate patient education on risks of adverse effects and drug interactions		
	Identify appropriate route of administration and delivery device		
	Recognize when to discontinue medication or reduce medication dose		
	Recognize polypharmacy/prescribing cascade and identify a plan for deprescribing		
L. Ethical/Legal Issues and Advance Care Planning (12%)			
	Determine appropriate end-of-life care		
	Identify reporting requirements for any type of abuse (e.g., mistreatment, neglect)		
	Identify reporting requirements for communicable disease		
	Identify reporting requirements for concerns about driving safety in older adults		
	Identify, interpret, and comply with advance care plans		
	Recognize ethical principles of decision-making		
	Recognize the differences between advance directives and medical orders		
	Ethical		

