



Geriatric Medicine Survey

This survey will be used to define the needs of geriatricians and other healthcare professionals that care for seniors. Your input is appreciated.

1. What do you perceive to be the biggest clinical deficiencies in a geriatricians practice today? _____

2. What do you perceive to be the biggest clinical deficiencies within the nursing facilities in which you practice? _____

3. Which of the following disease states do you perceive need improvement in clinical practice management? (Please check all that apply)

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Pain management | <input type="checkbox"/> Depression | <input type="checkbox"/> Insomnia | <input type="checkbox"/> Respiratory diseases |
| <input type="checkbox"/> Dementia/AD | <input type="checkbox"/> Hematology | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Oncology |
| <input type="checkbox"/> Heart failure | <input type="checkbox"/> DVT/ PE | <input type="checkbox"/> Law/Legal | <input type="checkbox"/> Nutrition |
| <input type="checkbox"/> Infectious disease | <input type="checkbox"/> GeriaPsych | <input type="checkbox"/> Renal Disease | <input type="checkbox"/> Wound Care |
| <input type="checkbox"/> Cardiovascular disease | <input type="checkbox"/> Musculoskeletal disorder (Parkinson's, etc) | | |
| <input type="checkbox"/> Hospice/End-of-life care | <input type="checkbox"/> Genitorurinary/gastrointestinal | | |
| <input type="checkbox"/> Other (please elaborate) | _____ | | |

4. For the topics mentioned above, what aspects of the disease state should be improved?

5. Which of the following disease states are of the greatest concern within the facilities in which you practice? (Please check all that apply)

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| <input type="checkbox"/> Hospice/End-of-life care | <input type="checkbox"/> Genitourinary/gastrointestinal | | |
| <input type="checkbox"/> Other (please elaborate) _____ | | | |

6. a. What non-clinical aspects are most problematic within a geriatric/medical director's practice? (Please check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Regulatory/survey issues | <input type="checkbox"/> Legal/law issue | <input type="checkbox"/> State/Federal Issues |
| <input type="checkbox"/> Practice finance | <input type="checkbox"/> Collaborating practice Issues | |
| <input type="checkbox"/> Patient/resident counseling | <input type="checkbox"/> Technology usage within the practice | |
| <input type="checkbox"/> Marketing the practice | <input type="checkbox"/> Developing effective communication skills | |
| <input type="checkbox"/> Implementing policies and procedures within the facility | | |
| <input type="checkbox"/> Other (please elaborate) _____ | | |

b. Why are these non-clinical aspects most problematic?

7. Do you perceive there are differences in effectiveness of the various types of methods used to deliver continuing education? yes no

8. If yes, what do you perceive are the most effective methods to deliver continuing education? (Please check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Live webcast | <input type="checkbox"/> CD-ROM | <input type="checkbox"/> Home study print |
| <input type="checkbox"/> Teleconference | <input type="checkbox"/> Live program in your area | |
| <input type="checkbox"/> Other (please elaborate) _____ | | |

If no, what methods for delivery of continuing education might increase your interest in participation? _____

9. Are there other important topics your nursing homes are interested in learning about?

10. Any other comments/suggestions? _____

Name Degree(s)

University/Affiliation Title

Company

Address

City State ZIP

Telephone Fax E-mail

