

Other subspecialties of internal medicine

Our focus on older adults is similar to the focus of other internal medicine subspecialties concerned with specific organs, conditions, diseases, or age groups. Other subspecialties include gastroenterology (digestive tract), cardiology (heart), pulmonology (lungs), endocrinology (diabetes and other glandular disorders), nephrology (kidneys), hematology (blood), hepatology (liver), oncology (cancer), infectious diseases, allergy and immunology, rheumatology (arthritis), sports medicine, and adolescent medicine.



Clearing up some confusion

We doctors of internal medicine are also known as “internists.”

This should not be confused with “interns,” who are doctors in their first year of training after medical school.

Nor are we the same as “general practitioners” (GPs), or “family physicians” (FPs), whose practices may include surgery, obstetrics and pediatrics, and whose training is not solely concentrated on adults.

A public education publication from the
American College of Physicians —
American Society of Internal Medicine
(ACP—ASIM)*
representing

115,000 doctors of internal medicine and medical students.

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*With support from the American Board of Internal Medicine Foundation. 700101300

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G E R I A T R I C S
INTERNAL MEDICINE
DOCTORS FOR ADULTS™

Your Internist is a Geriatrician



We specialize in older adults

Geriatrics is the subspecialty of internal medicine concerned with the health and well-being of older adults.

We geriatricians must first complete seven or more years of medical school and postgraduate training and attain Board Certification in Internal Medicine. For an additional 12 months, we study conditions specific to aging, including geriatric assessment and rehabilitation, preventive medicine, management of patients in long-term care settings, and psychosocial, ethical, legal, and economic issues pertinent to geriatric patients. After that, we take the examination for the Certificate of Added Qualifications in Geriatric Medicine (C.A.Q.).

What we do

We diagnose, treat and manage diseases and conditions that require a special approach when dealing with older adults. We give special attention to situations of special concern, including falls, incontinence, preoperative assessment and post-operative management, cerebrovascular disease, dementia, sensory impairment and other cognitive and affective changes that occur with aging.

When you need a geriatrician

Geriatricians often become the primary physician for older adults. If this is not the case, your primary care physician might refer you to us when a problem associated with aging requires special attention.

In some cases, a family member might recognize a need for a geriatrician and suggest you consult one of us.

How we work with your primary care physician

If we are not serving as your primary physician, we geriatricians often work with other physicians, advising them about a specific diagnosis or treatment plan. More often, we act as primary care physician, relying on many skilled professionals — other subspecialists of internal medicine, nurses, physical and occupational therapists, psychiatrists, psychologists, pharmacists, and social workers.

