Geriatric medicine

Geriatric medicine the branch of medicine concerned with all aspects of health and illness in older adults. It is the largest medical specialty.

This page provides useful information on the nature of the work, the common procedures/interventions, sub-specialties and other roles that may interest you.

Nature of the work

Geriatricians have an interesting and varied job which involves providing comprehensive medical care to older people, who may have may have several medical conditions and are often taking multiple medications. The work also involves promoting better health in old age.

Changes that occur as a result of ageing mean that older people have different patterns of disease presentation when compared to younger adults, and they respond to treatments and therapies in different ways.

Common problems faced by elderly people include falls with or without fracture, delirium, dementia, incontinence, poor mobility and frailty.

Geriatricians may work in a variety of hospital and community settings including:

- outpatient departments
- A&E
- medical assessment units
- acute care wards (eg coronary care, high dependence, intensive care \[1\] and acute stroke \[2\] care)
- rehabilitation wards
- intermediate and long term care wards
- day-care centres
- care homes
- hospices

Geriatricians provide a patient-centred, compassionate and holistic \[3\] approach. They work very closely with GPs, other hospital doctors, social workers and many others involved in caring for elderly people including families and carers. Diagnosis and management of acute illness as well as chronic disease, disability and frailty is all part of the job.

Working very closely with other professionals in multidisciplinary teams (MDTs) is vital. With the integration of community care and health, NHS trusts work closely with community
organisations to offer a joined-up service.

Providing rehabilitation after an illness is a key aspect of the work, and geriatricians will work with other team members to enable patients to work towards specific rehabilitation goals. Developing a good knowledge of physical treatments and adaptations and aids is important.

Another vital aspect of the role is enabling patients to be supported at home rather than being admitted to hospital and to enable those who have been in hospital to return home where possible. Planning the effective transfer of frail older patients from hospital can be complex and the geriatrician is closely involved in this process.

During training geriatricians need to develop competence in palliative or end of life care and planning, orthogeriatrics (medical care for people with orthopaedic trauma), old age psychiatry and specialist stroke care.

Older people may react differently to drugs and geriatricians need a comprehensive knowledge of adverse drug reactions, drug interactions and how these might be affected by different diseases.

Understanding the legal and ethical issues surrounding work with elderly people is important, including appointment of power of attorney, guardianship, mental health legislation and resuscitation.

Consultants are involved in the effective management of geriatric services and there are also ample opportunities for research.

There are also many opportunities to develop special interests within the specialty. These can be based around a particular stage in a person’s illness (known as temporal) or based around specific disease processes. Most geriatricians enjoy looking after a wide range of conditions.

“Every patient brings a different challenge and no two days are the same” Adam Gordon Consultant geriatrician and clinical professor in medicine of older people.

[Read Adam’s story](#)

**Common procedures/interventions**

These include:

- performing a comprehensive assessment of an older person, including mood and cognition, gait, nutrition and fitness for surgery, including physical examinations where necessary
- assessing a patient’s suitability for continuing care in the NHS or community
- assessing the outcome of rehabilitation

**Sub-specialties**

- stroke medicine
Want to learn more?

Find out more about:

- the working life [5] of someone in geriatric medicine
- the entry requirements [6] and training and development [7]
- a first-hand account of life in geriatric medicine [8]

- Pay and conditions

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This section provides useful information about the pay for junior doctors (doctors in training), specialty doctors, consultants and general practitioners.

Find out more about the current pay scales for doctors [9], and there’s more information on the BMA website [10].


Medical staff working in private sector hospitals, the armed services or abroad will be paid on different scales.

- Where the role can lead

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Read about consultant and non-consultant roles in geriatric medicine, flexible working and about wider opportunities.

**Consultant roles**

You can apply for consultant roles six months prior to achieving your Certificate of Completion of Training [12] (CCT [13]). You will receive your CCT [13] at the end of geriatric medicine.

Managerial opportunities for consultants include:

- clinical lead - lead NHS consultant for the team
- clinical director - lead NHS consultant for the department
- medical director - lead NHS consultant for the Trust

Most NHS consultants will be involved with clinical and educational supervision of junior doctors.

Here are some examples of education and training opportunities:

- director of medical education - the NHS consultant appointed to the hospital board who is responsible for the postgraduate medical training in a hospital. They work with the postgraduate dean to make sure training meets GMC standards.
- training programme director - the NHS consultant overseeing the education of the local cohort of trainee doctors e.g. foundation training [14] programme director. This role will be working within the LETB/deanery
- associate dean - the NHS consultant responsible for management of the entirety of a training programme. This role will be also be working within the LETB/deanery

**SAS doctor roles**

There are also opportunities to work at non-consultant level, for example as a SAS (Specialist and Associate Specialist) doctor. SAS doctors are non-training roles where the doctor has at least four years of postgraduate training, two of those being in a relevant specialty. Find out more about SAS doctor roles [15].

**Other non-training grade roles**

These roles include:

- trust grade
- clinical fellows

**Academic pathways**

If you have trained on an academic geriatric medicine pathway or are interested in research there are opportunities in academic medicine.

For those with a particular interest in research, you may wish to consider an academic career in geriatric medicine. Whilst not essential, some doctors start their career with an Academic Foundation post. This enables them to develop skills in research and teaching alongside the basic competences in the foundation curriculum.

Entry into an academic career would usually start with an Academic Clinical Fellowship (ACF) and may progress to a Clinical Lectureship (CL). Alternatively some trainees that begin with an ACF post then continue as an ST trainee on the clinical programme post-ST4.

Applications for entry into Academic Clinical Fellow posts are coordinated by the National Institute for Health Research Trainees Coordinating Centre (NIHRTCC) [16]

There are also numerous opportunities for trainees to undertake research outside of the ACF/CL route, as part of planned time out of their training programme. Find out more about clinical academic medicine [17].

The Clinical Research Network [18] (CRN) actively encourages all doctors to take part in clinical research.

**Other opportunities**
There are many opportunities for teaching and examining as geriatricians are highly skilled professionals with dual training in general internal medicine as well as geriatric medicine. In the UK it is the largest of the medical specialties. Geriatricians are increasingly being seen as effective medical managers and problem solvers, meaning there is a wide range of opportunities available.

- **Job market and vacancies**

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  This section provides useful information about the availability of jobs, finding vacancies and where to find out more.

  **Job market information**

  Geriatric medicine is one of the largest branches of general medicine. Geriatric medicine had 1,233 consultants and 1,010 medical registrars in England (NHS Digital 2016 [19]). Women make up 39% of the consultant workforce, and 62% of higher specialty trainees in the UK (2014-15 RCP census, 2016 [20]).

  In 2012-13, the sixth highest number of consultant appointments were made in geriatric medicine (26 in total) although this amounted to only half the attempted appointments due to no applicants at all or a lack of suitable candidates.

  The expansion of acute medicine is a priority for the NHS. However, geriatric medicine failed to fill half of available consultant posts in 2011 mainly due to a lack of applicants. With an ageing population, pressure on secondary care [21] services is likely to continue (Source: BMA 2011 census).

  The competition ratio [22] for Core Medical Training [23] (CT1), the first stage in the training (post-foundation), in 2016 was 1.53 (NHS Specialty Training 2016). [24]

  The ratio of applicants to ST3 posts in 2016 was 1.83, 264 applicants to 144 posts (NHS Specialty Training 2016). [25]

  **On this section we have information for England only.** For information regarding Scotland, Wales and Northern Ireland please click on the links below.

  NHS Scotland medical and dental workforce data [26]

  NHS Wales medical and dental workforce data [27]

  Department of Health, Social Services and Public Safety workforce information for Northern Ireland [28]

  **Where to look for vacancies**

  All trainees apply through the online application system Oriel [29]. You will be able to register for training, view all vacancies, apply, book interviews and assessment centres, and manage offers made to you.
All jobs will be advertised on the NHS Jobs website [30].

The BMJ Careers website [31] also advertises vacancies.

- Further information
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Organisations

Royal College of Physicians [32]

Royal College of Physicians of Edinburgh [33]

Royal College of Physicians and Surgeons of Glasgow [34]

The British Geriatrics Society [35]

Association for Elderly Medicine Education [36]

British Association of Stroke Physicians [37]

Real-life stories

A career in geriatricians (UKFPO) [38]

Dr Sally Jones, consultant geriatrician (RCP) [39]

Dr Jenny Lonnen, an ST5 trainee in geriatric medicine (RCPE) [40]

Dr Michael Alcorn, an ST5 trainee in geriatric medicine and GIM (RCPE) [41]

Articles

Future hospital [42]

Other roles that may interest you

- Neurology [43]
- Palliative medicine [44]
- Rehabilitation medicine [45]
- General internal medicine [46]

Source URL: https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/medicine/geriatric-medicine

Links
[1] https://www.healthcareers.nhs.uk/glossary#Intensive_care