

Dear Colleagues:

"You're not getting older, you're getting better" was a popular television advertising slogan from the 1970's that continues to convey younger adults' prevailing desire to age well. As our population grows older, the occurrence of chronic illness and injury will threaten, but not necessarily overcome a person's ability to age successfully, provided that medical care services are delivered effectively and optimally across the life-span. To age well, older adults, particularly those who are "old-old", often require an individualized care approach that emphasizes preservation of physical functioning as well as age-appropriate management of chronic diseases. Despite patients' and their families' demands to modify and standardize the paradigm of elder-care for all older adults in this way, the U.S health care system has created an impediment to that progress and medical education has been slow to keep pace with our nation's changing demographics. As a consequence, we now have an urgent need to train more geriatricians – physicians who are capable of rendering high quality, patient-centered health care to older adults with multiple and complex health problems.

With its statewide community campus system and over twenty years of experience as a leader in geriatric education, Michigan State University has embarked on a plan to develop a network of geriatric fellowship training programs to begin to address the critical shortage of geriatricians in Michigan. The one-year training program is designed to enhance physicians' knowledge and understanding of the principles of excellent geriatric care delivered to patients at all levels of health and across a continuum of care settings. As the network is developed, geriatric fellowship program sites will be established in seven communities in Michigan and linked together for training purposes using advanced distance learning technologies. Learning environments will be unique at each site and fellows will have opportunities to move within the network during their training to enhance their awareness of the variance in systems-based practice in diverse practice settings. All training sites will be accredited by the Accreditation Council for Graduate Medical Education and physicians completing the fellowship will be eligible to sit for the Certificate of Added Qualifications in Geriatric Medicine examination offered by the American Board of Internal Medicine and the American Board of Family Medicine.

As our national leaders work toward health care reform, compulsory education in geriatric care and restructuring of comprehensive care models for older adults will be vital elements to improving the health and well-being of older adults. Until those goals are met, it will be essential to increase the number of practicing geriatricians in Michigan and all other states. I welcome your interest in geriatric fellowship training opportunities within the Michigan State University network and invite you to inquire further.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Foley". The signature is written in a cursive, flowing style.

Kevin T. Foley, MD, FACP  
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Division of Geriatrics, Department of Family Medicine  
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