Georgian Scientists
ქართველი მეცნიერები
Vol. 8 Issue 4(1), 2026
https://doi.org/10.52340/gs.2026.08.04(1).82

GERIATRIC MEDICINE AND EMERGENCY CARE: A MODERN CONCEPT OF ASSESSMENT, MANAGEMENT, AND SAFETY OF THE OLDER PATIENTS

Maka Buleishvili, Mariam Jikidze
Faculty of Medicine, BAU International University, Batumi, Georgia

The increasing proportion of older adults represents a major challenge for contemporary healthcare systems and requires closer integration of geriatric medicine with emergency care. Older patients frequently present to emergency departments with complex, multimorbid conditions, atypical clinical manifestations, polypharmacy, functional impairment, and an increased risk of adverse outcomes. Therefore, the assessment and management of geriatric patients require a comprehensive and individualized approach that extends beyond the diagnosis and treatment of an acute medical condition.

This abstract presents a modern conceptual framework for the assessment, management, and safety of older patients in emergency care. Particular attention is given to comprehensive geriatric assessment, including evaluation of acute symptoms, comorbidities, medication use, cognitive and functional status, mobility, nutritional condition, and social circumstances. Early recognition of potentially life-threatening conditions remains essential, while simultaneously considering age-related physiological changes that may modify the clinical presentation of acute disease.

Patient safety is a central component of emergency care for older adults. Prevention of falls, medication-related complications, delirium, functional deterioration, pressure injuries, dehydration, and inappropriate hospitalization should be incorporated into clinical decision-making. Effective communication with patients, family members, caregivers, and multidisciplinary healthcare professionals is also important for continuity of care and appropriate discharge planning.

A modern geriatric emergency-care model should therefore combine rapid identification and treatment of acute conditions with individualized risk assessment, functional preservation, medication review, and prevention of avoidable complications. Integration between emergency medicine, geriatrics, primary care, rehabilitation, nursing, and social services may contribute to safer and more coordinated care for older patients.

The proposed approach emphasizes that emergency care for older adults should not be limited to short-term stabilization. It should also address patient safety, preservation of functional

independence, appropriate transitions of care, and prevention of recurrent emergency presentations. This topic should be taken under consideration and plus more attention should be paid to atypical symptomatic manifestations of disorders within geriatric patients and also differential diagnosis. This integrated perspective may support the development of more effective and patient-centered models of geriatric emergency care.

Keywords: Geriatric medicine; emergency care; Older adults; Patient safety; Comprehensive assessment