

**Geropsychology and Long Term Care:
A Practitioner's Guide**

edited by Erlene Rosowsky, Joseph M. Casciani, and Merla Arnold.
Springer, New York, NY, 2009, 128 pages, \$59.95.

The title of this slim volume suggests that it is written for psychologists rather than psychiatrists or other mental health professionals. Not so. In 8 concise chapters, the authors, all experienced geriatric clinicians (as are the editors) define practical guidelines for the care of the elderly that will be useful for all clinicians. The general usefulness of these chapters is summarized by 1 integrating admonition: "It cannot be overemphasized that the identification and treatment of mental disorders in an LTC [long-term care] setting must be done in partnership across and among professional disciplines (eg, medicine, psychiatry, psychology, social work, nursing, pharmacy, and administration)" (p 71). How true and how wise!

The genesis of this book was a consensus conference in the mid-1990s that was convened to develop a template for long-term care treatment standards, which was then published in *The Gerontologist* in 1998. An educational and training program was developed and published to accompany these standards, and this volume grew into a more ambitious set of guidelines that inform the daily practice of geropsychological and geropsychiatric long-term care treatment.

The 8 chapters address (1) policies and reimbursement; (2) how to make referrals, and the problems that are common; (3) assessment, including review of standardized diagnostic and functional rating instruments; (4) and (5) treatment plans and treatment process; (6) and (7) integration of treatment disciplines, documentation, and outcome measurement; and (8) ethical issues. Each chapter is clear, concise, and practical, and each concludes with an extensive bibliography.

As a sometime geriatric psychopharmacologist, I was most interested in the chapter on treatment process, which briefly describes the use of psychotropic drugs. Although this chapter is accurate and up to date, prescribing psychiatrists will not find it to be an exhaustive review of psychotropic drugs for the elderly, nor is it meant to be. Rather, for nonphysicians, it offers a wonderfully abbreviated review of the different classes and types of medications that are currently in use for long-term care. The chapter also emphasizes the importance of nonpharmacologic treatments, which are often overlooked in standard geriatric psychopharmacology texts.

I recommend this book for any clinician, of any discipline, who is active in the world of long-term geriatric care. A wealth of useful and accessible information is provided, and the bibliographies alone are worth the price of the book.

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