Gerontological Society on Aging:

- Use terms like “older adult,” “older persons,” or “older people” for describing people aged 65 and older or use a specific age-range (ex: “American women 75 years of age and older”)

- Use person-first language when speaking about an individual’s diseases or functional limitations (ex: “Person with diabetes”)

- Avoid terms that suggest helplessness of people with diseases (ex: instead of “suffering from arthritis” say “diagnosed with arthritis”)

- Avoid fatalistic phrases about an aging society that suggest it’s a disaster to be avoided (ex: instead of “silver tsunami” say “increase in number of older adults”)

American Medical Association:

• Use terms like older persons, older people, older adults, older patients, older individuals, persons 65 years and older, or the older population

• In studies that involve human beings, age should always be given specifically (ex: older people aged 75 to 84 years)

• Avoid “othering” terms like seniors, elderly, aged, aging dependents, old-old, young-old, or other similar phrases
American Psychological Association:

- Use phrases like “older adult,” “older patients,” or “older individuals”
- Convey aging as a normal human experience
- Avoid using terms like “senior,” “elderly,” and “the aged” because they are othering
- Avoid fatalistic attitudes about aging, such as age or aging societies being an obstacle to overcome
- Avoid terms like “senile” or “senility” because these are outdated and have no agreed upon definition
Associated Press:

- Aim for specificity when space allows (ex: “Delivery man charged in fatal attack on woman, 89” rather than “Delivery man charged in fatal attack on elderly woman”)

- Use “older adult,” “older person,” or “older people” instead of “elderly or “seniors

- Clarify age ranges when speaking about “older adults” (ex: “new housing for people over 65”)

- Avoid terms like “seniors” or “elderly” in reference to individuals or groups, and only use those terms when someone prefers