



**FACULTY OF
PAEDIATRICS**

ROYAL COLLEGE OF
PHYSICIANS OF IRELAND

Post CSCST TRAINING IN

PAEDIATRIC INFECTIOUS DISEASES



This curriculum of training in Infectious Diseases was developed in 2017 and undergoes an annual review by Karina Butler, Dr Ann O'Shaughnessy, Head of Education, Innovation & Research and by the General Paediatrics Training Committee. The curriculum is approved by the Faculty of Paediatrics.

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Introduction

Paediatric Infectious Diseases is the specialty concerned with diseases which are caused by pathogenic microorganisms such as bacteria, viruses parasites or fungi. The diseases can be spread directly or indirectly from one person to another

The Post CSCST Fellowship in Paediatric Infectious Diseases is a one year programme designed to dovetail with the Irish Higher Specialist Training programme in General Paediatrics. It takes into account the major areas of competence required by the subspecialist in Paediatric Infectious Diseases and will be supervised by the Faculty of Paediatrics of the Royal College of Physicians in Ireland. Completion of this programme will ensure the knowledge and competencies in all areas of the curriculum, meeting international standards for best practice and allowing candidates to practice as a subspecialist in Paediatric Infectious Diseases.

Entry Requirements

Applicants for the Post CSCST Fellowship in Paediatric Infectious Diseases will have successfully completed the RCPI Higher Specialist Training programme in General Paediatrics within two years of the start date of the Post CSCST Fellowship programme.

Prior experience in Paediatric Infectious Diseases during General Paediatrics training would be an advantage.

Recruitment and Selection

Post CSCST Fellowship training in Paediatric Infectious Diseases will build on broad basic and early core specialist training in General Paediatrics. This is in line with training models internationally. Selection of candidates for Post CSCST Fellowship training in Paediatric Infectious Diseases will be via a competitive recruitment process coordinated by the relevant Training Body. Recruitment will follow similar timeline where possible to HST recruitment and post will commence in July of each year (unless otherwise specified).

Duration and Organisation of Training

The Post CSCST Fellowship in Paediatric Infectious Diseases is a one year training programme designed to dovetail with the Irish Higher Specialist Training programme in General Paediatrics . The curriculum is competency-based, however it is anticipated that the candidate will complete training within one year.

The curriculum takes into account the major areas of competence required by the subspecialist in Paediatric Infectious Diseases and will be supervised by the Faculty of Paediatrics of the Royal College of Physicians in Ireland. Doctors who have successfully completed the RCPI Higher Specialist Training programme in General Paediatrics and are within two years of completion will be deemed eligible to apply for the Post CSCST Fellowship in Paediatric Infectious Diseases. Completion of this program will ensure the knowledge and competencies in all areas of the curriculum, meeting international standards for best practice and allowing candidates to practice as a subspecialist in Paediatric Infectious Diseases

Training Programme

The training programme offered will provide opportunities to fulfil all the requirements of the curriculum of training for Paediatric Infectious Diseases in approved training hospitals. Each post within the programme will have a named trainer/educational supervisor and the programme will be under the direction of the National Specialty Director in Paediatrics

Trainee Numbers

It is expected that the Post CSCST Fellowship in Paediatric Infectious Diseases will be awarded to one candidate per year.

ePortfolio

The trainee will be required to keep their ePortfolio up to date and maintained throughout their Fellowship training. The ePortfolio will be countersigned as appropriate by the Trainer to confirm the satisfactory fulfilment of the required training experience and the acquisition of the competencies set out in the Curriculum. This will remain the property of the Trainee and must be produced at the end of year Evaluation meeting. At the end of year Evaluation, the ePortfolio will be examined. The results of any assessments and reports by the named trainer/educational supervisor, together with other material capable of confirming the trainee's achievements, will be reviewed.

Programme Management

- Coordination of the training programme will lie with the Medical Training Department.
- The training year will usually run from July to July in line with HST programmes
- Annual evaluations will usually take place between April and June each year
- Each trainee will be registered to the ePortfolio and will be expected to fulfil all requirements relating to the management of yearly training records
- Opportunities for audit and research may be available

Each trainee will be issued with a training agreement on appointment to the training programme and will be required to adhere to all policies and procedures relating to Post CSCST Fellowships

Specialty Section

Clinical Competence

Objective: To obtain clinical competence in the assessment, investigation, diagnosis and management of community acquired infection at consultant level.

- Take an appropriate history.
- Perform appropriate physical examination
- Perform appropriate investigator and specific skills including lumbar puncture
- Achieve an appropriate specific or differential diagnosis and initiate appropriate treatment.
- Develop the clinical and administrative skills to develop ID services.
- Competence in the management of cross specialty infections for example TB, hepatitis including B and C.

KNOWLEDGE

History

- Recognise symptom patterns
- Relevant, succinct and logical histories even when language, physical or mental impairment pose difficulties
- Appropriate use of interpreter
- Consider interaction of psychological and social well being on the physical symptoms to show empathy with the patient
- Ability to compile and condense patient's history from different sources as required

Physical Examination

- Knowledge of the path of and physiological basis of physical signs
- Explain the procedure to the patient, ensure that patient discomfort is minimised
- Elicit appropriate physical signs
- Skillfully use instruments of examination
- Be aware of patient dignity, confidentiality and ethnic issues
- The relative's rights and responsibilities
- The need for a chaperone

Investigation and Specific Skills

- Knowledge of the pathophysiological basis of tests
- Knowledge of its relevance
- Pathological basis of the test
- The cost and economy and safety of the investigation

Differential Diagnosis

- A broad knowledge of clinical presentation of infectious diseases
- Knowledge of optimum treatment infections
- Knowledge of how to access up to date information
- Ability to assimilate clinical, laboratory and epidemiological information and to use this to differentiate between infections and other conditions
- Consideration of diagnostic issues in relation to fears of patient
- Ability to review and revise the diagnostic matrix

Clinical acumen in the organisation and development of in-patient and out-patient services

- Awareness of differing models of health care delivery
- Interface with related infection disciplines
- Understand the different components and roles of infection services e.g. public health, microbiology, immunology, epidemiology, travel medicine.
- Awareness of pathophysiology and management of patients with diseases spanning different specialties.

SKILLS

- Provide Consult service
- History taking
- Ability to give targeted differential diagnosis
- Ability to organise administrative and clinical services
- Ability to initiate and co-ordinate an effective consultation service
- Capacity to work with multidisciplinary team members and colleagues
- Ability to select appropriate tests
- Ability to interpret results
- Ability to perform interventions according to guidelines
- Establishing close rapport and understanding with laboratory staff
- Recognising the need of a patient to understand procedures and results of tests
- Interpersonal skills
- Capacity to impart knowledge

ASSESSMENT & LEARNING METHODS

- CBD
- Mini-CEX
- Attend a minimum of one recognised international ID meetings per year

Management of Immunocompromised Patients

Objective: To obtain clinical competence at consultant level in the management of immunocompromised patients including those suffering from HIV/AIDS. Trainees must have the ability to recognise clinical manifestations in the immunocompromised including the ability to evaluate and take appropriate history, perform a physical examination and appropriately investigate an immune compromised patient. In addition, trainees must demonstrate their ability to reach a specific or differential diagnosis and to initiate appropriate treatment.

KNOWLEDGE

- Knowledge of the pathophysiology and clinical symptoms and signs of infection in compromised host and understand their relevance
- Pathological basis of the tests
- The cost and economy and safety of the investigations in the immunocompromised
- Awareness and knowledge of patient support groups
- Biological and iatrogenic aetiology of immunodeficiency

Specific HIV Positive Patient cohorts

- Prevention of Mother to Child Transmission, management of co-infection (HBV, HCV, TB)
- Antiretroviral treatment of children and adolescents

SKILLS

- Assessment of level of immunodeficiency and infection risk
- Assessment of risk for and diagnose concurrent infection
- Immunodeficiency complications in specific patient cohorts – transplant patients, oncology patients, haematology patients, patients receiving biological modifiers
- Communication skills allowing patients to recognise risk activity and its management
- Ability to recognise clinical and laboratory manifestations of immunodeficiency
- Ability to explain the procedures to the patient/family, ensure that patient discomfort is minimised
- Elicit appropriate physical signs
- Skilfully use instruments of examination
- Consider interaction of psychological and social well being on the physical symptoms
- Establishing close rapport and understanding with laboratory staff
- Delivery of effective pain and psychological management
- Commitment to continuity of care through physical illness to death
- Multidisciplinary team working
- Prepared to work with patient support groups
- Appropriate use and interpretation of investigations e.g. microbiology, radiology
- Knowledge of resources required in investigations
- Understanding of positive and negative predictive values

ASSESSMENT & LEARNING METHODS

- Dublin hospitals adult and paediatric HIV meetings
- Monthly Intracity PMTCT meetings

Viral Diagnostics

Objective: Trainees must be competent in the use of specific HIV diagnostics.

KNOWLEDGE

- Understanding of currently used diagnostic techniques
- Appropriate use of diagnostic techniques
- Knowledge of currently used diagnostic Tests
- Rational use of resources
- Discernment of patient's desires

SKILLS

- Interpretation of resistance profiles - Hep B, HIV
- Counselling

ASSESSMENT & LEARNING METHODS

- Weekly team meetings
- Consultant feedback
- National Virus Reference Laboratory sessions

Antiretroviral Therapy

Objective: Trainees must have the ability to institute and manage antiretroviral therapy.

KNOWLEDGE

- Pharmacokinetics and mode of action of available therapy
- Mechanisms of resistance/cross resistance
- Knowledge on how to access further information e.g. on current guidelines etc.

SKILLS

- Understanding of resistance/cross resistance
- Understanding of evidence based guidelines
- Facilitate patient decision-making based on knowledge and understanding of the issues
- Ability to recommend appropriate drug regimens
- Appropriate use of guidelines
- Monitor for and recognise side effects
- Ability to involve the patient in the process
- Unbiased application of knowledge to the clinical situation

ASSESSMENT & LEARNING METHODS

- Weekly team meetings
- 3 monthly ARV multidisciplinary script meetings
- Consultant feedback

Care of the Child with Primary Immunodeficiency

Objective: To recognize and institute investigation and early management of children with primary immunodeficiencies.

KNOWLEDGE

- Know the detailed functioning of the immune system including the complement system, phagocytic system, humoral and cellular immunity and the molecular and genetic basis of such functioning
- Understand the levels of functioning of the immune system at different ages and the relevance to vaccination strategies
- Understand the effect of malnutrition and disease on normal immune development
- Know the immunological basis of allergic disorders
- Know the immunological basis of autoimmune and inflammatory disorders
- Understand the basis of immunodysregulatory disorders including haemophagocytic lymphohistocytosis
- Understand the basis of hereditary angioedema and its complications
- Understand immune function testing and be able to interpret the results including antibody assays, complement, phagocytic cell and T cell tests
- Understand the molecular genetic tests available for the diagnosis basis of primary immunodeficiency disorders
- Understand the basis of secondary immunodeficiencies including those induced by infections, other disease and drug treatments

SKILLS

- Ability to take an immunodeficiency focused clinical history and extended family history
- Knowledge of sentinel examination findings among children with primary immunodeficiencies
- Understand and be able to use appropriate antimicrobial prophylaxis in the immunocompromised child
- Understand and be able to use the full range of antimicrobial therapies for infections in the immunocompromised child
- Have knowledge and experience of the principles and practice of immunoglobulin treatment including the use of intravenous and subcutaneous treatment routes
- Understand concepts in management of autoimmune and inflammatory disorders
- Know how to manage acute anaphylaxis

ASSESSMENT & LEARNING METHODS

- Joint Immunology case rounds (Dublin, Newcastle)
- Attendance at ESID/UKPIN meeting

Management of the Hospital Acquired Infection

Objective: To acquire the skills necessary at consultant level to recognise and manage Hospital Acquired Infection, and institute control systems, including postoperative and intensive care related illness.

Management of Infection,

-Particularly complex nosocomial infections in specific patients group.

Objective: Trainees must have the ability to use the following skills in the context of hospital acquired infection: clinical history taking; appropriate examination; institute relevant investigations. Reach a satisfactory management plan.

KNOWLEDGE

- Symptom patterns
- Pathophysiology and origin of physical signs
- Common/typical problems
- Hospital acquired infection
- Confidentiality and consent issues in the unconscious patient

SKILLS

- Ability to discern the relevant features of a case whether or not the history is available
- Examination skills appropriate to the clinical situation
- Rational use of laboratory facilities
- Organised thinking
- Sensitivity to patients, carers and relative's anxieties
- Recognition of the need to involve the patient regardless of the level of comprehension or consciousness
- Policies of medical legal implications
- Awareness of political issues
- Working with management and the public

ASSESSMENT & LEARNING METHOD

- Grand round presentation

Antimicrobial Stewardship

Objective: To provide the trainee with the knowledge and skills necessary to understand and manage infection and colonization by organisms resistant to antimicrobials.

KNOWLEDGE

- Understanding of differentiation of colonisation and infection
- Understanding of microbiology laboratory data
- Management of multi drug resistant infections
- Knowledge of new antimicrobials
- Local/national/international antibiotic resistance patterns
- Local/national/international clinical standards, guidelines and protocols
- Mechanisms of resistance

Management of antimicrobial use

- Antimicrobial Prescribing
- Knowledge of antimicrobial agents, their spectrum of activity, mode of action, toxicity and appropriate use

Pharmacology and Toxicology

- Knowledge of pharmacology, toxicity and side effects of antimicrobial agents
- Recognition of limitations of individual agents and combination therapies

Antibiotic Control Policies

- Understanding of the importance of resource utilisation in relation to antimicrobials
- Knowledge of the relative costs of different agents

Understanding of prophylactic, pre-emptive and therapeutic prescribing

- Knowledge of the microbial agents likely to cause infection in different settings and their antimicrobial susceptibilities
- Understanding the principles underlying pre-operative prophylaxis

Resistant organisms: understanding the pharmacology of new agents

- Knowledge of infection control principles and policies

SKILLS

- Differentiation between colonisation and infection
- Discernment of situations giving rise to antibiotic resistance
- Application of knowledge to the clinical situation
- Consistency in approach to problems
- Multidisciplinary team working
- Interpretation of resistance patterns
- Understanding of laboratory data
- Antibiotic Stewardship
- Management and economics of antibiotic prescribing
- Selection and appropriate management of antimicrobial pharmacology and toxicology
- Application of the knowledge in simple and complex clinical settings
- Collaborative interaction with medical, laboratory and nursing colleagues and understanding of the patient's concerns relating to the use of more toxic agents
- Flexibility to change the choice of antimicrobial in the context of a change in clinical situation or laboratory data
- Teaching on appropriate antimicrobial prescribing
- Ensuring that patient care is optimum
- Recognition that there is often more than one antimicrobial for a clinical situation, that choices are not usually right or wrong

- Use of the knowledge to apply prophylaxis in the light of local epidemiological and individual clinical issues e.g. allergy
- Understand the needs and problems of the doctors managing the patient
- Be prepared to explain the issues of prophylaxis to patients
- Recognition of the common reasons for failure of control of infection principles
- Ability to apply infection control by explanation, education and application of written policies
- Ability to lead a multidisciplinary team and explain the necessary actions to control infection to other health care staff including administrative staff
- Sensitivity to the difficulties of establishing good infection control
- Recognition of the importance of clear messages and repetitive messages to health care professionals and patients delivered in a constructive manner

ASSESSMENT & LEARNING METHODS

- Grand Round presentations
- ESPID Antimicrobial Prescribing Course
- Audit

Management of Infection Problems Related to the ICU Including Management of Sepsis Syndrome and DIC

Objective: Trainees must be able to identify and manage infection and colonization by multi-resistant organisms in the setting of the ICU.

KNOWLEDGE

- Common infection problems in the intensive care setting
- Outcomes of infection in ICU setting
- Evidence base for infection management
- Pathophysiology of serious sepsis
- Likely outcomes
- Evidence base for outcomes

SKILLS

- Prompt, relevant and appropriate decision-making
- Ability to justify course of action
- Clear communication skills with other carers and relatives
- Caring and consistent attitude to the seriously ill and dying patient
- Responsible and appropriate attitude to the withdrawal of care
- Assessment of situation
- Appropriate Antibiotic use (see also Antimicrobial Stewardship chapter)

ASSESSMENT & LEARNING METHOD

- Team Meetings
- MDT Meetings
- Morbidity and Mortality Review Meetings
- Consultant feedback

Infection Control

Objective: To develop skills required to recognise and manage Hospital Acquired Infections and to institute infection control systems when required.

KNOWLEDGE

- Knowledge of principles of infection control
- Knowledge of principles of hospital infection surveillance
- Awareness of institutional resistance data
- Understanding of mechanisms in acquiring resistant infections
- Knowledge of specific risk factors for differing patient cohorts

SKILLS

- Awareness of need to involve infection control practices
- Multidisciplinary care of complex patient
- Infection control policies

ASSESSMENT & LEARNING METHOD

- Attendance at infection control committee meetings
- Hand Hygiene Training Session (Mandatory)

Management of Community Acquired Infections

Objective: The trainee should be able to diagnose, investigate and manage community acquired infection.

KNOWLEDGE

- Risk assessment
- Programme development – OPD services, home antibiotic services
- Awareness of evolving regional antimicrobial resistance data
- Knowledge of Gram stains
- Malaria smear
- Management of meningitis/encephalitis, complicated soft tissue infections, bacterial endocarditis, sexually transmitted infections

SKILLS

- Evaluation of patient and risk assessment
- Awareness of need for the involvement of other infection disciplines e.g. community outbreaks
- Ability to appropriately triage patients for in-patient and out-patient care
- Ability to identify the need to involve more senior colleagues appropriately
- Interpret Gram Stains
- Interpret Malaria smear

ASSESSMENT & LEARNING METHOD

- Case Based Discussion

Management of Congenital and Neonatal Infections

Objective: The trainee should be able to diagnose, investigate and manage infections in premature and term infants

KNOWLEDGE

- Congenital infection (CMV, HSV, Toxoplasmosis & Syphilis etc)
- Common bacterial problems in the neonatal intensive care setting
- Outcomes of infection in NICU setting
- Evidence base for infection management
- Competent Risk Assessment for bacterial, fungal and viral infection
- Pathophysiology of serious sepsis
- Likely outcomes
- Evidence base for outcomes

SKILLS

- Prompt, relevant and appropriate decision-making
- Ability to justify course of action
- Clear communication skills with other carers and relatives
- Responsible and appropriate attitude to the withdrawal of care
- Assessment of situation
- Appropriate Antibiotic use (see also Antimicrobial Stewardship chapter)

ASSESSMENT & LEARNING METHOD

- Team Meetings
- MDT Meetings
- Morbidity and Mortality Review Meetings
- Consultant feedback

Imported Infection and Travel Medicine

Health Advice, Risk Assessment and Vaccine Usage (Optional)

Objective: Trainees must have the ability to provide health advice for travellers including vaccine usage, health hazards abroad and risk assessment for individuals, Malaria prophylaxis and advice.

KNOWLEDGE

- General principles of vaccinology and infectious disease
- Geographical patterns of disease
- Knowledge of vaccines
- Geography of disease and resistance
- Problems of special groups of travellers, e.g. elderly, immunosuppressed
- Vaccinology in special patient cohorts
- Hazards of different types of travel
- Availability, efficacy and safety of vaccines
- Use and safety of antimalarial prevention measures
- Principles of organising a travel clinic

SKILLS

- Risk assessment for the individual traveller
- Ability to take and record pre-travel medical and travel history
- Ability to perform risk assessment appropriate to traveller
- Ability to formulate and communicate appropriate verbal and written advice for traveller
- Ability to administer immunisations and prescribe antimalarials as necessary
- Multidisciplinary team working
- Ability to understand organisational and medico-legal aspects of travel clinic
- Consider interaction of psychological and social well being on the physical symptoms to show empathy with the patient

ASSESSMENT & LEARNING METHOD

- OPD clinics
- Consultant feedback

Vaccinology

Health Advice, Risk Assessment and Vaccine Usage

Objective: Trainees must have the ability to provide health advice regarding vaccine usage, both for routine immunization and in special cohorts including international travellers

KNOWLEDGE

- General principles of vaccinology and infectious disease
- Geographical patterns of disease
- Knowledge of vaccines
- Geography of disease and resistance
- Problems of special groups of travellers, e.g. elderly, immunosuppressed
- Vaccinology in special patient cohorts
- Hazards of different types of travel
- Availability, efficacy and safety of vaccines

SKILLS

- Ability to take and vaccination history
- Ability to perform risk assessment where there is vaccine hesitancy
- Ability to formulate and communicate appropriate verbal and written advice to parents regarding vaccination
- Ability to administer immunisations
- Multidisciplinary team working

ASSESSMENT & LEARNING METHOD

- National Immunisation Advisory Committee guidelines review

Imported Infections and Fevers Including Malaria

Objective: Trainees must have the ability to recognise and treat imported infections, diagnosis and management of imported fevers including malaria and diagnosis and management of other imported diseases.

KNOWLEDGE

- Clinical and epidemiological features of imported diseases, especially manifestations and differential diagnosis of malaria
- Knowledge of ability and limitations of specialised diagnostic tests
- Management of imported infections

SKILLS

- Elicit and record appropriate travel history
- Recognise symptoms and signs of imported disease
- Synthesise epidemiological and clinical data into differential diagnosis
- Select and interpret appropriate diagnostic tests
- Ability to manage common imported infections
- Respect patient dignity, confidentiality and be sensitive to ethnic issues
- Recognise the relative's rights and responsibilities
- Recognise the need for interpreter services
- Establishing close rapport and understanding with laboratory staff
- Recognising the need of a patient to understand procedures and results of tests
- Consideration of diagnostic issues in relation to fears of patient
- Flexibility of thinking to review and revise the diagnostic considerations
- Preparation and interpretation of a malaria smear

ASSESSMENT & LEARNING METHOD

- Study Day
- Clinical SpR Club

Dealing with High Security Risk Infections

Objective: Trainees must have the ability to identify sources of specialist advice for unusual infections.

KNOWLEDGE

- Knowledge of location and availability of tertiary care and advice lines
- Knowledge of printed and electronic information sources
- Knowledge of High Security Unit Mater
- Knowledge of unusual infections

SKILLS

- Ability to recognise when tertiary level care/advice is needed and to seek it
- Ability to use printed and electronic information sources
- Awareness of own limitations and needs for specialist advice

ASSESSMENT & LEARNING METHOD

- Study day: Unusual infections (National Isolation Unit, Mater Hospital)

Laboratory Medicine

Objective: To obtain an understanding of the role of the Microbiologist and Virologist and the importance of Microbiological techniques in ID and to understand the process and constraints around the microbiological report. Trainees must be competent to carry out basic microbiological bench work including critical interpretation of laboratory procedures in relation to laboratory diagnosis

KNOWLEDGE

Basic microbiological bench work

- Knowledge of microbiological basis of disease
- Knowledge of the pathological basis of tests and the laboratory factors affecting their interpretation

Microbiological reporting

- Knowledge of the pathways of microbiological reporting
- Knowledge of the boundaries of use of microbiological information in the context of clinical information

Knowledge of appropriate testing and interpretation of results

- Knowledge of the diagnostic tests available in the routine laboratory with understanding of further tests available at specialised centres
- Knowledge of antibiotic modes of action, side effects and interactions
- Knowledge of other interventions (e.g. abscess drainage) useful in management of infected patients
- Antibiograms
- Knowledge of new developments in molecular diagnostics

SKILLS

- Ability to interpret the findings of microbiological investigations and recognise their limitations
- Establishing close rapport and understanding with laboratory staff
- Ability to communicate with colleagues and other doctors in different disciplines and enable them to appreciate the relevance of the data
- Ability to interpret laboratory data in the context of clinical information
- Ability to consider data in context of clinical information and when to obtain further clinical data
- Ability to provide appropriate antibiotic and other management advice at the bedside and over the telephone
- Awareness of patient dignity, confidentiality and ethnic issues
- Consideration of interaction of psychological and social well being on the physical symptoms and demonstration of empathy to patients
- Interpretation of molecular diagnostics

ASSESSMENT & LEARNING METHOD

- Liaison with Microbiology laboratory
Weekly ID/Microbiology Rounds (TCUH)

Understanding of Prophylactic, Pre-Emptive and Therapeutic Prescribing

Objective: Trainees must demonstrate competence in the use of pre-operative antibiotic prophylaxis.

KNOWLEDGE

- Knowledge of the microbial agents likely to cause infection in different settings and their antimicrobial susceptibilities
- Understanding the principles underlying pre-operative prophylaxis

SKILLS

- Use of the knowledge to apply prophylaxis in the light of local epidemiological and individual clinical issues e.g. allergy
- Understand the needs and problems of the doctors managing the patient
- Be prepared to explain the issues of prophylaxis to patients
- Multidisciplinary team working

ASSESSMENT & LEARNING METHODS

Consultant feedback

Documentation of Minimum Requirements for Training

- These are the minimum number of cases you are asked to document as part of your training. It is recommended you seek opportunities to attain a higher level of exposure as part of your self-directed learning and development of expertise.
- You should expect the demands of your post to exceed the minimum required number of cases documented for training.
- If you are having difficulty meeting a particular requirement, please contact your specialty coordinator

Curriculum Requirement	Required/Desirable	Minimum Requirement	Reporting Period	Form Name
Section 1 - Training Plan				
Weekly Timetable (Sample Weekly Timetable for Post/Clinical Attachment)	Required	1	Training Programme	Form 045
Personal Goals Plan (Copy of agreed Training Plan for your current training year signed by both Trainee & Trainer)	Required	1	Training Programme	Form 052
Personal Goals Review Form	Desirable	1	Training Programme	Form 137
Section 2 - Training Activities				
Outpatient Clinics				
ID Clinics	Desirable	10	Training Programme	Form 001
Immunology Clinics	Desirable	10	Training Programme	Form 001
Ward Rounds/Consultations				
ID/Microbiology Rounds	Desirable	40	Training Programme	Form 002
Emergencies/Complicated Cases (Diagnosis of nature of problem and its presentation, emergency case for investigation)	Desirable	1	Training Programme	Form 003
Additional/Special Experience Gained	Desirable	1	Training Programme	Form 005
Laboratory Experience	Desirable	1	Training Programme	Form 018
Relatively Unusual Cases	Desirable	1	Training Programme	Form 019
Chronic Cases/Long term care	Desirable	1	Training Programme	Form 066
ICU/CCU Cases	Desirable	1	Training Programme	Form 066
Section 3 - Educational Activities				
Courses				
Mastering Communications	Recommended	1	Training Programme	Form 007
Performing Audit	Recommended	1	Training Programme	Form 007
Dealing with bad news	Recommended	1	Training Programme	Form 007
SafeMed	Recommended	1	Training Programme	Form 007
Occupational Stress	Recommended	1	Training Programme	Form 007
Research Skills	Recommended	1	Training Programme	Form 007
Masterclass Series	Recommended	1	Training Programme	Form 007
Effective Teaching Skills	Recommended	1	Training Programme	Form 007

Curriculum Requirement	Required/Desirable	Minimum Requirement	Reporting Period	Form Name
Medication Safety (online)	Recommended	1	Training Programme	Form 007
Safe Prescribing (online)	Recommended	1	Training Programme	Form 007
HCAI (online)	Recommended	1	Training Programme	Form 007
Study Days	Desirable	3	Training Programme	Form 008
National/International meetings (minimum attend 1 per year)				
ESPID/UKPIN	Desirable	1	Training Programme	Form 010
In-house activities			Training Programme	
PMTCT meetings	Desirable	5	Training Programme	Form 011
ARV	Desirable	3	Training Programme	Form 011
Morbidity and Mortality Review Meetings	Desirable	4	Training Programme	Form 011
Grand Rounds	Desirable	10	Training Programme	Form 011
Journal Clubs	Desirable	5	Training Programme	Form 011
MDT meetings	Desirable	20	Training Programme	Form 011
Radiology Conferences	Desirable	10	Training Programme	Form 011
Formal Teaching Activity (minimum 1 formal teaching session per month from the categories below:)	Desirable	10	Training Programme	Form 013
Lecture			Training Programme	Form 013
Tutorial			Training Programme	Form 013
Bed side Teaching			Training Programme	Form 013
Research	Desirable	1	Training Programme	Form 014
Audit activities (Start or complete 1 audit per year)	Desirable	1	Training Programme	Form 015
Clinical Audit Report form	Desirable	1	Training Programme	Form 135
Publications	Desirable	1	Training Programme	Form 016
Presentations	Desirable	1	Training Programme	Form 017
Committee Attendance	Desirable			
Infection Control Committee	Desirable	1	Training Programme	Form 063
Section 4 - Assessments				
CBD	Desirable	1	Training Programme	Form 020
Mini-CEX (At least two Mini-CEX assessments)	Desirable	2	Training Programme	Form 023
Quarterly Assessments	Desirable	4	Training Programme	Form 092
End-of-Post/End-of-Year Assessments	Desirable	1	Training Programme	Form 092