## O3 Infectious and endemic diseases

Learning Hubs will be asked to define the most common/ debilitating or clinically important infectious/ endemic diseases that pertain to their service or local population. Assessment of this module should use the generic competencies listed below with particular emphasis on the chosen diseases.

Assessment of these competencies is via Mini-CEX, CbD (formative or summative) or ACAT-EM and a reflective log.

Potential presentations / common infectious diseases that could be chosen by local Hub as priority for this module

- Meningitis, acute encephalitis syndrome/ Japanese Encephalitis
- TB
- Malaria
- Influenza
- Diarrhoeal diseases and food poisoning
- Hep B, Hep C, Hep E- acute and chronic
- HIV/AIDS
- Rabies
- Syphilis
- Ascariasis
- Leishmaniasis
- Tetanus
- Viral haemorrhagic fever, Kyasanur forest disease virus and Dengue
- Measles, Mumps, Rubella
- Vaccine preventable diseases e.g. polio, bacterial disease in children
- Schistosomiasis
- Food-bourne trematodes, nematodes

Trainees are expected to achieve EPA level 2 (Direct active – full supervision by senior clinician, with prompting/ verbal and actual guidance and help throughout) in these competencies.

| Knowledge/       | Detail of competency  |
|------------------|---|
| Skill/ Behaviour |   |
| Knowledge        | Can outline the natural history of the common infectious diseases for   |
|                  | the local population  |
|                  | Can outline the common presentations and pathogenesis of                |
|                  | infectious diseases that impact on mortality in your region, including  |
|                  | meningitis, malaria, TB, HIV/AIDS, Hepatitis, genitourinary infections, |
|                  | schistosomiasis, leishmaniasis, Influenza                               |
|                  | Can outline the pathogenesis of food-bourne diseases, food              |
|                  | poisoning and acute diarrhoeal diseases                                 |
|                  | Can outline the different typical/ atypical infective presentations     |
|                  | common to local area  |

| Knowledge/<br>Skill/Behaviour | Detail of competency  |
|-------------------------------|---|
|                               | Can outline the pathological causes of typical/atypical infective       |
|                               | presentations, and treatments   |
|                               | Can outline those infections requiring notification to authorities and  |
|                               | the process for doing notification                                      |
| Skills- History               | Is able to obtain a detailed history and understand the importance      |
|                               | of even generic symptoms e.g. fever with no identifiable cause          |
|                               | Is able to identify risk factors for development of an infectious       |
|                               | disease, including contacts, travel, animal contact and sexual          |
|                               | history   |
| Skills -                      | Is able to identify signs of severe infection including change to LOC,  |
| Examination                   | metabolic acidosis, severe anaemia, hypoglycaemia, acute renal          |
|                               | impairment, acute pulmonary oedema                                      |
|                               | Is able to identify signs of acute encephalitis and those patients with |
|                               | cardiorespiratory impairment requiring rapid resuscitation              |
| Skills-                       | Identifies appropriate investigations and treatment, based on the       |
| investigation                 | differential diagnosis, clinical presentation, age and presence of      |
| and treatment                 | pregnancy   |
|                               | Is able to start empirical treatment for the most likely causes of      |
|                               | encephalitis / meningitis presentations and instigate supportive        |
|                               | treatment-glycaemic control, hydration, oxygenation                     |
| Skills- Clinical              | Has a low index of suspicion for common presentations to local area     |
| decision                      | in any patient with fever and no obvious septic loci                    |
| making and                    | Is able to identify patients at particular risk from seasonal influenza |
| judgement                     | and advise on vaccination   |
| (in addition to               | Is able to identify those patients at greater risk from infectious      |
| CC1)                          | disease e.g. immunocompromised, elderly, very young, pregnancy          |
| Behaviour-                    | Is able to advise patients and family members, when prophylaxis is      |
| Communication                 | required for an intectious disease e.g. young children and              |
| &                             | pulmonary IB, pregnant women in endemic malaria areas                   |
| professionalism               |   |
|                               |   |
| CC/&CCoj                      | Understands the risk diarrhead disease presents to these less than 5    |
| raedianic                     | vegrs of age and can instigate safe and effective oral rehydration      |
|                               | therapy zinc supplementation and provide advice on breast               |
|                               | feeding during acute episodes   |
|                               | Can outline presentations and pathogenesis of common childhood          |
|                               | infections e.g. measles, mumps, rubella                                 |
|                               | Can outline the role of prevention in infectious diseases and be able   |
|                               | to provide families with advice on contact tracina, prophylactic        |
|                               | treatment, vaccinations   |