

UMass Pediatrics - Infectious Disease Rotation

Goals and Objectives

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1. Patient Care:

- a. Takes thorough epidemiological and family histories relevant to establishing a diagnosis of an infectious disease process.
- b. Performs comprehensive physical examinations, with emphasis on findings that are suggestive of an infectious disease process (e.g., rash, mouth ulcers, conjunctival injection, chest or cardiac auscultatory findings).
- c. Writes up a comprehensive consult including an assessment, differential and proposed evaluation and treatment of new infectious disease consult patient.
- d. Provides daily follow-up of all assigned patients, appropriate updates to the family and detailed but focused progress notes.

2. Medical Knowledge:

- a. Demonstrates an understanding of the pathogenesis and treatment of the following potentially serious infectious disease conditions:
sepsis/meningitis/encephalitis/brain abscess;
epiglottitis/tracheitis/croup/retropharyngeal abscess/parapharyngeal abscess/peritonsillar abscess; pericarditis/endocarditis/myocarditis; toxic shock syndrome; intraabdominal sepsis; skeletal infections;
orbital/periorbital cellulitis; mastoiditis; cellulitis/fascitis/TEN; disseminated neonatal infections; fever and neutropenia; line sepsis
- b. Demonstrates an understanding of the antimicrobial profiles, side effects and clinical uses of the following: The penicillins; the cephalosporins; vancomycin; clindamycin; trimethoprim-sulfamethoxazole; macrolides; metronidazole; the quinolones; antivirals (acyclovir); antifungal agents (amphotericin B, azoles and echinocandins)
- c. Recognizes the clinical presentation of childhood vaccine preventable diseases; understand the childhood vaccine schedule and the efficacy, side effects and contraindications of vaccines.
- d. Discusses the basic elements of infection control.
- e. Learns the basics of pre-travel counseling including the prevention of traveler's diarrhea and mosquito-borne diseases. Demonstrates how to determine the recommended pre-travel vaccines.

3. Interpersonal & Communication Skills:

- a. Explains to a family about what an infection is, how it is transmitted, what symptoms it causes, what treatment alternatives are available, what side effects of treatment may occur and what the long-term prognosis is.
- b. Writes clear concise notes
- c. Collaborates with other members of the health care team, in particular residents, nurses and pharmacists.
- d. Communicates with other providers in the clinical and community (e.g. infection control, microbiology lab, PCP, nursing agencies)

4. Professionalism:

- a. Explains to a child and family what the role of the infectious disease specialist is (emphasizing that such consultation does not imply concerns about “contagiousness”)
- b. Communicate to the patient and family the role of a consultant, making recommendations at the request of the primary team.
- c. Demonstrates sensitivity and respect for parents and patients of diverse ages and of diverse cultural, educational, and socioeconomic backgrounds.

5. Practice-based Learning

- a. Presents one brief didactic talk per week on a relevant clinical topic with use of appropriate paper, guidelines and texts.
- b. Performs an EBM review at least twice during the rotation with presentation to the ID team
- c. Demonstrates knowledge of study design and analysis in appraisal of clinical studies.
- d. Demonstrates facility finding information in the AAP Red Book.

6. Systems-based Practice

- a. Practices cost-effective health care (e.g. antimicrobial costs, diagnostic testing costs, home versus institutional care for parenteral therapy)
- b. Works with other health care providers caring for children outside of the traditional inpatient setting (e.g. phone consults)