Lahey Clinic Internal Medicine Residency Program: Curriculum for Infectious Disease

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Overview

During the rotation in infectious diseases (ID), residents see both inpatient and outpatient consults that have a broad range of infectious disease problems. Residents see a variety of infectious disease presentations, ranging from complicated, hospital-acquired, multi-drug-resistant infections to outpatient consults for fevers of unknown origin or for vector-transmitted infections such as Lyme disease. Residents also are exposed to the primary and longitudinal care of patients with human immunodeficiency virus (HIV) infection. In addition, the rotation offers exposure to a travel clinic for patients traveling abroad to high-risk areas.

Residents participating in the inpatient infectious diseases elective will rotate with an Infectious Diseases fellow, an attending and fourth-year medical students. The on-call attending changes every Thursday, thus giving the resident a chance to work with several different ID specialists. Residents doing the outpatient elective will work one-on-one with the attending in the clinic on any given day.

Residents are responsible for performing a full history and physical on new consults, as well as reviewing all available data such as labs, radiology studies, etc. Residents will then present to the on-call attending, with particular emphasis on the differential diagnosis and plan of action. Residents on the inpatient elective are required to review relevant literature and present that review informally on rounds.

Feedback and evaluation are given verbally at the end of each attending's week on call and by the program director at the end of the rotation at Myevaluations.com.

Principal teaching and learning activities include consult rounds, the outpatient clinic and the following conferences:

- 1) Microbiology rounds (daily)
- 2) Transplant Conference (Thursdays)
- 3) Infectious Disease Clinical Conference (Thursdays)

Goals

- Understanding how a patient's social history (travel, HIV risk factors, exposures) can have a significant impact on the differential diagnosis and management of infections
- Understanding antibiotic selection and therapy including familiarity with major classes, choosing appropriate antibiotics and monitoring for antibiotic toxicities

- 3) Exposure to a broad range of major syndromes including community and hospital-acquired pneumonia, infective endocarditis, cellulitis, urinary tract infections and the evaluation of fever
- 4) Appropriate use of diagnostic services including gram stain and culture, antimicrobial sensitivity testing and other standard microbiology lab techniques
- 5) Understanding basic principles of infection control such as contact or respiratory isolation and contact tracing
- 6) Exposure to critically ill patients and immunosuppressed patients, as well as an understanding of their specific spectrum of diseases

Principle Educational Goals Based on the ACGME General Competencies

In the tables below, the principle educational goals of the Infectious Disease curriculum are listed for each of the six ACGME competencies:

- 1) Patient Care
- 2) Medical Knowledge
- 3) Practice-Based Learning and Improvement
- 4) Interpersonal and Communication Skills
- 5) Professionalism
- 6) Systems-Based Practice

1) Patient Care

Objective	Learning Environment	Evaluation Method
Perform a comprehensive	Consult rounds	Global assessment
history and physical with particular attention to risk	Outpatient clinic	Small group participation
factors for infection and		
resistant organisms		
Formulate a management	Consult rounds	Global assessment
plan	Outpatient clinic	Small group participation
Clearly document patient	Consult rounds	Global assessment
management in the	Outpatient clinic	
medical record		

2) Medical Knowledge

Objective	Learning Environment	Evaluation Method
Recognize how exposure	Consult rounds	Global assessment
history determines patient	Outpatient clinic	Small group participation
care	Assigned readings	
Use diagnostics	Consult rounds	Global assessment
appropriately	Outpatient clinic	Small group participation
-	Micro rounds	
Recognize major infectious	Consult rounds	Global assessment

clinical syndromes	Outpatient clinic	Small group participation
Use antibiotics	Consult rounds	Global assessment
appropriately	Outpatient clinic	Small group participation
	ID clinical conference	-
Recognition and	Consult rounds	Global assessment
management of antibiotic	Outpatient clinic	Small group participation
toxicities	ID clinical conference	
	Assigned readings	

3) Practice-based Learning and Improvement

Objective	Learning Environment	Evaluation Method
Be able to perform a	Consult rounds	Global assessment
literature search to answer	Outpatient clinic	Small group participation
clinical questions	ID Clinical conference	-
Be able to interpret	Consult rounds	Global assessment
microbiological data such	Outpatient clinic	Small group participation
as pathogen identification	Micro rounds	
and antimicrobial		
sensitivities		
Facilitate team member	Consult rounds	Global assessment
education	Outpatient clinic	Small group participation
	Micro rounds	

4) Interpersonal and Communications Skills

Objective	Learning Environment	Evaluation Method
Communicate a plan of	Consult rounds	Global assessment
action and follow-up	Outpatient clinic	Small group participation
effectively to patients and		
other team members		
Communicate potential	Consult rounds	Global assessment
risks of therapy including	Outpatient clinic	
antibiotic toxicities to		
patients and their		
caretakers		
Relate microbiology	Consult rounds	Global assessment
findings to other team	Outpatient clinic	Small group participation
members		

5) Professionalism

Objective	Learning Environment	Evaluation Method
Interact with patients,	Consult rounds	Global assessment
colleagues and hospital	Outpatient clinic	Small group participation
staff in a respectful	Micro rounds	
manner	ID clinical conference	
	Transplant conference	
Maintain patient	Consult rounds	Global assessment

confidentiality and HIPAA	Outpatient clinic	Small group participation
guidelines	Micro rounds	-
	ID clinical conference	
	Transplant conference	

6) Systems-Based Practice

Objective	Learning Environment	Evaluation Method
Mobilize vagal nerve	Consult rounds	Global assessment
activity (VNA) and other	Outpatient clinic	
services to provide		
outpatient antibiotics		
Work with infection control	Consult rounds	Global assessment
practitioners as part of an	Outpatient clinic	Small group participation
interdisciplinary team		

Infectious Disease Curriculum Checklist

	Setting: I (inpatient) O (outpatient)	Date
Central nervous system		
Meningitis		
Encephalitis		
Conjunctivitis		
Endocarditis		
Fever of unknown origin		
Fungal (histoplasmosis, coccidiodomycosis)		
Gastrointestinal		
Biliary tract infection		
Gastroenteritis		
Infectious diarrhea		
Viral hepatitis		
Peritonitis		
Genitourinary		
Cervicitis, vaginitis		
Common sexually transmitted diseases (gonorrhea, chlamydia, trichomonas, herpes simplex, syphilis)		
Pelvic inflammatory disease		
Prostatitis, epididymitis		
Urethritis		
Urinary tract infection		
Infection in the		
immunosuppressed		
Lyme disease		
Malaria		
Otitis		

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Respiratory	
Acute epiglotitis, pharyngitis	
Pneumonia (community and	
nosocomial), bronchitis	
Sinusitis	
Upper respiratory infection	
Empyema	
Musculoskeletal	
Osteomyelitis	
Septic arthritis	
Sepsis, septic shock syndrome	
Skin infections	
Cellulitis	
Ulcers	
Tuberculosis	
Active infection	
Positive tuberculin skin test	
Viral	
Herpes simplex infection	
Influenza	
Mononucleosis	
Varicella zoster infection	
Cytomegalovirus	
HIV	
Evaluation and management of	
early disease	
Advance directives evaluation	
Assessment of social support	
systems Manitoring progression to ALDS	
Monitoring progression to AIDS	
Assessment of alternative health practices	
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Ongoing staging Diagnosing AIDS-defining	
opportunistic infections	
Functional assessment	
Mental status evaluation	
Nutritional assessment Referral to case management	
agencies	
Palliative and terminal care	
Pregnancy counseling (pretest,	
post-test, risk factors)	
Gynecologic complications	
Vaginal candidiasis	
Cervical dysplasia/neoplasia	
Pelvic inflammatory disease	
Infectious diseases (see also	
Preventive measures below and	
specific organ-based	
complications)	
Mycobacterial disease	
Pneumocystis carinii pneumonia	

Cytomegalovirus disease	
Syphilis (diagnosis, treatment)	
Oral complications	
Antibiotic prophylaxis	
Pneumocystis carinii pneumonia	
Tuberculosis	
Antiretroviral drug therapy	
Immunizations	
Transmission of HIV	
Mycobacterium avium complex	
Protease inhibitor therapy	
Toxoplasmosis	
AIDS-defining malignancies	
Kaposi's sarcoma	
Non-Hodgkin's lymphoma	
Squamous cell carcinoma	
(cervix or anus)	
Dermatologic complications	
Kaposi's sarcoma, Scabies,	
folliculitis	
Seborrheic dermatitis	
Bacillary angiomatosis	
Gastrointestinal complications	
Diarrhea	
Esophageal candidiasis	
Esophageal ulcer disease	
Hepatomegaly, hepatitis,	
jaundice	
Wasting syndrome	
Neurologic complications	
Neurologic complications Dementia	
Neurologic complications Dementia Central nervous system mass	
Neurologic complications Dementia	