**COMMON PRESENTATIONS AND CONDITIONS**

Basic Trainees will require a sufficient depth of knowledge of these presentations and conditions.

- Blood stream infections including meningococcemia
- Common skin infections, including:
  - cellulitis, and other streptococcal and staphylococcal skin manifestations
  - fungal infections
  - parasitic infections, such as head lice and scabies
- Common viral infections, including those with dermatological manifestations, such as exanthema
- Fever of unknown origin
- Gastrointestinal infections, including infectious diarrhoea
- Lymphadenopathy/lymphadenitis
- Meningitis/encephalitis
- Ophthalmological infections, such as blepharitis, conjunctivitis including trachoma, orbital/periorbital cellulitis
- Osteomyelitis, septic arthritis
- Perinatal infections
- Respiratory tract infections, upper and lower, including otitis media and tonsillitis
- Septicaemia, including meningococcal sepsis
- Urinary tract and genitourinary infection

For all common presentations, Basic Trainees will need to know how to:

**Synthesise**
- incorporate epidemiology, pathophysiology and clinical science
- recognise the clinical presentation
- take a relevant clinical history
- conduct an appropriate examination
- establish a differential diagnosis
- plan and arrange appropriate investigations

**Manage**
- provide initial, evidence-based management
- discuss the principles of ongoing management
- apply quality use of medicines
- recognise potential complications of the disease and its management, and initiate preventative strategies
- refer appropriately

**Consider other factors**
- identify broader considerations and their impact on diagnosis and management

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**LESS COMMON OR MORE COMPLEX PRESENTATIONS AND CONDITIONS**

Basic Trainees will need to have an awareness of, and an understanding of appropriate resources that should be used to help manage patients with these presentations.

- Fever in the returning traveller, including malaria, dengue fever, typhoid fever, and parasitic infections
- Hepatitis viruses
- HIV
- Infections in the immunocompromised patient
- Infective endocarditis
- Parasitic infections
- Sexually transmitted infections
- Tuberculosis

For all less common and more complex presentations, Basic Trainees will need to know how to:

**Synthesise**
- incorporate epidemiology, pathophysiology and clinical science
- recognise the clinical presentation
- take a relevant clinical
and conditions.

- Vaccine preventable diseases

history
» conduct an appropriate examination
» establish a provisional diagnosis
» plan and arrange appropriate initial investigations

Manage
» initiate therapy in consultation
» discuss broad therapeutic options
» recognise potential complications
» refer appropriately

Consider other factors
» identify broader considerations and their impact on diagnosis and management

EPIDEMIOLOGY, PATHOPHYSIOLOGY AND CLINICAL SCIENCE
Basic Trainees will be able to describe the principles of the foundational sciences.

- Antimicrobial resistance and strategies for prevention
- Biology of common and important pathogens
- Host response to infection
- Pharmacology of major antimicrobial drug classes used
- Principles and practice of antimicrobial stewardship
- Principles of infection control including hand hygiene
- Principles of passive and active immunisation
- Principles underlying laboratory testing for infectious diseases
- Role of immunisation in preventing infectious diseases

INVESTIGATIONS AND PROCEDURES
Basic Trainees will know how to select and interpret the results of these investigations and procedures.

- Administration of common vaccines including consent and delivery
- Blood tests:
  » bacterial and viral polymerase chain reaction (PCR)
  » bacterial and viral serology
  » blood culture including anaerobic and mycobacterial culture
  » C-reactive protein (CRP)
  » erythrocyte sedimentation rate (ESR)
  » full blood count (FBC)
  » liver function tests (LFT)
- Bronchoalveolar lavage (BAL) for microscopy, culture and sensitivities
- Cannulation
- Imaging:
  » chest x-ray (CXR) and other x-rays
  » CT abdomen/pelvis
  » CT head
  » magnetic resonance imaging (MRI)
  » nuclear medicine imaging, such as bone scan
  » ultrasound scan
- Lumbar puncture
Other microbiological tests:
- cerebrospinal fluid (CSF)
- bacterial and viral PCR
- pus samples
- swabs
- urine

Use of nuclear medicine for the investigation of fever for unknown origin, such as suspected discitis or osteomyelitis

Veneupuncture

Appreciate that some infectious diseases require public health notification and know where to find the local guidelines

Appreciate the risks of needle-stick injuries and non-occupational exposure and know where to look for the local guidelines on post-exposure prophylaxis and follow up

Appropriately and safely prescribe:
- antibiotics
- antifungals
- antivirals (excluding anti-retrovirals)
- immunisations

Assess potential routes of infection, routes of transmission, and secondary sites of infection

Counsel families regarding benefits and risks of immunisation

Discuss the role of nuclear medicine in assessment of infection and assessing inflammatory conditions

List differential diagnoses, including infectious and non-infectious causes of presenting complaint

Make a plan for isolation of patients with infectious diseases when necessary

Recognise the role of bone scintigraphy in assessing musculoskeletal infection, metabolic bone diseases, degenerative change and arthritis

Refine differential list based on risk factors such as immunisation status and ethnic origin

Clinical experience in an Infectious Diseases unit in a range of settings

Simulated patient scenarios, such as refusal of vaccination and consent for invasive investigations such as lumbar puncture (LP)


Immunisation handbooks
- The Australian Immunisation Handbook
- Immunisation Handbook (New Zealand)