



The Royal Australasian
College of Physicians

Occupational and Environmental Medicine Training Curriculum

*Australasian Faculty of
Occupational and Environmental Medicine*



Australasian Faculty of
Occupational and Environmental Medicine



The Royal Australasian
College of Physicians

**Physician Readiness for Expert Practice (PREP)
Training Program**

Occupational and Environmental Medicine Training Curriculum

ACKNOWLEDGEMENTS

The Royal Australasian College of Physicians (RACP) Fellows, trainees and staff have contributed to the development of this curriculum document.

The College specifically thanks those Fellows and trainees who have generously contributed to the development of this curriculum, through critical comments drawn from their knowledge and experience and the donation of their time and professional expertise.

The following people, external to AFOEM, deserve specific mention for their contribution:

- Dr Geza Benke, Past President, Australian Institute of Occupational Hygienists
- Prof David Caple, management consultant
- A/Prof Andrew Cole, Australasian Faculty of Rehabilitation Medicine, FAFRM
- A/Prof Matthew Frej, Chapter of Addiction Medicine, FACHAM
- A/Prof Wendy MacDonald, La Trobe University, Melbourne
- Ms Pam Prior, Chair, OHS Educators Chapter, Safety Institute of Australia
- Ms Christine Waring, President, Human Factors & Ergonomics Society of Australia

This curriculum is drawn from the voices of many within AFOEM. It is our curriculum. Through the process of its formulation, Dr David Goddard: Education Project Officer, acted as scribe, collator and 'accoucheur', supported by the present and previous administrative staff of the Faculty. Much assistance with word processing came from Ruth and Moira Goddard, John Sapien and Roslyn Selby.

The process was managed by the Curriculum Development Unit within the College's Education Services, who designed the document, drafted content material, organised and facilitated writing workshops, developed resource materials, and formatted the final document.

CONTACT DETAILS

THE ROYAL AUSTRALASIAN COLLEGE OF PHYSICIANS

AUSTRALIA

145 Macquarie Street
Sydney
NSW 2000
Australia

Tel: (+61) (2) 9256 5444
Fax: (+61) (2) 9252 3310

Email: racp@racp.edu.au
Website: www.racp.edu.au

AOTEAROA NEW ZEALAND

Level 10
3 Hunter Street
Wellington 6011
New Zealand

Tel: (+64) (4) 472 6713
Fax: (+64) (4) 472 6718

Email: racp@racp.org.nz
Website: www.racp.edu.au

COPYRIGHT

1st edition 2010 (revised 2013).

Please note: No Domains, Themes or Learning Objectives have been updated for this edition; design changes ONLY.

Copyright © 2013. The Royal Australasian College of Physicians (RACP). All rights reserved. Published December 2013.

This work is copyright. Apart from any fair use, for the purposes of study or research, it may not be reproduced in whole or in part, by any means electronic or mechanical, without written permission from The Royal Australasian College of Physicians

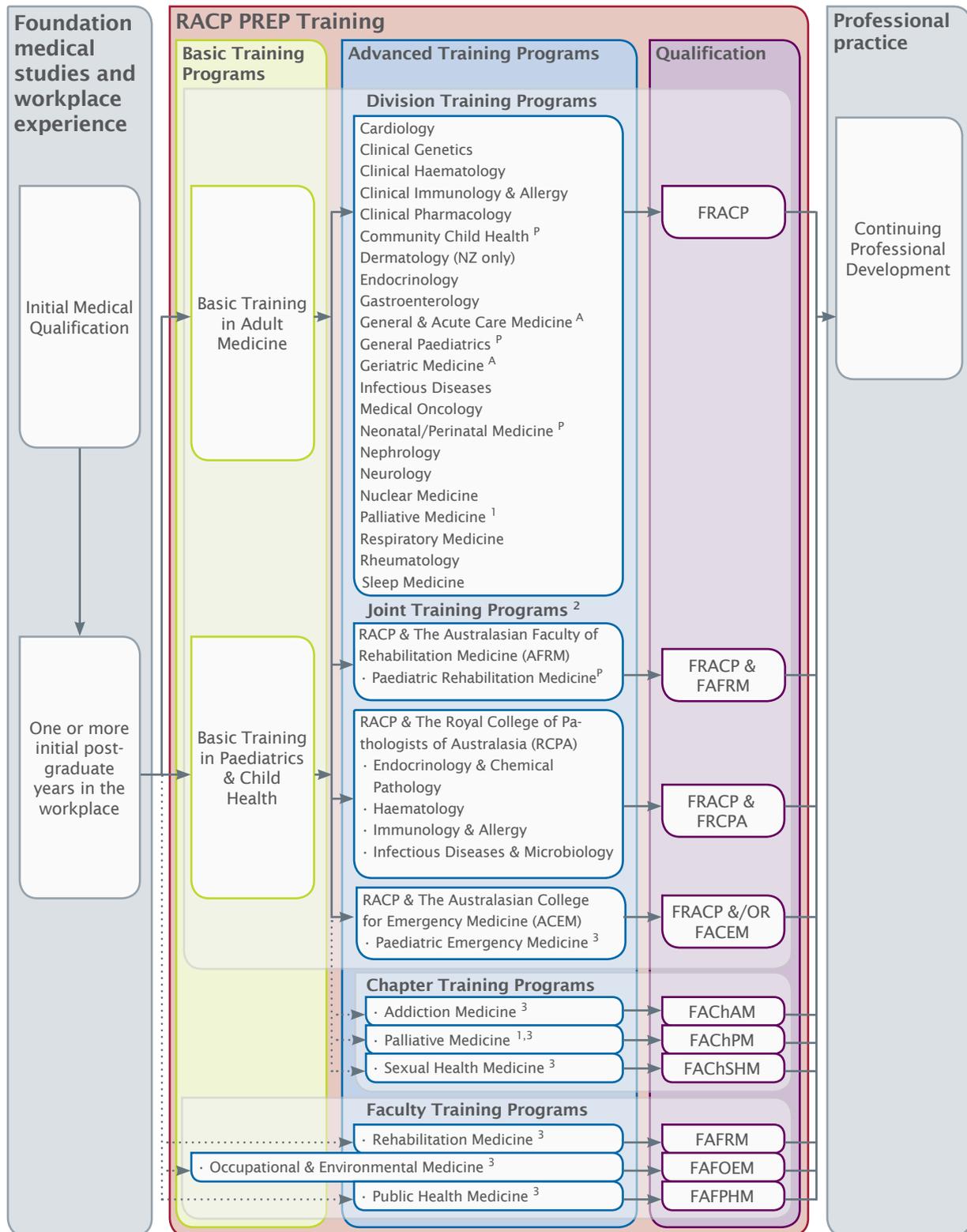
TABLE OF CONTENTS

Acknowledgements	3
Physician and paediatrician training continuum of learning	8
Overview of the specialty.....	9
Curriculum overview.....	10
Curriculum themes and learning objectives	15
Learning objectives tables	17
DOMAIN 10: CLINICAL PRACTICE.....	33
SUB-DOMAIN 11: Clinical process	33
THEME 11.1: Clinical skills.....	33
THEME 11.2: Patient care and therapeutics	41
THEME 11.3: Procedural skills.....	51
SUB-DOMAIN 12: Medical expertise.....	54
THEME 12.1: Management of acute medical problems	54
THEME 12.2: Management of patients with undifferentiated presentations	60
THEME 12.3: Management of patients with disorders of an organ system.....	63
THEME 12.4: Management of patients with defined disease processes	88
THEME 12.5: Medicine through the lifespan – growth and development	94
THEME 12.6: Diseases affected by occupation and environment and their consequences	101
DOMAIN 20: WORKPLACE HAZARD ASSESSMENT	115
THEME 20.1: Properties and mechanisms of harm of agents that can affect health.....	115
THEME 20.2: Description of health effects of occupational hazards	118
THEME 20.3: Assessment and control of work-related hazards.....	128
THEME 20.4: Investigation of situations.....	134
THEME 20.5: Investigation of an outbreak.....	137
DOMAIN 30: CRITICAL APPRAISAL OF INFORMATION.....	141
THEME 30.1: Finding and application of information	141
THEME 30.2: Clinical decision making.....	143
THEME 30.3: Diagnostic and screening tests	148
THEME 30.4: Evaluation of health interventions	149
THEME 30.5: Attribution of cause.....	151
THEME 30.6: Compliance with preventive interventions and procedures.....	152

DOMAIN 40:	RESEARCH METHODS.....	153
THEME 40.1:	Research procedure.....	153
THEME 40.2:	Ethical conduct of research	155
THEME 40.3:	Analysis, summary and depiction of data	156
THEME 40.4:	Research presentation	157
DOMAIN 50:	WORKING WITH LEADERS	160
THEME 50.1:	Nature of organisations.....	160
THEME 50.2:	Organisational factors affecting health and safety performance.....	163
THEME 50.3:	Quality assurance.....	164
THEME 50.4:	Managing and marketing an independent occupational health service within an organisation	165
DOMAIN 60:	PROFESSIONAL QUALITIES	171
SUB-DOMAIN 61:	Communication	171
THEME 61.1:	Physician-patient communication.....	171
THEME 61.2:	Communication with a third party, including the patient’s employer or their family and/or carers	178
THEME 61.3:	Communication with colleagues and the broader health care team	180
THEME 61.4:	Communication with the broader community	189
THEME 61.5:	The influencing of groups	196
SUB-DOMAIN 62:	Quality and safety.....	203
THEME 62.1:	Use of evidence and information.....	203
THEME 62.2:	Safe practice	204
THEME 62.3:	Identification, prevention and management of potential harm.....	211
SUB-DOMAIN 63:	Teaching and learning (scholar).....	219
THEME 63.1:	Ongoing learning.....	219
THEME 63.3:	Educator	222
SUB-DOMAIN 64:	Cultural competency	225
THEME 64.1:	Cultural competency.....	225
SUB-DOMAIN 65:	Ethics.....	235
THEME 65.1:	Professional ethics.....	235
THEME 65.2:	Personal ethics	237
THEME 65.3:	Ethics and health law	241
SUB-DOMAIN 67:	Leadership and management	244
THEME 67.1:	Self-management.....	244
THEME 67.2:	Leadership and management of others	247

SUB-DOMAIN 68:	Health advocacy	249
THEME 68.1:	Advocacy for the patient.....	249
THEME 68.2:	Individual advocacy.....	251
THEME 68.3:	Group advocacy.....	253
SUB-DOMAIN 69:	The broader context of health	255
THEME 69.1:	Burden of disease.....	255
THEME 69.2:	Determinants of health.....	258
THEME 69.3:	Prevention and control.....	260
THEME 69.4:	Priority population groups.....	262
THEME 69.5:	Economics of health.....	263
DOMAIN 70:	LAW AND MEDICINE	265
THEME 70.1:	Relevant laws and their administration.....	265
THEME 70.2:	Industrial relations.....	267
THEME 70.3:	The legal process.....	268
DOMAIN 80:	FITNESS AND RETURN TO WORK	270
THEME 80.1:	Assessment of fitness for work.....	270
THEME 80.2:	Development and implementation of a vocational rehabilitation policy and program.....	277
DOMAIN 90:	ENVIRONMENTAL RISKS AND INCIDENTS	280
THEME 90.1:	Scope of environmental issues.....	280
THEME 90.2:	Planning for an environmental incident.....	287
THEME 90.3:	Practical handling of an environmental incident.....	289
THEME 90.4:	Remediation of a contaminated site.....	292
	Useful references.....	296
	Index of curriculum content.....	298
	List of acronyms and initialisms.....	307

RACP FELLOWSHIP TRAINING PATHWAYS AND THE CONTINUUM OF LEARNING



^P Trainees must complete Basic Training in Paediatrics & Child Health to enter this program.

^A Trainees must complete Basic Training in Adult Medicine to enter this program.

¹ Trainees who have entered Advanced Training in Palliative Medicine via a RACP Basic Training Program will be awarded FRACP upon completion and may subsequently be awarded FACHPM. Trainees who have NOT entered Advanced Training in Palliative Medicine via a RACP Basic Training Program will only be awarded FACHPM upon completion.

² The Child & Adolescent Psychiatry Joint Training Program with the Royal Australian and New Zealand College of Psychiatrists (RANZCP) is currently under review by the RACP and RANZCP and closed to new entrants at present.

³ Alternative entry requirements exist for these training programs; please see the corresponding PREP Program Requirements Handbook for further information.

NB1: This diagram only depicts training programs that lead to Fellowship. Please see the RACP website for additional RACP training programs.

NB2: For further information on any of the above listed training programs, please see the corresponding PREP Program Requirements Handbook.

OVERVIEW OF THE SPECIALTY

What is an occupational physician?

An occupational physician applies high-level medical skills to the interface between a person's work and his or her health. For an individual worker-patient, this may mean seeking evidence for the work-relatedness of a disease, assisting return to work after injury, or assessing fitness for safety-critical work. For groups of workers, this may mean working to reduce known harmful exposures, research on the effects of exposures or clusters of adverse health effects, or promotion of wellness.

In addition to being medically capable, an occupational physician requires understanding of harmful exposures, laws that bear on exposure control and employment opportunity, and how to gain influence within organisations to prevent work-related afflictions and to promote wellness. These abilities serve workers and can assist the work of other medical practitioners and occupational health professionals.

Traditionally, the term *exposure* has applied to dusts, airborne toxins, radiation and noise. Trends suggest that future exposures will be very much concerned with the changing design of work – more part-time and home-based work and greater proportions of immigrant workers and workers supplied to companies by labour hire firms. A worker's mobility, dexterity, aerobic capacity, vision, hearing, skin and reliable mental function will remain the focus of occupational medicine.

What is an environmental physician?

An environmental physician is likewise concerned with exposures and their effect on health. These exposures come from air, water, soil, food, and recreation or play. General practitioners and public health physicians conduct much medical activity in this area, so physicians coming from a background in occupational medicine have tended to address environmental hazards generated by industry – be they neighbourhood noise or dust, chemical spills from tankers, or contamination of sites or waterways. Environmental physicians have served teams assessing the spread and health effects of an environmental incident, or in planning to reduce the risks of fires, explosions or sabotage. The curriculum leans toward these areas but we recognise that some roles of a physician addressing environment-related health effects are as yet beyond imagination.

The roles of occupational physician and environmental physician frequently coexist in the one person, but not always. In fact, for the life of this Faculty so far, the greater strength of our Fellowship typically has been in occupational medicine. Now, growing numbers in our communities recognise environmental medicine as important, so competency there is required for all trainees.

Faculty overview

The Australasian Faculty of Occupational and Environmental Medicine (AFOEM) provides:

- a Fellowship to foster and improve the practice of medicine at the interfaces between health and work and wider environment
- coordination of training and setting of standards for medical practitioners seeking to enter this field in its clinical, preventive and population-based aspects.

Guidance offered by Fellows to trainees is important to training. For this reason, each trainee is linked with an educational supervisor and educational supervision is supported and coordinated in regions by Directors of Training. Nearly always, training is conducted in a community setting. Hospital-based training is the exception.

CURRICULUM OVERVIEW

Occupational and Environmental Medicine – Training Curriculum

In summary, the curriculum outlines:

- how to enter the AFOEM training program
- how to leave the training program – the assessment modes
- what to learn along the way.

The curriculum tells the scope and sources of learning and it suggests the order in which abilities are to be acquired to qualify for Fellowship of the AFOEM. Learning these disciplines requires a mix of on-the-job experiences, a relevant university diploma, simulations and discussions at training meetings, together with online and face-to-face interactions with educational supervisors and other Faculty Fellows nominated for their particular expertise.

The curriculum serves the complete training program. It contains:

- Basic Training
- Advanced Training
- the complete RACP Professional Qualities Curriculum (PQC).

The basic, clinical component of the curriculum contains much of the RACP Adult Basic Training Curriculum although we exclude those parts that would rarely, if ever, enter the current or anticipated future practice of occupational or environmental medicine.

Our communities expect physicians to demonstrate professional qualities as part of routine conduct regardless of their specialty or area of expertise. Qualities such as communication, ethics and advocacy are essential to success in the practice of occupational and environmental medicine; hence their placement *within* the curriculum. In general, professional qualities are most reliably and broadly developed within the context of everyday clinical practice.

The curriculum refers to three stages of learning development, designated A, B and C. Stage A is a newly-introduced basic stage; Stages B and C are advanced training.

- The basic stage of training emphasises *clinical skills, critical appraisal skills* and *professional qualities* [Domains 10, 30 and 60].
- The early advanced training, Stage B, includes all the special features that distinguish occupational and environmental medicine – fitness and return to work, interacting with organisations, relevant law, and assessment of work-related hazards and environmental risks and incidents [Domains 20, 50, 60, 70 80 and 90].
- The latter advanced stage, Stage C, addresses the abilities that distinguish a consultant in this specialty, including high-level communication, policy development, funding and staffing a service, and completion of research.
- Each learning objective details the knowledge and skills required.
- Assessments mark the end of each stage of learning.
- The curriculum foreshadows ways that trainees with their supervisors can appraise their learning as they go – by means of so-called *formative* assessments. These will be introduced gradually over the next two to three years.

There is no designated period of training in occupational and environmental medicine, but a typical period is four to five years. A trainee must be in the program for no less than 18 months before being eligible to sit the examinations at the end of Stage B.

EXPECTED OUTCOMES AT THE COMPLETION OF TRAINING

Graduates from this training program will be equipped to function effectively within the current and emerging professional, medical and societal contexts. At the completion of the training program in occupational and environmental medicine, as defined by this curriculum, it is expected that a new Fellow will have developed the clinical skills and have acquired the theoretical knowledge for competent occupational and environmental medicine practice.

It is expected that a new Fellow will be able to:

- apply the skills of a specialist medical practitioner to:
 - diagnose and manage disease and injury in relation to occupation
 - determine the relationship between health and fitness to work
 - advise on the effect of major contemporary health issues in workplaces
- conduct workplace and preliminary environmental assessments in order to recognise, evaluate and control physical, chemical, biological, design-related and psychosocial hazards
- retrieve, critically appraise and disseminate occupational and environmental health and safety information in readily understandable terms
- apply management skills in order to:
 - coordinate and manage occupational and environmental health and safety programs, including health surveillance
 - effect relevant change in workplaces
 - negotiate and resolve conflict relating to occupational and environmental health and safety issues
- communicate effectively in order to secure the cooperation of management, employees and colleagues in the provision of a safe and healthy workplace
- be an advocate for health in workplaces and the broader community
- interpret the legislative, regulatory, and medico-legal aspects of occupational and environmental health and safety and be able to apply these in practice
- design, implement and manage a vocational rehabilitation program in the workplace
- advise on the human effects of factors in workplaces and other environments that are physical, chemical, biological, psychosocial and mechanical
- design, conduct, implement and evaluate preventive strategies in workplaces
- participate in continuing professional development in order to respond to changes in workplaces and keep abreast of the latest developments on occupational and environmental medicine, and health and safety issues
- recognise the limits of individual knowledge and seek advice from experts in related disciplines when relevant.

STAGES OF TRAINING

The curriculum has nine domains containing 61 themes and, within these, 172 learning objectives. Nearly 60 per cent of these learning objectives appear in two domains - *Clinical practice* and *Professional qualities*. The former, Domain 10, relies heavily on the RACP Adult Basic Training Curriculum; the latter, Domain 60, is essentially the RACP PQC.

Each competency will be developed at its own time and pace across the period of training. Some will build upon university and intern training and will be developed early. Other competencies will be gradually acquired. Yet others will flower greatest near the end of training.

However, even the earlier-developed competencies will be continually shaped and refined in later training. It's just that their development starts fast, then tapers down; the development does not stop altogether. That has implications for assessment – both early and late assessments may be needed in each competency but will differ in degree of sophistication.

During the training period, the curriculum spirals through the competencies, commonly re-visiting areas two or three times. Each subsequent visit represents an advance in understanding or a broadening of purpose. For example, early in training a trainee may be expected to revise their knowledge of chemical and physical agents. Later, they would be expected to anticipate the likely hazards in a workplace, involve appropriate other professionals in the assessment of those hazards, and devise or share in the preparation of a preventive program.

In order to take account of the different pace at which different competencies are developed, the training curriculum is divided into three stages – one basic and two advanced. They are:

Stage A: The basics

Stage B: Learning the ropes

Stage C: Approaching consultancy

The basic stage emphasises clinical knowledge and skills. The early advanced stage includes all the special features that distinguish occupational and environmental medicine – fitness and return to work, interacting with organisations, relevant law, assessment of work-related hazards, and environmental risks and incidents. The latter advanced stage takes these same special features to a higher level, e.g. communication skills to a more public level, or requiring the development of a return to work *policy* as distinct from a plan for an individual worker.

Duration of each stage of training

No firm time period has been placed against each stage, although we anticipate that, as a minimum, Stage B would take two years and Stage C would take one year. Time spent in Stage A will depend upon the trainee’s previous learning and experience and their proven readiness to enter Stage B of the training program.

Trainees in Stage C would, as part of their development, be expected to assist in developing the learning of trainees in Stages A and B and be recognised for the extent and quality of this work. This is outlined in Stage C, Sub-domain 63: Teaching and learning.

The content of each stage is laid out in the following table. Of course, much learning of occupational and environmental medicine is opportunistic so it is possible, for example, that a trainee may reach some Stage C learning objectives before completing Stage B. Broadly, though, the content is as follows.

	Stage A: The basics	Stage B: Learning the ropes	Stage C: Approaching consultancy
Purpose	<i>Basic Training</i>	<i>Advanced Training</i>	
	Honing generic medical, professionalism and critical appraisal skills.	Gaining knowledge and skills particular to occupational and environmental medicine.	Developing consultant level skills – reliable appraisal and evaluation, varied, high level communication skills.
Broad content	<ul style="list-style-type: none"> • Basic science knowledge – e.g. anatomy, pathophysiology • General clinical skills • Critical appraisal • Communication and ethics 	<ul style="list-style-type: none"> • Sources of information • Return to work • Workplace assessment • Diseases of occupation and environment • Structure and function of large organisations • Professional qualities related to interaction with third parties • Laws that bear on occupational medical practice • Contamination of air, water and soil 	<ul style="list-style-type: none"> • Professional qualities aimed at high level communication • Reporting and presentation of research project • Assisting policy development within organisations, e.g. coping with emergencies, return to work policy • Coping with a crisis, e.g. an outbreak investigation, site contamination, industrial relations issue – may be simulated

	Stage A: The basics	Stage B: Learning the ropes	Stage C: Approaching consultancy
		<ul style="list-style-type: none"> Initiate research project Coursework for Grad Dip Occup & Enviro Medicine 	<ul style="list-style-type: none"> Foster others' ability to learn and understand
Entry criteria for a person coming anew to the program	Please refer to the PREP Training in Occupational and Environmental Medicine Program Requirements Handbook.		
Nature of employment (may include job mixes or voluntary components)	At least 10 hours per week in practice in occupational medicine with strong clinical component.	At least 10 hours per week in practice in occupational medicine where assessing fitness for work, return to work, and workplace hazard assessment are parts.	At least 15 hours per week in practice consisting of occupational medicine with emphasis on opportunities to interact with client organisations and teaching activities.
Other learning	<ul style="list-style-type: none"> Advanced life support Enrol in Grad Dip or higher course covering occupational and environmental health 	<ul style="list-style-type: none"> Complete course to level of Grad Dip in Occup and Enviro Health University study should include learning unit on research methods 	
Nature of educational supervision	<ul style="list-style-type: none"> 2nd to 4th weekly meetings with educational supervisor Regional Director of Training oversight and remediation 	<ul style="list-style-type: none"> 2nd to 4th weekly meetings with educational supervisor Regional Director of Training oversight and remediation 	<ul style="list-style-type: none"> 2nd to 4th weekly meetings with educational supervisor Guided by a supervisor. In future years, this support may be supplemented by working together with a small group of 'elders' chosen because of their mix of expertise.

Please refer to the PREP Training in Occupational and Environmental Medicine Program Requirements Handbook for details on teaching & learning and assessment methods.

In summary, the AFOEM competencies and their domains may be depicted as follows:

Competencies

For the purposes of the AFOEM Training Program, the term competency means the knowledge, skills and behaviours that a specialist physician needs to practise occupational and environmental medicine effectively.

The Faculty defines nine competencies for occupational and environmental physicians. These reflect the clinical, preventative and population-based aspects of this specialty. Overarching all nine and reaching within most are the professional qualities laid out in the RACP Professional Qualities Curriculum. The nine competencies are:

- Clinical
- Workplace assessment
- Critical appraisal of information
- Research methods
- Management
- Communication
- Legislation and medico-legal
- Rehabilitation
- Environment

Domains

These nine competencies guide the overall aims and objectives and individual components of the Faculty Training Program and are used as the basis for assessment. The designation of competencies is paralleled in the curriculum with the following domain names:

10 Clinical practice	40 Research methods	70 Law and medicine
20 Workplace hazard assessment	50 Working with leaders	80 Fitness and return to work
30 Critical appraisal of information	60 Professional qualities	90 Environmental risks and incidents

These domain names are designed by double-digit numbers because two of them have sub-domains that receive the second digit. Clinical practice has sub-domains 11 and 12, and Professional qualities has sub-domains 61 through to 69. This way of numbering makes it easy to identify where borrowings have been made from part of the RACP Adult Basic Training Curriculum and the whole of the RACP Professional Qualities Curriculum.

CURRICULUM THEMES AND LEARNING OBJECTIVES

Each of the curriculum documents has been developed using a common format, thereby ensuring a degree of consistency and approach across the spectrum of training.

Domains

The domains are the broad fields which group common or related areas of learning.

Sub-domains

The sub-domains group more closely related areas of learning within a domain.

Themes

The themes identify and link more specific aspects of learning into logical or related groups.

Learning Objectives

The learning objectives outline the specific requirements of learning. They provide a focus for identifying and detailing the required knowledge, skills and attitudes. They also provide a context for specifying assessment standards and criteria as well as providing a context for identifying a range of teaching and learning strategies.

The following series of tables lays out the domains, sub-domains, themes and learning objectives within this curriculum. Against each learning objective is laid the stage (A, B or C) in the curriculum where that learning objective is assessed. Because of the spiral nature of the curriculum, some learning objectives appear in more than one stage.

Firstly, the purpose of the stages is explained. This is followed by a count of the numbers of learning objectives in each of the 62 themes.

Stage A, The basics concerns particularly:

- clinical skills expected of a medical practitioner at completion of post-graduate year two (PGY2)
- well-developed skills at critical appraisal of general medical literature
- professional qualities of communication, patient safety, cultural competence, ethics, and clinical decision making
- limited knowledge of basic physics, chemistry and microbiology
- specified knowledge of anatomy, pathophysiology and pharmacology
- specified knowledge of methods of clinical investigation and treatment.

Stage B, Learning the ropes is where all the particular knowledge and skills needed to be an occupational and environmental physician are encountered and developed.

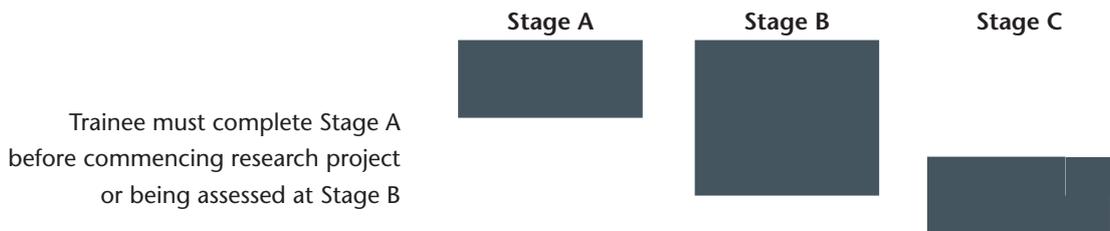
Stage C, Approaching consultancy is where the knowledge and skills required of an occupational and environmental physician are applied to a sufficient variety of practical situations to build fluency and confidence for consultant-level practice.

Opportunistic learning and the overlap of stages

The conclusion of each stage is marked by a summative assessment. However, any process of learning does not necessarily accord with the timing of its assessment. Much learning of occupational medicine is opportunistic and matters relevant to Stage B will no doubt be learnt during Stage A, and sometimes a trainee may present research (a Stage C objective) before passing the Stage B assessment. However, from 2012 onward, a trainee may not submit his or her communication portfolio before completing Stage B.

The sole caveats are that a trainee in Stage A must complete that stage:

- before being assessed at Stage B
- before attempting the research project.



Numbers of domains, themes and learning objectives

There are nine domains. Two of these, 10 and 60, have sub-domains. Among these nine domains are 62 themes and 172 learning objectives (LOs) as depicted below. The percentage of the total of learning objectives in each domain and sub-domain is shown in square brackets, i.e. nearly 60% of all learning objectives relate either to clinical practice or professional qualities. Within professional qualities, some learning objectives appear in more than one stage of the curriculum; an asterisk (*) indicates where this occurs. Stage A has 88 learning objectives, Stage B has 79, and Stage C has 42.

Domain	10 [31%]									
Sub-domain	11 [8%]			12 [23%]						
Theme	11.1	11.2	11.3	12.1	12.2	12.3	12.4	12.5	12.6	
No. of LOs	6	5	3	4	2	13	3	5	12	

Domain	20 [12%]					30 [5%]					
Theme	20.1	20.2	20.3	20.4	20.5	30.1	30.2	30.3	30.4	30.5	30.6
No. of LOs	3	6	6	2	3	1	4	1	2	1	1

Domain	40 [3%]				50 [5%]			
Theme	40.1	40.2	40.3	40.4	50.1	50.2	50.3	50.4
No. of LOs	1	1	1	2	2	1	1	5

Domain	60 [28%]										
Sub-domain	61 [9%]				62 [5%]			63 [1%]			
Theme	61.1	61.2	61.3	61.4	61.5	62.1	62.2	62.3	63.1	63.3	There is no 63.2
No. of LOs	2*	1*	4*	4*	5*	1	3*	4*	1*	1*	

Domain	60 [28%]									
Sub-domain	64 [3%]	65 [3%]			67 [2%]		68 [2%]			
Theme	64.1	65.1	65.2	65.3	67.1	67.2	68.1	68.2	68.3	
No. of LOs	6*	1*	2*	2	2*	1	1*	1*	1*	

Domain	60 [28%]					70 [2%]			80 [5%]	
Sub-domain	69 [3%]									
Theme	69.1	69.2	69.3	69.4	69.5	70.1	70.2	70.3	80.1	80.2
No. of LOs	1*	1*	1*	1	1*	1	1	2	6	2

Domain	90 [9%]			
Theme	90.1	90.2	90.3	90.4
No. of LOs	6	2	3	4

LEARNING OBJECTIVE TABLES

DOMAIN 10	CLINICAL PRACTICE	
Sub-domain 11	Clinical Process	
Theme 11.1	Clinical Skills	
Learning Objective		
11.1.1	Elicit the history and obtain other relevant data	STAGE A
11.1.2	Conduct an appropriate physical examination	STAGE A
11.1.3	Synthesise findings from history and physical examination to develop a differential diagnosis and management plan	STAGE A
11.1.4	Plan and arrange investigations appropriately	STAGE A
11.1.5	Take, record, and analyse an occupational and environmental history from an individual	STAGE B
11.1.6	Assess what has been gained from a clinical encounter, form an opinion, and decide the options of what to do next	STAGE B
Theme 11.2	Patient Care and Therapeutics	
Learning Objective		
11.2.1	Manage general care in the unwell patient	STAGE A
11.2.2	Prescribe appropriate and safe pharmacotherapy	STAGE A
11.2.3	Incorporate health and wellness promotion in clinical practice	STAGE A
11.2.4	Manage patients with surgical problems	STAGE A
11.2.5	Facilitate ongoing care planning	STAGE A

Theme 11.3	Procedural Skills	
Learning Objective		
11.3.1	Prepare patient for procedure	STAGE A
11.3.2	Perform emergency and routine procedures	STAGE A
11.3.3	Provide care following procedure	STAGE A
Sub-domain 12	Medical Expertise	
Theme 12.1	Management of Acute Medical Problems	
Learning Objective		
12.1.1	Recognise and manage the critically ill patient	STAGE A
12.1.2	Manage acute specific medical problems	STAGE A
12.1.3	Communicate with patients and their families/carers in an emergency situation	STAGE A
12.1.4	Manage life-threatening conditions that affect or are affected by occupation or environment and be able to apply supportive care that is appropriate to the circumstances	STAGE B
Theme 12.2	Management of Patients with Undifferentiated Presentations	
Learning Objective		
12.2.1	Manage patients with undifferentiated presentations	STAGE A
12.2.2	Manage patients with undifferentiated presentations allegedly related to occupation or environment	STAGE B
Theme 12.3	Management of Patients with Disorders of an Organ System	
Learning Objectives		
12.3.1	Manage patients with disorders of the cardiovascular system	STAGE A
12.3.2	Manage patients with endocrine and metabolic disorders	STAGE A
12.3.3	Manage patients with disorders of the gastrointestinal system	STAGE A
12.3.4	Manage patients with non-malignant disorders of the haematological system	STAGE A
12.3.5	Manage patients with disorders of the immune system	STAGE A
12.3.6	Manage patients with mental health disorders	STAGE A
12.3.7	Manage patients with disorders of the musculoskeletal system	STAGE A
12.3.8	Manage patients with disorders of the neurological system	STAGE A
12.3.9	Manage patients with disorders of the renal and genitourinary systems	STAGE A

12.3.10	Manage patients with disorders of the respiratory and sleep system	STAGE A
12.3.11	Manage patients with skin disorders	STAGE A
12.3.12	Manage patients with common eye conditions	STAGE A
12.3.13	Manage patients with common ear conditions	STAGE A
Theme 12.4	Management of Patients with Defined Disease Processes	
Learning Objective		
12.4.1	Manage patients with neoplastic diseases	STAGE A
12.4.2	Manage patients with genetic disorders	STAGE A
12.4.3	Manage adult patients with infectious diseases	STAGE A
Theme 12.5	Medicine Through the Lifespan – Growth and Development	
Learning Objective		
12.5.1	Manage common presentations in adolescents	STAGE A
12.5.2	Manage issues in regard to pregnancy and reproduction	STAGE A
12.5.3	Manage common problems associated with the menopause	STAGE A
12.5.4	Manage problems in the older person	STAGE A
12.5.5	Manage patients at the end of life	STAGE A
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	
Learning Objective		
12.6.1	Manage musculoskeletal or neurological conditions that affect or are affected by occupation or environment	STAGE B
12.6.2	Manage psychiatric conditions that affect or are affected by occupation or environment	STAGE B
12.6.3	Manage respiratory system conditions that affect or are affected by occupation or environment	STAGE B
12.6.4	Manage skin conditions that affect or are affected by occupation or environment	STAGE B
12.6.5	Manage cardiovascular conditions that affect or are affected by occupation or environment	STAGE B
12.6.6	Manage eye conditions that affect or are affected by occupation or environment	STAGE B
12.6.7	Manage ear conditions that affect or are affected by occupation or environment	STAGE B

12.6.8	Manage renal and urinary disorders that affect or are affected by occupation or environment	STAGE B
12.6.9	Manage conditions of the blood-forming or immune systems that affect or are affected by occupation or environment	STAGE B
12.6.10	Manage conditions of the endocrine or gastroenterological systems that affect or are affected by occupation or environment	STAGE B
12.6.11	Manage reproductive issues that affect or are affected by occupation or environment	STAGE B
12.6.12	Assess and manage specific toxicities relating to occupation or environment	STAGE B
DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.1	Properties and Mechanisms of Harm of Agents that can Affect Health	
Learning Objective		
20.1.1	Describe the properties of physical agents that can affect health	STAGE A
20.1.2	Describe the chemical properties that are relevant to health	STAGE A
20.1.3	Describe the properties of biological agents that can affect health	STAGE A
Theme 20.2	Description of Health Effects of Occupational Hazards	
Learning Objective		
20.2.1	Describe the potential health effects of common and important physical hazards	STAGE B
20.2.2	Describe the potential health effects of common and important hazards from substances used in workplaces	STAGE B
20.2.3	Describe the potential health effects of common and important biological hazards	STAGE B
20.2.4	Describe the potential health effects of common and important design hazards	STAGE B
20.2.5	Describe the potential health effects of common and important psychosocial hazards	STAGE B
20.2.6	Describe the health effects of occupational hazards with discernment as to what is likely given the extent of exposure	STAGE C
Theme 20.3	Assessment and Control of Work-Related Hazards	
Learning Objective		
20.3.1	Outline the major hazards commonly found in nominated workplaces	STAGE B
20.3.2	Describe the general principles of workplace assessment	STAGE B
20.3.3	Determine whether current hazard control mechanisms and procedures are satisfactory	STAGE B

20.3.4	Compile a report of a workplace assessment that can be understood by people without scientific expertise	STAGE B
20.3.5	Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues	STAGE C
20.3.6	Involve other occupational health professionals	STAGE C
Theme 20.4	Investigation of Situations	
Learning Objective		
20.4.1	Apply a screening test to a work group	STAGE B
20.4.2	Use apt communication techniques to dissuade the use of an inappropriate test	STAGE B
Theme 20.5	Investigation of an Outbreak	
Learning Objective		
20.5.1	Investigate an outbreak of an acute disorder, such as an infectious disease, or an apparent cluster of disease cases or symptom complaints	STAGE C
20.5.2	Deal with the human and political factors that accompany events such as clusters or outbreaks	STAGE C
20.5.3	Identify and evaluate appropriate preventive measures following events such as clusters or outbreaks	STAGE C
DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.1	Finding and Application of Information	
Learning Objective		
30.1.1	Demonstrate understanding of the principles of evidence-based medicine, the limitations of evidence and the challenge of applying research findings to daily clinical practice	STAGE A
Theme 30.2	Clinical Decision Making	
Learning Objective		
30.2.1	Understand and apply the process of diagnostic reasoning	STAGE A
30.2.2	Prognosticate and predict risk	STAGE A
30.2.3	Derive therapeutic decisions which maximise patient benefit and acceptance	STAGE A
30.2.4	Use evidence effectively and efficiently to inform clinical decision making	STAGE A
Theme 30.3	Diagnostic and Screening Tests	
Learning Objective		
30.3.1	Appraise a test in accord with the properties of the test and characteristics of those being tested	STAGE A

Theme 30.4	Evaluation of Health Interventions	
Learning Objective		
30.4.1	Appraise the likely efficacy of a reported health intervention	STAGE A
30.4.2	Appraise the economic evaluation of an intervention	STAGE A
Theme 30.5	Attribution of Cause	
Learning Objective		
30.5.1	Appraise support for an alleged causal association between a health effect and an exposure	STAGE A
Theme 30.6	Compliance with Preventive Interventions and Procedures	
Learning Objective		
30.6.1	Appraise interventions including strategies to improve adherence to protective measures	STAGE A
DOMAIN 40	RESEARCH METHODS	
Theme 40.1	Research Procedure	
Learning Objective		
40.1.1	Contribute to the development of new knowledge by active involvement in research	STAGE B
Theme 40.2	Ethical Conduct of Research	
Learning Objective		
40.2.1	Understand and apply ethical principles underpinning the conduct of research	STAGE B
Theme 40.3	Analysis, Summary and Depiction of Data	
Learning Objective		
40.3.1	Discern the essence of a data set and summarise and depict this in a meaningful and logical way	STAGE B
Theme 40.4	Research Presentation	
Learning Objective		
40.4.1	Present research findings in a written form	STAGE C
40.4.2	Prepare and give a succinct oral presentation of an investigation	STAGE C

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.1	Nature of Organisations	
Learning Objective		
50.1.1	Describe and distinguish the various forms of management within an organisation	STAGE B
50.1.2	Outline the purpose of government regulators, trade unions and special interest groups	STAGE B
Theme 50.2	Organisational Factors Affecting Health and Safety Performance	
Learning Objective		
50.2.1	Define and describe the effects of organisational factors on health and safety performance	STAGE B
Theme 50.3	Quality Assurance	
Learning Objective		
50.3.1	Describe the components of a process of quality assurance by continuous improvement within an organisation	STAGE B
Theme 50.4	Managing and Marketing an Independent Occupational Health Service within an Organisation	
Learning Objective		
50.4.1	Identify the health and safety needs of an organisation	STAGE B
50.4.2	Determine the goals of the occupational health service	STAGE B
50.4.3	Operate or work in close liaison with the person that operates the occupational health service	STAGE C
50.4.4	Develop a plan to market the occupational health service	STAGE C
50.4.5	Demonstrate how to manage professional liability risk for an occupational health service	STAGE C

DOMAIN 60	PROFESSIONAL QUALITIES	
Sub-domain 61	Communication	
<p><i>In order to provide high-quality care for patients, it is essential that physicians establish and foster effective relationships with patients and their families, other health care professionals, and administrative personnel.</i></p> <p><i>To achieve this they must develop and use the full range of skills related to communication that will enable them to effectively obtain and synthesise information from, and discuss relevant issues with, patients and their families, professional colleagues, administrative personnel and systems as appropriate. These communication skills are characterised by understanding, trust, respect, empathy, and confidentiality. Effective communication skills will also facilitate their ability to research, evaluate, and disseminate information in the broader community.</i></p> <p><i>First encounters can have a profound effect on practice. Therefore it is important to develop effective communication strategies early on in training.</i></p>		
Theme 61.1	Physician-Patient Communication	
Learning Objective		
61.1.1	Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news	STAGE A & B
61.1.2	Empower patients and be respectful of their rights in all aspects of communication	STAGE A & B
Theme 61.2	Communication with a Third Party, Including the Patient's Employer or Their Family and/or Carers	
Learning Objective		
61.2.1	Apply communication skills in encounters with a third party, including a patient's employer or family (including extended family) and/or carers	STAGE A & B
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	
Learning Objective		
61.3.1	Communicate effectively within multidisciplinary teams	STAGE A & C
61.3.2	Communicate effectively with referring doctors, and when referring a patient to another specialist	STAGE A & B
61.3.3	Apply communication skills to facilitate effective clinical handover and transfer of care	STAGE A & B
61.3.4	Communicate effectively with health administration	STAGE A & C

Theme 61.4		Communication with the Broader Community
Learning Objective		
61.4.1	Communicate effectively with support organisations, administrative bodies, governments, and others in the wider community	STAGE A & C
61.4.2	Demonstrate the ability to apply specific medico-legal communication practices	STAGE A, B & C
61.4.3	Describe the ethical and legal constraints on communicating medical information to a third party	STAGE B
61.4.4	Identify and address barriers to communication in a non-medical workplace	STAGE B
Theme 61.5		The Influencing of Groups
Learning Objective		
61.5.1	Demonstrate understanding of the modalities of influence within an organisation	STAGE B & C
61.5.2	Present a 'toolbox talk' to a group of workers	STAGE C
61.5.3	Address an occupational or environmental issue at a meeting of more than a dozen interested people	STAGE C
61.5.4	Offer expert evidence to a government or judicial inquiry on an occupational or environmental issue	STAGE C
61.5.5	Participate effectively as a member or chairperson of a committee	STAGE C
Sub-domain 62		Quality and Safety
<i>Quality and safety guidelines are developed to ensure the safe and quality care of patients. The implementation of these standards is the responsibility of all health care workers. Physicians must consider quality and safety in every aspect of their practice, from their interactions (communication) with patients, to managing and reporting risks and hazards.</i>		
Theme 62.1		Use of Evidence and Information
Learning Objective		
62.1.1	Use evidence to inform quality improvement	STAGE A
Theme 62.2		Safe Practice
Learning Objective		
62.2.1	Optimise safe work practice which minimises error	STAGE A, B & C
62.2.2	Facilitate safe prescribing and administration of medication and display an understanding of the associated error types, causes, and risks	STAGE A
62.2.3	Promote safe continuity of care for patients	STAGE A & B

Theme 62.3	Identification, Prevention and Management of Potential Harm	
Learning Objective		
62.3.1	Recognise, report on and manage adverse events and error	STAGE A & B
62.3.2	Identify, establish, implement and/or comply with relevant risk-management and risk-minimisation procedures	STAGE A & B
62.3.3	Identify risks to health arising from one's own work activities	STAGE A
62.3.4	Understand the process of managing complaints and how to utilise complaints to enhance medical care	STAGE A & B
Sub-domain 63	Teaching and Learning (Scholar)	
<p><i>Physicians should actively contribute to the further research, development, appraisal, understanding, and dissemination of health care knowledge among their professional colleagues, students, and patients and within the broader general community.</i></p> <p><i>As with any profession, physicians need to model and engage in a process of continuing personal, professional, and educational development in order to maintain, further develop, and extend their professional knowledge, clinical skills, and technical expertise. This is especially important within the current context of an ever-increasing, rapid, and exponential growth in knowledge and its related applications.</i></p>		
Theme 63.1	Ongoing Learning	
Learning Objective		
63.1.1	Participate in effective continuing professional and educational development	STAGE A, B & C
Theme 63.2	Research	
Learning Objective		
<p><i>Learning objectives 3.2.1 and 3.3.3 from the RACP PQC have each been incorporated in Domain 40 (Research methods) of the AFOEM Training Curriculum. Learning objective 3.2.2 from the RACP PQC has been incorporated in Domain 30 (Critical appraisal of information) of the AFOEM Training Curriculum</i></p>		
Theme 63.3	Educator	
Learning Objective		
63.3.1	Recognise the importance of health education and the role of the physician as a teacher to patients, other physicians and in the wider community, and develop the skills to undertake this role	STAGE A, B & C

Sub-domain 64	Cultural Competency	
<p><i>Physicians should display commitment to gaining an understanding of the impact of culture on health outcomes. They must endeavour to become acquainted with the cultural perception of illness, cultural aspects of family, and cultural attitudes toward death and illness held by their patients. Physicians have a responsibility to manage their own development of cultural competency and familiarise themselves with the differing cultures within the community.</i></p>		
Theme 64.1	Cultural Competency	
Learning Objective		
64.1.1	Manage one's own cultural competency development	STAGE A & B
64.1.2	Demonstrate the ability to communicate effectively with people from culturally and linguistically diverse backgrounds	STAGE B
64.1.3	Apply specific knowledge of the patient's cultural and religious background, attitudes and beliefs in managing and treating the patient	STAGE A & B
64.1.4	Understand how the special history of Māori and Pacific peoples (NZ) and Aboriginal/Torres Strait Islander peoples (Australia) affects their current health status	STAGE B
64.1.5	Identify and act on cultural bias within health care services and other organisations	STAGE C
64.1.6	Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes	STAGE A, B & C
Sub-domain 65	Ethics	
<p><i>Physicians must adopt an ethical attitude towards the practice of medicine. Ethics pervades every aspect of clinical practice, from communication to critical reflection and professional standards. While it is important to bear in mind the relationship of health law and practice, it is important also to understand the distinction between law and ethics. Physicians must cultivate ethical reflection and ethical behaviour through an awareness of ethical principles, health law, and the limits of science on behaviour.</i></p>		
Theme 65.1	Professional Ethics	
Learning Objective		
<p><i>Learning objective 5.1.2 from the RACP PQC has been incorporated in Domain 40 (Research methods) of the AFOEM Training Curriculum</i></p>		
65.1.1	Demonstrate ability to apply an ethical framework in clinical practice	STAGE A & C

Theme 65.2	Personal Ethics	
Learning Objectives		
65.2.1	Develop a sound professional standard of personal conduct	STAGE A & B
65.2.2	Demonstrate the ability to reflect critically on personal beliefs, biases and behaviours, and their alignment with health care policy and impact on interaction with patients	STAGE A & B
Theme 65.3	Ethics and Health Law	
Learning Objectives		
65.3.1	Demonstrate the ability to apply legal and ethical frameworks to physician-patient relationships	STAGE A
65.3.2	Demonstrate the ability to apply relevant legislation and ethical frameworks to interactions outside the direct physician-patient relationship	STAGE A
There is no Sub-domain 66. The topic of clinical decision making has been incorporated within Domain 30 and Theme 30.2		
Sub-domain 67	Leadership and Management	
<i>The professional physician must have the ability to manage and make decisions about the allocation of personal, professional, and organisational resources.</i>		
Theme 67.1	Self-management	
Learning Objective		
67.1.1	Implement and model effective self-management practices	STAGE A & B
67.1.2	Identify personal attributes or health issues that could impair one's performance at work	STAGE A
Theme 67.2	Leadership and Management of Others	
Learning Objective		
67.2.1	Demonstrate ability to provide leadership and effectively manage others	STAGE C

Sub-domain 68	Health Advocacy	
<p><i>Physicians have an obligation, both as individuals and in their profession, to positively influence the health circumstances of a patient. Opportunities for this may lie outside the immediate clinical context, and the patient may need the physician's support for success. The physician may need to add their voice where the patient is vulnerable due to infirmity, age, or commonly stigmatised status (e.g. race, social class, or habit). We refer to this process as advocacy.</i></p> <p><i>Beyond clinical practice, advocacy has a rich history of success in public health where physicians and others have advocated for, and sustained, favourable change in road safety, immunisation, and tobacco control. There is also an opportunity for advocacy for changing the environment or focus of care to improve both the quality and safety of care for others.</i></p>		
Theme 68.1	Advocacy for the Patient	
Learning Objective		
68.1.1	Know and apply the key principles, processes and limitations of advocacy	STAGE A & B
Theme 68.2	Individual Advocacy	
Learning Objective		
68.2.1	Identify and address key issues affecting personal work environment and recognise the role of advocacy	STAGE A & B
Theme 68.3	Group Advocacy	
Learning Objective		
68.3.1	Demonstrate an understanding of the necessary steps required to effect change within organisations and the community	STAGE A & C
Sub-domain 69	The Broader Context of Health	
<p><i>Physicians have an obligation to think more broadly than the health of the immediate patient. They must consider the effects of societal issues on health, and broader health determinants. They must be aware of the key population and public health principles.</i></p> <p><i>Physicians will encourage and educate patients to achieve healthier lifestyles and prevent injury, ill health, and disease. To achieve this, familiarity with risk factors (social, environmental, psychological) affecting specific population subgroups, disease-prevention services, and legislation are essential.</i></p>		
Theme 69.1	Burden of Disease	
Learning Objective		
69.1.1	Demonstrate an awareness of the health priorities for the local community, and more broadly for Australia and New Zealand	STAGE A & B
Theme 69.2	Determinants of Health	
Learning Objective		
69.2.1	Identify and define the determinants of health	STAGE A & B

Theme 69.3	Prevention and Control	
Learning Objective		
69.3.1	Adopt a population health approach to the prevention of illness, promotion of health and control of disease	STAGE A & B
Theme 69.4	Priority Population Groups	
Learning Objective		
69.4.1	Implement strategies to reduce inequities in health status between population groups	STAGE A
Theme 69.5	Economics of Health	
Learning Objective		
69.5.1	Demonstrate a basic understanding of the societal, political and economic pressures that influence the way funding is provided and used	STAGE A & C
DOMAIN 70	LAW AND MEDICINE	
Theme 70.1	Relevant Laws and Their Administration	
Learning Objective		
70.1.1	Locate and interpret legislation applicable to specific hazards in workplaces and the environment	STAGE B
Theme 70.2	Industrial Relations	
Learning Objective		
70.2.1	Describe the process of reaching industrial agreements and their influence on health and safety	STAGE B
Theme 70.3	The Legal Process	
Learning Objective		
70.3.1	Describe courts and their procedures	STAGE B
70.3.2	Prepare a medical report for the purposes of a legal process	STAGE C
DOMAIN 80	FITNESS AND RETURN TO WORK	
Theme 80.1	Assessment of Fitness for Work	
Learning Objective		
80.1.1	Assess the task demands and environment of the work of an employee	STAGE B
80.1.2	Define and negotiate the standards of fitness required	STAGE B
80.1.3	Perform a clinical assessment of a person's fitness for work	STAGE B

80.1.4	Describe the consequences of injury or illness and, in particular, its effect on a person's ability to work	STAGE B
80.1.5	Prepare and implement a return to work or rehabilitation plan for an employee	STAGE B
80.1.6	Discuss with a patient the implications for employment of medication and convalescence from procedures	STAGE B
Theme 80.2	Development and Implementation of a Vocational Rehabilitation Policy and Program	
Learning Objectives		
80.2.1	Develop a rehabilitation policy at a workplace	STAGE C
80.2.2	Implement and evaluate a rehabilitation plan for an employer	STAGE C
DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1	Scope of Environmental Issues	
Learning Objective		
90.1.1	Define environment and factors that influence occurrence of exposure and the susceptibility of individuals or groups	STAGE B
90.1.2	Describe how environmental risk is assessed and perceived	STAGE B
90.1.3	Describe the process of development of environmental standards for hazards arising from workplaces	STAGE B
90.1.4	Recognise and advise on health risks in the general environment arising from workplace activities	STAGE B
90.1.5	Recognise and advise on health risks in and around the domestic environment and in leisure activities	STAGE B
90.1.6	Describe the health risks of work in ambient environments of extreme temperature or pressure	STAGE B
Theme 90.2	Planning for an Environmental Incident	
Learning Objectives		
90.2.1	Assist planning for reduction of risks both in the prevention of an incident and the management of an incident should it occur	STAGE C
90.2.2	Contribute to the development of health policy relating to exposure to hazards arising from industry	STAGE C

Theme 90.3		Practical Handling of an Environmental Incident
Learning Objectives		
90.3.1	Undertake the clinical appraisal and management of individuals exposed to environmental hazards arising from industry	STAGE C
90.3.2	Demonstrate an understanding of how environmental health risk and hazardous exposures are monitored	STAGE C
90.3.3	Develop strategies to address varying stakeholder issues	STAGE C
Theme 90.4		Remediation of a Contaminated Site
Learning Objectives		
90.4.1	Assess degree of contamination and health risks of a contaminated site	STAGE C
90.4.2	Develop plan to remediate the site	STAGE C
90.4.3	Oversee implementation of the remediation process	STAGE C
90.4.4	Evaluate the effectiveness of the decontamination process	STAGE C

DOMAIN 10: CLINICAL PRACTICE

This domain contains Sub-domain 11: Clinical process, and Sub-domain 12: Medical expertise.

Themes in this domain have been adapted in large part from the RACP Adult Basic Training Curriculum.

Sub-domain 11: Clinical process

The themes in Sub-domain 11 are:

- 11.1: Clinical skills
- 11.2: Patient care and therapeutics
- 11.3: Procedural skills

THEME 11.1: CLINICAL SKILLS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
11.1.1 Elicit the history and obtain other relevant data
11.1.2 Conduct an appropriate physical examination
11.1.3 Synthesise findings from history and physical examination to develop a differential diagnosis and management plan
11.1.4 Plan and arrange investigations appropriately
Advanced Stage B: Learning the Ropes
11.1.5 Take, record, and analyse an occupational and environmental history from an individual
11.1.6 Assess what has been gained from a clinical encounter, form an opinion, and decide the options of what to do next
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE A: The basics
Learning Objective 11.1.1	Elicit the history and obtain other relevant data	
Knowledge	Skills	
<ul style="list-style-type: none"> relate a structured approach to patient history, including systems review discuss different approaches to history taking as needed in various clinical settings, such as acute inpatient, emergency, ambulatory care, and telephone/videoconference consultation settings identify and evaluate other potential sources of data, e.g. personal health records, medical records, general practitioner, family, carers and pharmacy records. 	<ul style="list-style-type: none"> take and record a relevant medical history from any person capable of giving such a history establish a rapport and professional relationship with patients of all ages, their caregivers, and relatives obtain a focussed, efficient, and accurate history give appropriate emphasis to functional and social history and quality of life use a range of strategies to corroborate information given by patient evaluate the history in light of the degree of functional impairment, physical findings, and other data revisit the history when the clinical situation is not clear collect accurate data in complex situations (e.g. non-English speakers, confused patient, chronic disease with multiple pathologies) using third party history, as necessary, to clarify the history obtained from the patient persist in seeking information to assist in clinical decision making. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> reflective application of basic medical knowledge textbook reading presenting and discussing cases with peers interaction with workers, unions, employers and insurers videoed patient consultations. 	<ul style="list-style-type: none"> Sub-domain 12: Medical expertise Sub-domain 61: Communication 	
Scope of learning required		
<p>There are no limitations to the level of expertise required in history-taking. The knowledge and skills required for this will be refined throughout a whole professional lifetime. For examination purposes, history-taking should be a purposeful and fluent approach to current symptoms, relevant past, family and social history, medications, and lifestyle.</p> <p>You should clearly demonstrate that you have perceived the important features of the patient's story and understood their import in terms of likely pathology and the effect on the patient's life. You should be able to summarise your findings and articulate what you would intend to do next.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE A: The basics
Learning Objective 11.1.2	Conduct an appropriate physical examination	
Knowledge		Skills
<ul style="list-style-type: none"> locate and define normal features of body structures for which examination is being undertaken explain the pathophysiological basis of physical signs relate a structured, systematic approach to examination define the basis of detailed system examinations explain screening physical examination techniques (e.g. for neurological intactness, locomotor) identify clinical signs and patterns discuss the evidence base for physical signs (reliability, validity, sensitivity, specificity, areas of uncertainty) describe the range of functional/screening tests, including mini mental state examination, Glasgow coma scale, depression score, six minute walk, and timed up and go test. 		<ul style="list-style-type: none"> use physical senses sequence examination to optimise clinical yield and to avoid unnecessary discomfort for the examinee articulate to a patient and to a colleague the particular purpose of any intended physical examination in the context of other information known about the patient be thorough yet limit redundancy in physical examination palpate with a firmness of touch that is appropriate given the circumstances perform a thorough, accurate, and complete physical examination in new patients perform a focussed clinical examination in selected settings interpret physical signs accurately integrate data obtained by other health care workers into the physical examination findings use specific tools when indicated (e.g. functional/screening tests) consider patient dignity and the need for a chaperone for some or all of the examination demonstrate sensitivity to patients in pain, embarrassed, or vulnerable clearly document examination findings.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conducting physical examination under guidance presenting and discussing cases with peers CDs and textbook explanations reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Sub-domain 12: Medical expertise Theme 30.2: Clinical decision making Theme 61.1: Physician-patient communication Theme 64.1: Cultural competency Theme 65.1: Professional ethics

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE A: The basics
Learning Objective 11.1.2	Conduct an appropriate physical examination	

Scope of learning required

The skills of physical examination in this theme apply most to the examiner's senses and simple office aids such as a stethoscope, tape measure, magnifying glass, plessor, ophthalmoscope, or otoscope. Ensure a particularly high level of skill for examination of muscles and joints, the neurological system, mental status, the eye, the cardiovascular system, respiratory system, and major abdominal organs. However, see also the objectives listed under Sub-domain 12.

At the practical examination, make sure you demonstrate an organised approach and show that you are able to recognise abnormality, to use one abnormal finding to anticipate others, and to link the observations to form a coherent pattern of likely underlying pathophysiology. This requires extensive reflective practice.

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE A: The basics
Learning Objective 11.1.3	Synthesise findings from history and physical examination to develop a differential diagnosis and management plan	

Knowledge	Skills
<ul style="list-style-type: none"> explain the role of diagnosis for both medical and social purposes describe the likely impact on patient and family of a serious diagnosis define the principles of developing a differential diagnosis identify diseases and symptoms that are common in the population that the patient represents. 	<ul style="list-style-type: none"> state and explain a diagnosis and its uncertainties interpret and integrate the history, physical examination and investigative findings formulate a complete and reasoned problem list with differential diagnoses and a management plan prioritise the problem list, particularly in patients with multiple medical problems prioritise urgency of individual investigations and treatments communicate with the patient, their family and caregivers to develop a management plan. Adapt an approach to management of each disorder to take account of patient factors and comorbidities record history, examination findings, synthesis, and plan for investigations and management accurately and concisely justify the diagnosis based on clinical information modify the working diagnosis based on new information or response to therapy

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills		STAGE A: The basics
Learning Objective 11.1.3	Synthesise findings from history and physical examination to develop a differential diagnosis and management plan		
	<ul style="list-style-type: none"> • provide instructions regarding frequency of observations, and clear instructions on parameters for action • afford sensitivity to a patient's reaction at being given a diagnosis. 		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • reflective application of basic medical knowledge • textbook reading • presenting and discussing cases with peers. 		<ul style="list-style-type: none"> • Theme 11.2: Patient care and therapeutics • Theme 12.2: Management of patients with undifferentiated presentations • Theme 12.3: Management of patients with disorders of an organ system • Theme 30.2: Clinical decision making • Theme 61.3: Communication with colleagues and the broader health care team • Learning objective 61.3.3: Apply communication skills to facilitate effective clinical handover and transfer of care • Theme 63.1: Ongoing learning • Theme 65.2: Personal ethics 	
Scope of learning required			
<p>You will require a high level of expertise in diagnosis and differential diagnosis. Recognising, of course, that the knowledge and skills required for this will be refined throughout a whole professional lifetime.</p> <p>For examination purposes in Stage A, you will not need to incorporate considerations of <i>specific occupational disease</i> in the differential diagnosis.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE A: The basics
Learning Objective 11.1.4	Plan and arrange investigations appropriately	
Knowledge	Skills	
<ul style="list-style-type: none"> describe the principles of design of investigative pathways recognise the clinical indications and contraindications of investigations define the relative cost of investigations outline the risks of performing investigations describe the impact of false negatives and false positives on patient care describe the mode of action and types of structures revealed by plain x-ray, CT, MRI and ultrasound and the usual purposes for which these modes of imaging are employed describe commonly employed clinical chemistry tests and their purpose explain the purpose of microscopy and identify culture of a micro-organism in bodily fluid explain the purpose of serology and provide examples when this is useful recognise the limitations of laboratory investigations in terms of diagnosis define the meaning of sensitivity and specificity use disease prevalence (or pre-test odds) and likelihood ratio to determine the post-test odds of a disease define the meaning of true and false positives, true and false negative test results explain why a screening test for persons who are unlikely to have the condition being tested for will yield false positive test results. 	<ul style="list-style-type: none"> plan and arrange investigations rationally and efficiently based on findings from history and physical examination adapt approach to investigations taking into account patient factors and comorbidities choose an appropriate biological sample for testing interpret a report and link it to the clinical features of the patient apply numerical reasoning interpret a positive or negative predictive value weigh the costs and benefits of investigations in each clinical situation choose the most cost effective investigative path apply diagnostic reasoning to minimise the number of investigations used and minimise harm from false positives recognise situations where it is appropriate to not investigate at all avoid unnecessary repetition of investigations ascertain results of investigations routinely in a timely manner, and act on results appropriately modify working diagnosis and treatment plan in response to investigation results understand the limitations of investigations, in particular imaging, for the purpose of diagnosis. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> discussing cases with peers interaction with radiologists and pathologists textbooks, guidelines, CDs, and websites reflective application of basic medical knowledge x-ray lectures and examples – www.learningradiology.com 	<ul style="list-style-type: none"> Sub-domain 12: Medical expertise Learning objective 30.2.1: Understand and apply the process of diagnostic reasoning 	

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE A: The basics
Learning Objective 11.1.4	Plan and arrange investigations appropriately	
Scope of learning required		
<p>When tested at Stage A, you may be required to interpret a CT, MRI, or ultrasound image. You would be required to recognise large features on a plain x-ray, e.g. fracture, dislocation, pneumothorax, and cardiac enlargement. At an examination, you would be provided with the normal ranges of any chemical pathology or microbiological tests. You will not require a calculator for calculations of entities such as sensitivity, specificity, or likelihood ratio, although numbers or an algebraic equation may be offered for interpretation.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE B: Learning the ropes
Learning Objective 11.1.5	Take, record, and analyse an occupational and environmental history from an individual	
Knowledge		Skills
<ul style="list-style-type: none"> describe the clinical presentation and natural history of people with chronic disease related to work experiences describe what is involved in a quality of life assessment. 		<ul style="list-style-type: none"> take and record a complete chronological lifetime work history from any person capable of giving such a history clarify the nature of a job or process through appropriate questioning of the informant formulate questions that yield a great amount of relevant information estimate exposure to hazard from the occupational history explore whether co-workers were exposed as well relate the temporal relationship between symptoms and work, e.g. asthma explore alternative exposures in the patient's history, e.g. hobbies.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge textbook and journal reading authoritative websites presenting and discussing cases with colleagues. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan The other learning objectives in Theme 11.1 listed above Theme 61.1: Physician-patient communication

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE B: Learning the ropes
Learning Objective 11.1.5	Take, record, and analyse an occupational and environmental history from an individual	
		<ul style="list-style-type: none"> • Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work • Learning objective 90.3.1: Undertake the clinical appraisal and management of individuals exposed to environmental hazards arising from industry
Scope of learning required		
<p>Develop a high level of expertise required in history-taking recognising that the knowledge and skills required for this will be refined throughout a whole professional lifetime. For examination purposes, history-taking should be a purposeful and fluent approach to current symptoms, relevant past, family and social history, occupational history, medications, and lifestyle.</p> <p>Clearly demonstrate that you have perceived the important features of a patient's story and understood its import in terms of likely pathology and the effect on the patient's life. You should be able to summarise your findings and articulate what you would intend to do next.</p> <p>It is important to realise that diagnoses are a vehicle for making decisions. They have both medical and social purposes, e.g. for sourcing support groups or compensation.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE B: Learning the ropes
Learning Objective 11.1.6	Assess what has been gained from a clinical encounter, form an opinion, and decide the options of what to do next	
Knowledge		Skills
<ul style="list-style-type: none"> • describe the pathogenesis, clinical features, and prognosis of acute work-related disease and injury • describe the pathogenesis, clinical features, and prognosis of common chronic diseases and work-associated contributing factors to the progress of these diseases • list all generally recognised diseases of occupation, including poisoning, zoonoses, and pneumoconioses, and their differential diagnoses. 		<ul style="list-style-type: none"> • make a diagnosis and plan for effective management for a patient • demonstrate highly-developed investigative skills in musculoskeletal medicine, neurology, respiratory medicine, dermatology and clinical psychology • make a differential diagnosis in situations where symptoms are alleged to have an occupational or environmental cause.

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.1	Clinical Skills	STAGE B: Learning the ropes
Learning Objective 11.1.6	Assess what has been gained from a clinical encounter, form an opinion, and decide the options of what to do next	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge including pharmacodynamics and pharmacokinetics use of therapeutic guidelines textbook and journal reading perusing authoritative websites presenting and discussing cases with colleagues guiding trainees at Stages A and B. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan
Scope of learning required		
You should develop a high level of expertise here.		

THEME 11.2: PATIENT CARE AND THERAPEUTICS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
11.2.1 Manage general care in the unwell patient
11.2.2 Prescribe appropriate and safe pharmacotherapy
11.2.3 Incorporate health and wellness promotion in clinical practice
11.2.4 Manage patients with surgical problems
11.2.5 Facilitate ongoing care planning
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.1	Manage general care in the unwell patient	
Knowledge	Skills	
<ul style="list-style-type: none"> describe management of fluid and electrolyte balance, including: <ul style="list-style-type: none"> fluid and electrolyte requirements in well and unwell patients physiology of body fluids outline the principles of glycaemic control in acute illness, including: <ul style="list-style-type: none"> evidence base for tight glycaemic control risk factors for poor glycaemic control describe the basis of oxygen therapy, including: <ul style="list-style-type: none"> adverse effects of oxygen therapy indications for use of oxygen therapy and positive pressure ventilation in both acute and chronic setting (link to respiratory and emergency) methods of delivery of oxygen and ventilation outline the use of blood products, including: <ul style="list-style-type: none"> components of commonly available blood products indications, contraindications, and adverse effects of the use of blood products outline the principles of patient nutrition, including: <ul style="list-style-type: none"> effect of disease on nutrition status effect of nutritional status on clinical outcomes normal nutritional requirements describe the basis of pressure area prevention and management, including: <ul style="list-style-type: none"> factors contributing to increased risk of pressure areas strategies for prevention define strategies for preventing thromboembolism, including: <ul style="list-style-type: none"> indications for thromboprophylaxis (link to anticoagulation) risk factors for thromboembolism define strategies for preventing the spread of infection, including: <ul style="list-style-type: none"> hand washing universal precautions 	<ul style="list-style-type: none"> perform assessment of fluid and hydration status request appropriate investigations to aid in establishing fluid and electrolyte status review glycaemic control and manages fluctuations related to acute illness identify accepted parameters providing evidence for good glycaemic control select method of delivery and parameters, and monitors for effectiveness, complications of therapy perform assessment of nutritional status, including contribution of comorbidities, cultural and religious factors identify areas of highest risk of pressure area development, and the meaning of related physical signs of compromised skin vascularity and structural integrity comply with universal precautions, including PPE comply with hand washing guidelines (link with Learning objective 12.4.3) take a relevant pain history identify source (or potential sources) of pain use common pain scoring tools utilise non-drug approaches to pain management prescribe analgesia, with appropriate escalation of drug doses and types, having reference to cause, severity, comorbidities, and co-medications monitor efficacy of treatment and adjust regime appropriately prescribe adjuvant therapy where appropriate refer to pain team when appropriate identify psychosocial factors affecting presentation and outcomes in individual patients ensure strategies are in place to assist in managing social and cultural issues. 	

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics		STAGE A: The basics
Learning Objective 11.2.1	Manage general care in the unwell patient		
<ul style="list-style-type: none"> • outline the principles of pain management, including: <ul style="list-style-type: none"> • classes of commonly available analgesics with respect to mode of action, pharmacokinetics, potency, and efficacy in various pain syndromes • common adverse effects and drug interactions for drug class • measurement of pain • non-pharmacological approaches to management of pain • pathophysiology of pain (links to palliative care) • principles of acute and chronic pain management • principles of adjuvant therapy in pain management • World Health Organization (WHO) <i>pain ladder</i> on a scale of 1 to 10 (least to greatest) for assessing the source, quality, and intensity of pain and determining the most appropriate relief measures • outline the principles of psychosocial care, including: <ul style="list-style-type: none"> • psychosocial and cultural factors impacting on illness behaviour • risk factors for depression in a person with chronic illness. 			
Suggested ways to learn	Links to other parts of the curriculum		
<ul style="list-style-type: none"> • reflective application of basic medical knowledge • texts, journals and websites • presenting and discussing cases with peers. 	<ul style="list-style-type: none"> • Learning objective 12.3.6: Manage patients with mental health disorders • Learning objective 12.4.3: Manage adult patients with infectious diseases • Theme 67.1: Self-management 		
Scope of learning required			
<p>The RACP Basic Training Curriculum outlines more than 30 skills associated with this learning objective. With a view that basic training for occupational physicians will not necessarily be conducted in hospitals, examination at Stage A would assess only a small proportion of such skills. Accordingly, a much-reduced number of skills and somewhat reduced list of knowledge-items is referred to here.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.2	Prescribe appropriate and safe pharmacotherapy	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the structure of cell membranes and the major cell organelles describe the mechanism of drugs at the receptor and intracellular level outline the principles of absorption, distribution, metabolism, and excretion of drugs, including the first pass effect, body compartments, volume of distribution, clearance, half-life, enzyme function, and phase I and phase II metabolism describe the role of liver and kidney, and conditions that favour accumulation and reduce excretion describe the means of removal of insoluble inhaled foreign particles from the bronchial tree and the alveoli explain the effect of ageing, pregnancy, and lactation on pharmacokinetics describe the importance of genetic alterations in drug metabolism outline the pharmacological basis of drug interactions describe the impact of organ dysfunction on pharmacokinetics and dose modification 		<ul style="list-style-type: none"> apply principles of basic science in prescribing prescribe with reference to specific patient factors, including organ dysfunction, allergies, and adverse effects apply simple numerical reasoning to the kinetics of foreign substances calculate loading doses and maintenance doses calculate glomerular filtration rate and body surface area

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.2	Prescribe appropriate and safe pharmacotherapy	
<p>Principles of prescribing</p> <ul style="list-style-type: none"> recognise appropriate dose adjustments in disease, ageing, and pregnancy explain the categories of drug safety in pregnancy and impact on prescribing describe the legislation regarding prescribing controlled and restricted drugs describe the patient factors affecting prescribing, e.g. allergy, age, pregnancy outline the principles of dose titration 	<ul style="list-style-type: none"> take a complete drug history including history of use of complementary and recreational drug therapies and over-the-counter medicines outline the ways that the taking of a drug of a particular type may affect a particular patient's presentation question a patient regarding the clinical effects of medication consult pharmacist, Australian Medicines Handbook, and similar databases to obtain prescribing information use locally appropriate guidelines for prescribing: <ul style="list-style-type: none"> write a clear and unambiguous prescription provide accurate medication list on referral and other patient-related letters 	
<p>Adverse drug reactions and interactions</p> <ul style="list-style-type: none"> describe common and life threatening drug interactions and common presentations of drug-induced disease, adverse drug reactions discuss the common interactions between prescription and non-prescription and complementary therapies 	<ul style="list-style-type: none"> identify presence of, or potential for, adverse drug reaction and drug interactions, and treat appropriately monitor for development of common adverse drug reactions, including selection of appropriate laboratory investigations, e.g. monitoring of renal or hepatic function 	
<p>Therapeutic drug monitoring</p> <ul style="list-style-type: none"> define the indications for monitoring plasma concentrations or pharmacological effects of specific drugs 	<ul style="list-style-type: none"> practise regular medication review with appropriate adjustment of regimen, including identification and avoidance of polypharmacy 	
<p>Quality use of medicines</p> <ul style="list-style-type: none"> discuss the principles of adherence and compliance to prescribing standards describe delivery techniques for specific medicines identify factors increasing risk of medication error identify factors predisposing to polypharmacy (therapeutic cascade) and reasons for over-prescribing discuss techniques for enhancing medication safety 	<ul style="list-style-type: none"> cease medications where proven ineffective or no longer indicated engage patient in decision making, explaining drug therapy and monitoring and following up verbal with written information where appropriate assess patient uses of delivery devices use a range of strategies to enhance patient adherence 	

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.2	Prescribe appropriate and safe pharmacotherapy	
<p>Anticoagulant therapy</p> <ul style="list-style-type: none"> describe the actions and indications of anticoagulants both prophylactic and therapeutic describe drug interactions, adverse effects, pharmacokinetics, and monitoring of anticoagulation 		
<ul style="list-style-type: none"> initiate anticoagulation with appropriate agent at appropriate dose taking patient factors into consideration (age, comorbid conditions) adjust therapy to achieve target ranges and monitor therapy appropriately 		
<p>Corticosteroid therapy</p> <ul style="list-style-type: none"> describe the actions and indications of corticosteroids evaluate relative potencies discuss the strategies for monitoring for and preventing adverse effects 		
<ul style="list-style-type: none"> use steroids judiciously recognise when steroids are not appropriate manage dose reduction minimise and manage adverse effects if steroid use is unavoidable 		
<p>Antimicrobial therapy</p> <ul style="list-style-type: none"> describe the mode of action, antimicrobial spectrum, adverse effects, interactions, and pharmacokinetics of common classes of antimicrobials outline the basis of antimicrobial resistance, and strategies for prevention 		
<ul style="list-style-type: none"> initiate empirical antimicrobial therapy with appropriate agent at appropriate dose, taking patient factors into consideration (age, comorbid conditions) apply the principles of antibiotic stewardship in resistance prevention 		
<p>Psychotropic medication</p> <ul style="list-style-type: none"> links to addiction (Mental health – Learning objective 12.3.6) describe the mode of action, adverse effects, interactions and pharmacokinetics of antipsychotics, benzodiazepines, and antidepressants describe the common purposes of prescribing the following types of drugs: <ul style="list-style-type: none"> ACE inhibitors alkylating agents antibiotics antihistamines beta blockers bronchodilators buprenorphine calcium channel blockers diuretics 		
<ul style="list-style-type: none"> use psychotropic medications judiciously, carefully monitoring for side effects use non-pharmacological approaches initially, where possible. 		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.2	Prescribe appropriate and safe pharmacotherapy	
<ul style="list-style-type: none"> • emollient skin preparations • fibrinolytic agents • ferrous sulphate • folate • hypoglycaemic agents • insulin • local anaesthetics • methadone • mydriatics • naltrexone • nicotine gum/patches • nitrates • neuromuscular blocking agents • NSAIDs • ocular lubricants • oral contraceptive agents • sedatives • statins • topical antifungals • topical corticosteroids • various vitamins. 		
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • prescribing guides, Australian Medicines Handbook and texts • presenting and discussing cases with peers. 	<ul style="list-style-type: none"> • Learning objective 11.2.1: Manage general care in the unwell patient • Learning objective 12.1.2: Manage acute medical problems (poisoning) • Learning objective 12.3.6: Manage patients with mental health disorder • Sub-domain 62: Quality and safety 	
Scope of learning required		
<p>Basic training for occupational physicians is not necessarily conducted in hospitals. However, it is a common occurrence in workplaces to have workers on long-term medication. Therefore, you are expected to have a solid grounding in pharmacology and therapeutics and you will be assessed on it.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.3	Incorporate health and wellness promotion in clinical practice	
Knowledge		Skills
<p>Healthy lifestyle</p> <ul style="list-style-type: none"> outline the principles of healthy diet across all age ranges, including adolescence, pregnancy, lactation, and old age discuss the causes of obesity in adolescence and adults and its impact on health define strategies to attain a healthy weight discuss the principles of physical activity in disease prevention, maintenance of healthy weight in all age groups, and prevention of frailty in old age describe the health benefits of smoking cessation identify techniques of proven value in smoking cessation discuss issues surrounding alcohol intake in both sexes and all age groups, including pregnant women recognise the importance of preventive strategies for psychosocial wellbeing outline safe sexual practices recognise the cycle of readiness for change 		<ul style="list-style-type: none"> assess risk factors during clinical encounters - drug, alcohol, sexual, smoking history provide specific advice regarding modification of risk factors communicate importance of lifestyle measures to patients and refer appropriately for assistance identify reasons for obesity in an individual and develop strategies to manage weight use available written literature, diet, and exercise prescriptions to assist in patient education and compliance reinforce principles and monitor compliance at subsequent visits use brief interventions for substance use at a level that may place patients at risk, including alcohol use and tobacco use, at every opportunity
<p>Screening</p> <ul style="list-style-type: none"> define current screening guidelines for common diseases 		<ul style="list-style-type: none"> promote patient participation in screening programs advise patients on relevant benefits and potential harms of screening
<p>Immunisation</p> <ul style="list-style-type: none"> define current schedule and indications for immunisation in adults 		<ul style="list-style-type: none"> prescribe preventive therapy, including immunisation according to established guidelines advise patients on relevant benefits and harms of immunisation
<p>Self-management</p> <ul style="list-style-type: none"> identify techniques for encouraging self-management of health and chronic disease discuss best practice self-monitoring in established chronic disease, e.g. diabetes, hypertension, respiratory disease. 		<ul style="list-style-type: none"> educate and reinforce patient skills in monitoring and self-management develop management/action plan in concert with patient and other involved health care workers.

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.3	Incorporate health and wellness promotion in clinical practice	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge guidelines produced by government and various community groups, e.g. Heart Foundation, Cancer Council presenting to and discussing with peers interaction with workers, unions, employers and insurers American Thoracic Society www.thoracic.org 		<ul style="list-style-type: none"> Theme 12.3: Management of patients with disorders of an organ system Learning objective 12.3.5: Manage patients with immune system disorders Sub-domain 62: Quality and safety Sub-domain 69: The broader context of health
Scope of learning required		
Assessment at Stage A would typically present a scenario where preventive action would be appropriate. The question would ask, for example, about what programs could be applied in this situation and the expected outcomes.		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.4	Manage patients with surgical problems	
Knowledge		Skills
<ul style="list-style-type: none"> outline pre-operative assessment of cardiovascular and respiratory risk discuss proven strategies for minimising peri-operative risk, e.g. DVT prophylaxis, beta blockers, smoking cessation. 		<ul style="list-style-type: none"> recognise a surgical condition, provide initial resuscitation and baseline investigations, and refer appropriately.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge presenting and discussing cases with peers. 		<ul style="list-style-type: none"> Learning objective 11.2.1: Manage general care in the unwell patient
Scope of learning required		
The RACP Basic Training Curriculum outlines a greater range of knowledge and skills for the peri-operative period than would be assessed in this program.		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.2	Patient Care and Therapeutics	STAGE A: The basics
Learning Objective 11.2.5	Facilitate ongoing care planning	
Knowledge		Skills
<p>Facilitate functional rehabilitation</p> <ul style="list-style-type: none"> • discuss general principles of rehabilitation for neurological disease, including stroke, musculoskeletal disease, cardiopulmonary disease, and functional restoration • identify factors affecting rehabilitative potential • discuss strategies for managing pain • identify the roles of health professionals involved in rehabilitation 		<ul style="list-style-type: none"> • work with other health professionals to facilitate goal setting and formulate care plans • mobilise patients early and promote the early return of usual functioning
<p>Facilitate ongoing care</p> <ul style="list-style-type: none"> • identify and appraise local community resources, educational support groups and systems within the hospital 		<ul style="list-style-type: none"> • refer patients appropriately • organise and plan post discharge care and follow-up
<p>Management of the patient with a complex, multisystem disorder</p> <ul style="list-style-type: none"> • discuss evidence-based coordination of care and disease monitoring • discuss the psychological impact of chronic condition. 		<ul style="list-style-type: none"> • provide specific instructions regarding disease monitoring • simplify ongoing care where possible • refer appropriately to other subspecialty, allied health, and community-based services.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • reflective application of basic medical knowledge • interaction with other health professionals concerned with rehabilitation • interaction with employers and insurers • presenting and discussing cases with peers. 		<ul style="list-style-type: none"> • Learning objective 11.1.1: Elicit the history and obtain other relevant data • Theme 80.1: Assessment of fitness for work
Scope of learning required		
<p>The RACP Basic Training Curriculum refers most expressly to hospital-based care. Assessment at Stage A would refer particularly to the planning of discharge of a patient from hospital care, the role of other health professionals, and follow-up. Return to work will be visited in Domain 80 in Stages B and C.</p>		

THEME 11.3: PROCEDURAL SKILLS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
11.3.1 Prepare patient for procedure
11.3.2 Perform emergency and routine procedures
11.3.3 Provide care following procedure
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.3	Procedural Skills	STAGE A: The basics
Learning Objective 11.3.1	Prepare patient for procedure	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss the indications, contraindications and potential complications related to procedure outline the principles of informed consent and documentation of consent discuss the indications, contraindications, side effects of anaesthesia and sedation identify appropriate instruments and environment, including infection control measures and staffing requirements, necessary for procedure. 	<ul style="list-style-type: none"> explain procedure to patient and obtain informed consent record key points of the interaction prepare the patient, caregivers, staff, and environment for procedure administer local anaesthetic, analgesia, and sedation where required. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> practise under guidance texts and apt websites - inserting 'informed consent' and 'Australia' into search engine provides good sites, including reference to Rogers and Whittaker case. 	<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication (informed consent) 	
Scope of learning required		
<p>The RACP Basic Training Curriculum lists eight procedures for assessment. Examination at Stage A in the AFOEM Curriculum will focus on just two of these – emergency DC cardioversion and nasal support ventilation (CPAP, BiPAP). However, the knowledge and skills required to prepare a patient for any procedure may indeed be tested.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.3	Procedural Skills	STAGE A: The basics
Learning Objective 11.3.2	Perform emergency and routine procedures	
Knowledge		Skills
<ul style="list-style-type: none"> define the following principles of emergency DC cardioversion: <ul style="list-style-type: none"> defibrillator function necessity of synchronised shock starting voltage number of shocks required define the following principles of non-invasive ventilation: <ul style="list-style-type: none"> continuous positive airway pressure (CPAP) and bi-level positive airway pressure (BiPAP) monitoring and adjustment. 		<ul style="list-style-type: none"> use automatic defibrillator use manual defibrillator perform as a team member and as a leader of a team fit ventilation masks prescribe correct pressure.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> practise under guidance texts and apt websites. 		<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication (informed consent)
Scope of learning required		
<p>Emergency DC cardioversion should be performed both in a simulated and a real setting.</p> <p>The RACP Basic Training Curriculum specifies the need for trainees to perform the following procedures in addition to DC cardioversion and non-invasive ventilation: pressure measurement and care of central venous lines; pleural and ascitic fluid aspiration; intercostal drain insertion and management; knee joint aspiration; lumbar puncture; tracheotomy care and immediate management of complication. Examination at Stage A of the AFOEM Curriculum will not assess the ability to perform these procedures.</p> <p>By the end of their second post-graduate year, i.e. prior to entry to specialist training, you should be competent to perform the following procedures relevant to general medicine. If not, appropriate remedial action must be undertaken:</p> <ul style="list-style-type: none"> airway assessment and management, including jaw thrust, chin lift, and insertion of an oral airway application of oxygen administration devices arterial blood sampling bag and mask ventilation of unintubated patients blood cultures from peripheral and central sites blood glucose determination using capillary blood cervical smear and swabs dipstick urinalysis ECG recording injection - subcutaneous, intradermal, intramuscular, and intravenous 		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.3	Procedural Skills	STAGE A: The basics
Learning Objective 11.3.2	Perform emergency and routine procedures	
<ul style="list-style-type: none"> • intubations in straightforward situations • minor suturing and debridement of wounds • setting up a complete drip set and burette • spirometry and peak expiratory flow rate determination • throat/pus/wound swabs • urethral catheterisation - male • venepuncture and cannulation. 		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 11: Clinical Process
Theme 11.3	Procedural Skills	STAGE A: The basics
Learning Objective 11.3.3	Provide care following procedure	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss potential complications of intended procedure. 		<ul style="list-style-type: none"> • document the procedure and provide clear instructions related to observations and management required.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • standard emergency medicine guidelines. 		<ul style="list-style-type: none"> • Theme 61.3: Communication with colleagues and the broader health care team
Scope of learning required		
Although in Stage A you will be assessed on just two procedures, you should understand and be able to apply the principles of care of a patient following any procedure.		

Sub-domain 12: Medical expertise

The themes in Sub-domain 12 are:

- 12.1: Management of acute medical problems
- 12.2: Management of patients with undifferentiated problems
- 12.3: Management of patients with disorders of an organ system
- 12.4: Management of patients with defined disease processes
- 12.5: Medicine through the lifespan - growth and development
- 12.6: Diseases affected by occupation and environment and their consequences

THEME 12.1: MANAGEMENT OF ACUTE MEDICAL PROBLEMS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
12.1.1 Recognise and manage the critically ill patient
12.1.2 Manage acute specific medical problems
12.1.3 Communicate with patients and their families/carers in an emergency situation
Advanced Stage B: Learning the Ropes
12.1.4 Manage life-threatening conditions that affect or are affected by occupation or environment and be able to apply supportive care that is appropriate to the circumstances
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems	STAGE A: The basics
Learning Objective 12.1.1	Recognise and manage the critically ill patient	
Knowledge	Skills	
<ul style="list-style-type: none"> • describe signs and symptoms of impending cardiorespiratory arrest • identify trends of gradual deterioration in a patient's condition • identify clinical features of serious illness • discuss causes of acute airway obstruction, respiratory failure, shock, and coma 	<ul style="list-style-type: none"> • recognise deteriorating and emergency situations and the critically ill adult • determine rapidly the clinical context and sequence of events leading to the emergency • conduct a rapid focussed clinical examination of the seriously ill patient • establish a provisional diagnosis and order appropriate initial investigations 	

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems		STAGE A: The basics
Learning Objective 12.1.1	Recognise and manage the critically ill patient		
<ul style="list-style-type: none"> outline the principles of oxygen delivery and assisted ventilation outline the principles of fluid resuscitation outline the principles of inotropic support outline the principles and practice of defibrillation recognise local emergency codes recall location and contents of resuscitation trolleys and their contents outline the principles of teamwork and leadership in an acute emergency recognise local indications and contraindications for intensive care discuss basic life support discuss advanced life support. 	<ul style="list-style-type: none"> initiate emergency management, including summoning help, teamwork, team leadership, and urgent referral to other services adapt resuscitation to take account of the environment, e.g. abating other danger or clearing clutter use a range of strategies to advocate for the patient in situations where other services may appear slow to respond to the urgency of the situation discuss the situation with more senior medical adviser at earliest appropriate opportunity and recognise if transportation or retrieval to another facility is required monitor patient's condition appropriately and recognise and act on complications anticipate the possibility of rapid deterioration in patients and reflect indicators and actions to be taken in the management plan develop care plans for patients in whom resuscitation or emergency escalation of care is not indicated and document these plans in the notes, and verbally, to relevant healthcare staff perform cardiopulmonary resuscitation and basic life support according to the guidelines of the International Liaison Committee on Resuscitation (ILCOR). 		
Suggested ways to learn	Links to other parts of the curriculum		
<ul style="list-style-type: none"> personal guidance in simulated and real situations course in resuscitation texts and websites presenting and discussing cases with peers short courses run by the College of Surgeons for emergency management of cardiac problems and severe trauma www.racs.edu.au training positions in occupational medicine will vary greatly in their ability to assist learning in this area. Probably, most trainees will need to supplement what they learn on the job with practical short course workshops. 	<ul style="list-style-type: none"> Theme 11.3: Procedural skills Learning objective 12.3.1: Manage patients with disorders of the cardiovascular system Learning objective 12.3.10: Manage patients with disorders of the respiratory and sleep system Learning objective 12.4.3: Manage adult patients with infectious diseases Learning objective 67.2.1: Demonstrate ability to provide leadership and effectively manage others 		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems	STAGE A: The basics
Learning Objective 12.1.1	Recognise and manage the critically ill patient	
Scope of learning required		
The typical scenario presented in examination at Stage A would be a simulated resuscitation or a question about stabilising an injured or ill patient in a remote location prior to their evacuation to a major treating facility.		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems	STAGE A: The basics
Learning Objective 12.1.2	Manage acute specific medical problems	
Knowledge		Skills
<ul style="list-style-type: none"> describe the clinical presentation, differential diagnosis, underlying pathophysiology, initial investigations, initial management, and likely complications of the following emergencies or potential emergencies: <ul style="list-style-type: none"> acute abdomen acute agitation or delirium acute chest pain acute difficulty swallowing acute hearing loss acute visual loss acute paraplegia /weakness/ rigidity aggression alcoholic ketoacidosis arrhythmia ascending motor-sensory level compound fracture collapse diabetic ketoacidosis hypoglycaemia hypotension, shock –hypovolaemic, septic, cardiogenic, neurogenic, anaphylactic hypoxia, respiratory failure impaired consciousness meningitis painful red eye seizures severe acid-base and electrolyte disturbances severe headache severe head injury single, hot, swollen joint stridor/airway obstruction/ asphyxiation suicidal behaviour 		<ul style="list-style-type: none"> recognise an emergency determine rapidly the clinical context and sequence of events leading to the emergency conduct focussed clinical examination assess suicidality establish a provisional diagnosis, plan and arrange appropriate initial investigations and determine severity of organ dysfunction(s) initiate emergency management, including summoning help and urgent referral to other services monitor patient’s condition appropriately and recognise and act on complications

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems		STAGE A: The basics
Learning Objective 12.1.2	Manage acute specific medical problems		
<ul style="list-style-type: none"> extensive skin blistering or burns hyperthermia and hypothermia 	<ul style="list-style-type: none"> unstable spinal injury thyroid, adrenal and pituitary crisis. 		
<ul style="list-style-type: none"> describe the related pharmacology, clinical presentation and initial acute management of the following common and serious poisonings and overdoses: <ul style="list-style-type: none"> amphetamines anticholinesterases antidepressants antipsychotic drugs benzodiazepines digoxin carbon monoxide 	<ul style="list-style-type: none"> ethanol iron opioid drugs paracetamol venom (Australia e.g. snakes, spiders, jellyfish, wasps). 	<ul style="list-style-type: none"> identify signs and symptoms of common poisonings and toxic syndromes assess and monitor for other serious consequences of poisoning initiate emergency management, including the administration of specific antidotes seek specialist and intensive care advice in a timely manner use information databases and the poisons centre 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> reflective application of basic medical knowledge texts, websites and journals presenting and discussing cases with peers. 		<ul style="list-style-type: none"> Theme 12.2: Management of patients with undifferentiated presentations Theme 12.3: Management of patients with disorders of an organ system Theme 12.4: Management of patients with defined disease processes 	
Scope of learning required			
<p>The RACP Basic Training Curriculum also requires knowledge of the pharmacology and clinical presentation of anticholinergic syndromes, serotonergic syndrome, neuroleptic malignant syndrome. These will not be tested in examination at Stage A in the AFOEM Curriculum.</p> <p>Issues particular to occupational substance exposure will be developed more fully in Stage B. When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. Knowledge of the metabolism and toxicokinetics of the following substances would be tested in Stage B of the AFOEM Curriculum: lead dust, mercury vapour, cadmium dust, asbestos dust, benzene, toluene, and hydrogen fluoride.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems	STAGE A: The basics
Learning Objective 12.1.3	Communicate with patients and their families/carers in an emergency situation	
Knowledge		Skills
<ul style="list-style-type: none"> define the communication skills required during emergency situations recognise the importance of communication with patient's family describe the ethical dimensions of the workplace recognise patient competence and what this means for gaining informed consent discuss issues of cultural competence regarding emergency situations. 		<ul style="list-style-type: none"> convey to families the progress to date, likely cause for situation, immediate therapeutic goals, expected outcome and any limits on escalation of care discuss with families the current situation within the broader context of the trajectory of patient illness and quality of life, including areas of uncertainty and place of ongoing resuscitation indicate when medical staff will review the situation and/or meet with family again.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> observing others who do this well clinical practice guidelines Australian Government Privacy Act www.privacy.gov.au 		<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication Theme 61.2: Communication with a third party, including the patient's employer or their family and/or carers Theme 64.1: Cultural competency Theme 65.1: Professional ethics Theme 65.3: Ethics and health law
Scope of learning required		
<p>This learning objective comes from the RACP Basic Training Curriculum. Its wording applies most closely to hospital practice, but the tenor or spirit of this may be applied to any medical practice given appropriate regard to privacy. The demonstration of communication skills will receive marks in any examination of a practical type.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.1	Management of Acute Medical Problems	STAGE B: Learning the ropes
Learning Objective 12.1.4	Manage life-threatening conditions that affect or are affected by occupation or environment and be able to apply supportive care that is appropriate to the circumstances	
Knowledge		Skills
<ul style="list-style-type: none"> recognise the prime importance of the safety of medical attendees define procedures and protocols for the clinical management of individuals involved in hazardous substances incidents define procedures and protocols for the clinical management of individuals with burns or electrocution define procedures and protocols for the clinical management of individuals experiencing major trauma discuss the availability of transport from remote areas. 		<ul style="list-style-type: none"> recognise a situation that is immediately threatening to life perform standard cardiopulmonary resuscitation recognise and treat shock insert an intravenous cannula use a defibrillator dress a wound to stop haemorrhage splint a limb fracture recognise and treat anaphylaxis or severe bronchospasm.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by experts in emergency medicine peer discussion about successful (or otherwise) approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge teamwork simulation. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 11.2.1: Manage general care in the unwell patient Learning objective 12.1.1: Recognise and manage the critically ill patient Learning objective 12.1.2: Manage acute specific medical problems Theme 61.1: Physician-patient communication
Scope of learning required		
<p>You should know how to stabilise a patient with physical trauma or sudden incapacity in a workplace before further definitive care is undertaken.</p>		

THEME 12.2: MANAGEMENT OF PATIENTS WITH UNDIFFERENTIATED PRESENTATIONS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
12.2.1 Manage patients with undifferentiated presentations
Advanced Stage B: Learning the Ropes
12.2.2 Manage patients with undifferentiated presentations allegedly related to occupation or environment
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.2	Management of Patients with Undifferentiated Presentations	STAGE A: The basics
Learning Objective 12.2.1	Manage patients with undifferentiated presentations	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss differential diagnosis, appropriate investigations and initial management for common, undifferentiated clinical presentations, including: <ul style="list-style-type: none"> acute and chronic confusional states chronic fatigue/lethargy constellation of unusual symptoms deformity/swelling dyspnoea fever/PUO/night sweats functional decline haemoptysis headache haematuria oedema pain presentation recurrent syncope/collapse/loss of consciousness unexplained weakness weight loss vomiting. 	<ul style="list-style-type: none"> establish a differential diagnosis and a provisional diagnosis, based on clinical history and physical examination initiate basic investigations interpret investigations to plan a further diagnostic process initiate management on the basis of clinical findings identify acutely unwell patients and initiate appropriate resuscitation and/or therapy initiate symptomatic management of problems such as pain, nausea, dyspnoea discuss with supervisors and patient when to stop investigations recognise the potential contribution of psychological factors, mental illness or personality disorder to clinical presentations. 	

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.2	Management of Patients with Undifferentiated Presentations	STAGE A: The basics
Learning Objective 12.2.1	Manage patients with undifferentiated presentations	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge texts, websites, and journals presenting and discussing cases with peers. 		<ul style="list-style-type: none"> Theme 11.3: Procedural skills Theme 12.2: Management of patients with undifferentiated presentations Theme 12.4: Management of patients with defined disease processes Theme 30.2: Clinical decision making
Scope of learning required		
At Stage A, examination of this learning objective would be related to general medicine. Stage B will deal with undifferentiated presentations which have suggested relationship to occupation or environment.		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.2	Management of Patients with Undifferentiated Presentations	STAGE B: Learning the ropes
Learning Objective 12.2.2	Manage patients with undifferentiated presentations allegedly related to occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> discuss differential diagnosis, appropriate investigations, and initial management for undifferentiated clinical presentations, including: <ul style="list-style-type: none"> building-related illness chemical sensitivity/environmental illness chronic fatigue chronic pain syndromes war-related illness. 		<ul style="list-style-type: none"> establish a differential diagnosis and a provisional diagnosis, based on clinical history and physical examination initiate investigations interpret investigations to plan a further diagnostic process initiate management on the basis of clinical findings engage in discussion with supervisors and patient regarding when to stop investigations recognise the potential contribution of psychological factors, mental illness, or personality disorder to clinical presentations.

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.2	Management of Patients with Undifferentiated Presentations	STAGE B: Learning the ropes
Learning Objective 12.2.2	Manage patients with undifferentiated presentations allegedly related to occupation or environment	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> peer discussion about successful (or otherwise) approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 11.1.4: Plan and arrange investigations appropriately Learning objective 12.2.1: Manage patients with undifferentiated presentations Learning objective 61.1.1: Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news
Scope of learning required		
For examination in Stage B, develop an approach to investigation and initial care of patients with ill-defined or diffuse conditions. This includes careful assessment of the effect of the illness on the patient's lifestyle and the influence of other care-givers.		

THEME 12.3: MANAGEMENT OF PATIENTS WITH DISORDERS OF AN ORGAN SYSTEM

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
12.3.1 Manage patients with disorders of the cardiovascular system
12.3.2 Manage patients with endocrine and metabolic disorders
12.3.3 Manage patients with disorders of the gastrointestinal system
12.3.4 Manage patients with non-malignant disorders of the haematological system
12.3.5 Manage patients with disorders of the immune system
12.3.6 Manage patients with mental health disorders
12.3.7 Manage patients with disorders of the musculoskeletal system
12.3.8 Manage patients with disorders of the neurological system
12.3.9 Manage patients with disorders of the renal and genitourinary systems
12.3.10 Manage patients with disorders of the respiratory and sleep system
12.3.11 Manage patients with skin disorders
12.3.12 Manage patients with common eye conditions
12.3.13 Manage patients with common ear conditions
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.1	Manage patients with disorders of the cardiovascular system	
Knowledge		Skills
Basic sciences <ul style="list-style-type: none"> define the principles of cardiovascular structure and function, including: <ul style="list-style-type: none"> cardiac cycle cardiac output conduction 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret complex electrocardiograms and chest radiographs

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise	
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics	
Learning Objective 12.3.1	Manage patients with disorders of the cardiovascular system		
<ul style="list-style-type: none"> • define the principles of blood pressure homeostasis, including: <ul style="list-style-type: none"> • circulatory control (e.g. splanchnic, macro- and microvascular, pulmonary, cerebral) • circulatory responses to exercise and effects of conditioning • circulatory responses to shock • define the pathology of atherosclerosis • identify laboratory markers of cardiac disease • describe the pharmacology of major drug classes used • identify the anatomy of the aorta and its branches • locate the position of the arterial pulses of the neck and limbs • describe the Valsalva manoeuvre • discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications of the disease and its management, and preventive strategies for the following common and important conditions: <table border="0" style="width: 100%; margin-left: 20px;"> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • acute coronary syndromes • arrhythmias • chronic coronary artery disease • DVT/PE </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • endocarditis • heart failure • hypertension • peripheral vascular disease • stroke </td> </tr> </table> 	<ul style="list-style-type: none"> • acute coronary syndromes • arrhythmias • chronic coronary artery disease • DVT/PE 	<ul style="list-style-type: none"> • endocarditis • heart failure • hypertension • peripheral vascular disease • stroke 	<ul style="list-style-type: none"> • apply basic science knowledge to appreciate the significance of and appropriately act on reports of echocardiograms, stress tests, myocardial perfusion scans, angiograms, duplex ultrasound scans, ankle-brachial index, arterial dopplers • recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate medical (non procedural) management for these conditions • recognise complications or when procedural intervention is required and provide initial emergency management, referring appropriately
<ul style="list-style-type: none"> • acute coronary syndromes • arrhythmias • chronic coronary artery disease • DVT/PE 	<ul style="list-style-type: none"> • endocarditis • heart failure • hypertension • peripheral vascular disease • stroke 		
<ul style="list-style-type: none"> • describe the clinical presentation, potential complications, and indications for referral for the following: <ul style="list-style-type: none"> • cardiovascular manifestations of systemic disease (e.g. diabetes, thyroid, renal) • evaluating fitness for physical activity following a major cardiac event • pericardial disease • valvular heart disease. 	<ul style="list-style-type: none"> • recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate investigations, initiate symptomatic therapy, discuss broad therapeutic options and refer appropriately for these conditions. 		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.1	Manage patients with disorders of the cardiovascular system	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • clinical experience and reflective analysis • bedside teaching • reading journals and textbooks • structured observation and feedback of practice • supervisor discussions • lectures • workshops, presentations • e-learning • group discussion • Austroads: <i>Assessing fitness to drive</i> • understanding CV risk calculator • understanding risk factors and current thinking: National Heart Foundation of Australia www.heartfoundation.org.au 		<ul style="list-style-type: none"> • Theme 11.1: Clinical skills • Learning objective 11.1.4: Plan and arrange investigations appropriately • Theme 11.2: Patient care and therapeutics • Learning objective 12.3.5: Manage patients with disorders of the immune system • Learning objective 12.3.8: Manage patients with disorders of the neurological system • Learning objective 12.4.3: Manage adult patients with infectious diseases • Theme 30.2: Clinical decision making
Scope of learning required		
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.2	Manage patients with endocrine and metabolic disorders	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> define the location and structure of the endocrine glands define the structure and function of hormones, hormone receptors, second messengers and hormone action outline the principles of normal growth, development, reproduction, and ageing define the structure and function of hypothalamus, pituitary, thyroid, adrenals, gonads, parathyroids, islets, and adipose tissue describe secretion, transport, and feedback control of hormones describe carbohydrate and lipid metabolism outline the principles of metabolism in relation to nutrition, obesity, and starvation discuss autoimmunity and genetics as it relates to hormone disease discuss pharmacology of major drug classes used 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs conduct an anthropometric assessment (body mass index [BMI], waist to hip ratio [WHR], skinfold thickness over the triceps muscle) apply basic science knowledge to interpret basic endocrine testing (diagnosis of diabetes, thyroid function testing, cortisol, synacthen tests) and tests of bone and mineral metabolism (calcium, phosphate, parathyroid hormone, vitamin D) apply basic science knowledge to appreciate the significance of and appropriately act on reports of thyroid scans and bone densitometry, and endocrine tissue biopsy, specialised imaging
<ul style="list-style-type: none"> describe the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications of the disease and its management, and primary and secondary preventive strategies for the following common and important conditions: <ul style="list-style-type: none"> diabetes mellitus – types I and II obesity osteoporosis thyroid disease 		<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, order investigations, and independently initiate appropriate management for uncomplicated disease for these conditions monitor for complications recognise complications and refer appropriately

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System		STAGE A: The basics
Learning Objective 12.3.2	Manage patients with endocrine and metabolic disorders		
<ul style="list-style-type: none"> describe the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> benign prostatic disease hyperthyroidism hypothyroidism endocrine and metabolic manifestations of systemic disease endocrine causes of hypertension. 		<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites and journals presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions lectures workshops Austroroads: <i>Assessing fitness to drive.</i> 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Theme 12.1: Management of acute medical problems Learning objective 12.3.1: Manage patients with disorders of the cardiovascular system (high blood pressure) Learning objective 12.3.7: Manage patients with disorders of the musculoskeletal system (osteoporosis) Learning objective 12.3.9: Manage patients with disorders of the renal and genitourinary systems Theme 30.2: Clinical decision making Theme 61.1: Physician-patient communication (lifestyle modification) 	
Scope of learning required			
<p>At Stage A, you would not be examined on the management, complications, and therapeutic options for Addison's disease, Cushing's syndrome, hypogonadism, polycystic ovarian syndrome, or vitamin D deficiency. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.3	Manage patients with disorders of the gastrointestinal system	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the structure and function of the gastrointestinal system describe the functions of the different parts of the alimentary canal and how these assist digestion and absorption describe the anatomy of the oral cavity, teeth, and tongue identify the location and function of the salivary glands discuss the principles of bowel motility describe hormonal and enzymatic control of the alimentary tract, including control of acid and pancreatic secretion identify laboratory markers of hepatic and pancreatic function and malabsorption describe bilirubin metabolism describe alcohol metabolism (see also addiction medicine/toxicology) describe macro- and micronutrient absorption outline lipid metabolism outline the principles of nutrition and fluid balance (link to patient care and therapeutics) discuss pharmacology of major drug classes used 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret clinical signs, abdominal x-ray, abdominal CT scan, and laboratory tests (including liver function tests, liver screen, viral serology, coeliac serology, helicobacter testing, malabsorption tests, faecal microscopy, and culture and toxin testing) apply basic science knowledge to appreciate the significance of and appropriately act on reports of abdominal ultrasound, upper and lower endoscopy, endoscopic retrograde cholangiopancreatography (ERCP), magnetic resonance cholangiopancreatography (MRCP), and magnetic resonance angiography (MRA)
<ul style="list-style-type: none"> discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications of the disease and its management, preventive strategies for the following common and important conditions: <ul style="list-style-type: none"> acute and chronic liver disease gastrointestinal bleeding gastro-oesophageal reflux disease peptic ulcer disease obesity 		<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, order appropriate investigations, and independently initiate appropriate medical (non procedural) management for uncomplicated disease for these conditions recognise complications and when procedural intervention is required, and provide initial emergency management, referring appropriately

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System		STAGE A: The basics
Learning Objective 12.3.3	Manage patients with disorders of the gastrointestinal system		
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications, therapeutic options and indications for referral for the following conditions: <ul style="list-style-type: none"> acute appendicitis inguinal hernia biliary obstruction gallstones acute pancreatitis inflammatory bowel disease irritable bowel syndrome gastrointestinal malignancy gastrointestinal manifestations of systemic disease (e.g. diabetes, cystic fibrosis). 		<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites and journals presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions lectures workshops National Bowel Cancer Screening Program www.cancerscreening.gov.au 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Theme 12.1: Management of acute medical problems Learning objective 12.3.5: Manage patients with disorders of the immune system Learning objective 12.4.1: Manage patients with neoplastic diseases Theme 30.2: Clinical decision making 	
Scope of learning required			
<p>At Stage A, you would not be examined on coeliac disease, malabsorption, or oesophageal motility disorders. For an occupational physician, the prime issue with gastrointestinal issues is that they are often chronic and variably affect a person's fitness for work. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.4	Manage patients with non-malignant disorders of the haematological system	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe structure and function of blood-forming tissues, reticuloendothelial system, and blood components describe haemoglobin structure and function describe the role and process of coagulation describe the process of haemopoiesis describe iron, B12, and folate metabolism outline the principles of transfusion and bone marrow transplantation describe the pharmacology of major haematinics and erythropoietin describe the cause and process of haemolysis 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret clinical signs, full blood count and film, coagulation profile, and thrombophilia screens apply basic science knowledge to appreciate the significance of and appropriately act on reports of bone marrow aspirate and trephine and cytogenetics
<ul style="list-style-type: none"> define the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, and preventive strategies for anaemia. 		<ul style="list-style-type: none"> recognise the presentation of anaemia, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate management for uncomplicated disease monitor for complications, recognise them if they arise and refer appropriately recognise, perform initial investigations, and appropriately refer patients with lymphadenopathy, haemolysis and cytopenias, including manifestations of systemic disease.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions. 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics (including blood transfusion) Learning objective 12.5.5: Manage patients at the end of life Theme 30.2: Clinical decision making

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.4	Manage patients with non-malignant disorders of the haematological system	
Scope of learning required		
<p>In Stage A you would not be examined on the genetics of thalassaemia, nor the detailed investigation and therapy of bleeding disorders, thrombophilias, cytopenias, myelodysplasias or myeloproliferative disease. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.5	Manage patients with disorders of the immune system	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> • discuss the nature of acute and chronic inflammation • characterise normal healing and repair • describe the structure and function of spleen, lymph nodes, and other lymphoid tissue • define the barriers to infection • describe innate and adaptive immune responses • describe the action of immunosuppressive agents • characterise normal allergic responses • discuss the principles of autoimmunity • define the principles of immunisation • outline the causes and investigation of fatigue • describe transplant biology including human leucocyte antigen • discuss pharmacology of major drug classes used 		<ul style="list-style-type: none"> • conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs • apply basic science knowledge to interpret clinical signs, laboratory investigations (full blood count, assays of HIV serology/viral load, immunoglobulins, protein electrophoresis, inflammatory markers, rheumatoid factor, C-reactive protein, antinuclear antibody, anti-neutrophil cytoplasmic antibodies, complement profiles) • apply basic science knowledge to appreciate the significance of and appropriately act on reports of tissue biopsies, specialised imaging • apply basic science knowledge to use of: <ul style="list-style-type: none"> • anaphylaxis management plans • blood products • immunisation and at risk groups • steroids

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System		STAGE A: The basics
Learning Objective 12.3.5	Manage patients with disorders of the immune system		
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> acquired immunodeficiency syndromes - HIV, immunosuppressive drugs, post-transplantation allergic disorders - anaphylaxis, food allergy, adverse drug reactions, allergic rhinitis/sinusitis/conjunctivitis, atopic dermatitis, urticaria immunological manifestations of systemic disease. 	<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions ASHM Australian Society of HIV Medicine Guidelines: good manuals to download www.ashm.org.au 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Learning objective 12.1.1: Recognise and manage the critically ill patient Learning objective 12.3.11: Manage patients with skin disorders Learning objective 12.4.3: Manage adult patients with infectious diseases Theme 30.2: Clinical decision making 	
Scope of learning required			
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. Although the field of immunology is complex, examination would focus on common clinical situations, and first-line methods of special investigation. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.6	Manage patients with mental health disorders	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the structure and function of the limbic system and hippocampus discuss the role and function of neurotransmitters outline the principles of substance dependence (addiction), including neuroadaptation (tolerance) and withdrawal discuss pharmacology of major drug classes used identify local protocols for liaison with psychiatric services discuss indications for sectioning, and therapeutic options under mental health act identify and appraise local addiction medicine and community drug and alcohol services identify and appraise community resources that may assist, e.g. for anger management 		<ul style="list-style-type: none"> conduct a focussed clinical and mental state examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret mental status examination, and tests of cognitive function
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> anxiety disorders dementia eating disorders mood disorders pathological grief reaction psychosis somatoform disorder substance use disorders unsuccessful suicide attempt 		<ul style="list-style-type: none"> recognise the clinical presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations to rule out organic causes, discuss broad therapeutic options (including non-pharmacological), initiate appropriate emergency management, involve other members of the team wherever appropriate, and refer appropriately for each condition recognise complications if they arise, and refer appropriately recognise the possible contribution of mental illness or personality disorder to any clinical presentation evaluate suicide risk identify the psychologically impaired employee identify and interpret danger signs of the violent, homicidal, or suicidal person

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.6	Manage patients with mental health disorders	
<ul style="list-style-type: none"> discuss the pattern of use, relevant pharmacology, clinical presentation of intoxication and withdrawal, and differential diagnosis for the following substances: <ul style="list-style-type: none"> alcohol amphetamine-type stimulants cannabis cocaine benzodiazepines ketamine nicotine opioids volatile solvents recognise mental health manifestations of systemic disease. 	<ul style="list-style-type: none"> acquire an adequate history of drug use, recognise signs of drug use and abuse on general history and examination, recognise the effect of use of the agent on presentation and institute appropriate emergency management of overdose/toxic effects of illicit drug use for each of these substances recognise and manage uncomplicated acute withdrawal from: <ul style="list-style-type: none"> alcohol benzodiazepines nicotine opioids apply commonly used pharmacotherapies to treat dependence. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals, and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions <i>Austroads: Assessing fitness to drive</i> DSM IV www.behavenet.com/capsules/disorders/dsm4TRclassification.htm Multicultural Mental Health Australia www.dhi.gov.au/Multicultural-Mental-Health-Australia/default.aspx 	<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Learning objective 11.2.3: Incorporate health and wellness promotion in clinical practice Theme 12.1: Management of acute medical problems (acute withdrawal) Learning objective 12.3.8: Manage patients with disorders of the neurological system Theme 30.2: Clinical decision making 	
Scope of learning required		
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.7	Manage patients with disorders of the musculoskeletal system	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> • discuss muscle physiology and the control of posture and movement • discuss the functional anatomy of the bones and joints of the vertebral column in the cervical and lumbar regions • discuss the functional anatomy of the acromioclavicular and sacroiliac joints and the large joints of the upper and lower limbs • discuss the functional anatomy of the wrist and hand, including the nerves and arteries, the bones, joints, tendons, fascia, and carpal tunnel • discuss the anatomical and physiological features of the bones of the skull, the thoracic wall, and the vertebrae of the thoracic, sacral, and coccygeal region • discuss the anatomical and physiological features of the deeper muscles of the limbs and their nerve supply, and of the fascial compartments of the lower leg • discuss the anatomical and physiological features of the bones of the foot • discuss the anatomical and physiological features of the muscles of the neck and jaw • outline the structure and function of bone, muscle and synovium • describe bone and mineral metabolism • describe purine metabolism • discuss pharmacology of major drug classes used 		<ul style="list-style-type: none"> • recognise all normal structures that shape the surface contours of the normal human body • conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs • apply basic science knowledge to interpret clinical signs, imaging (plain radiographs, CT and MRI scans, bone densitometry), laboratory tests of bone and mineral metabolism (calcium, phosphate, parathyroid hormone, vitamin D, alkaline phosphatase), investigations to monitor inflammation and disease activity and to diagnose immunologically-mediated disease (erythrocyte sedimentation rate (ESR), C-reactive protein, rheumatoid factor, antinuclear antibody), and synovial fluid analysis • apply basic science knowledge to appreciate the significance of and appropriately act on reports of specialised imaging of bones and joints
<ul style="list-style-type: none"> • discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, management and preventive strategies for: <ul style="list-style-type: none"> • osteoarthritis • osteoporosis 		<ul style="list-style-type: none"> • recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate management for uncomplicated osteoarthritis and osteoporosis • monitor for complications • recognise complications and refer appropriately

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System		STAGE A: The basics
Learning Objective 12.3.7	Manage patients with disorders of the musculoskeletal system		
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> common dislocations common fractures fibromyalgia giant cell arteritis (temporal arteritis) gout and pseudogout link septic arthritis to infection musculoskeletal manifestations of infectious disease musculoskeletal manifestations of systemic and chronic disease musculoskeletal manifestations of systemic disease (vitamin D deficiency, renal disease, osteoarthritis) myopathies seronegative spondyloarthritis soft tissue injury rheumatoid arthritis polymyalgia rheumatica systemic lupus erythematosus osteoporosis. 		<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 	
Suggested ways to learn	Links to other parts of the curriculum		
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals, and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions <i>Austroads: Assessing fitness to drive</i> New Zealand Guidelines Group www.nzgg.org.nz 	<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Learning objective 12.3.5: Manage patients with disorders of the immunological system Learning objective 12.3.8: Manage patients with disorders of the neurological system Theme 30.2: Clinical decision making 		
Scope of learning required			
<p>It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to. You should be able to recognise without assistance gross lesions on an x-ray of the skull, the vertebral column, and large joints of the limbs. In Stage A, you may be tested on your recognition of lesions on a CT or MR scan.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.8	Manage patients with disorders of the neurological system	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> locate cranial, cervical, lumbar, and sacral dermatomes locate the site and content of the cauda equina in the lumbar region locate the position of the major tracts of the spinal cord and hence the effect of spinal cord injury define the function of the cranial nerves (learning objectives 12.3.12 and 12.3.13 refer to cranial nerves II, VIII) outline the structure and function of the autonomic nervous system discuss the functions of the major lobes of the cerebral hemispheres discuss the role of the cerebellum, the basal ganglia and the nuclei, and pathways of the brainstem illustrate the blood supply to the various parts of the brain discuss the role of the meninges and the circulation and physiology of the cerebrospinal fluid discuss electrical activity of the brain and nerve conduction discuss the metabolism of the brain discuss the role of neurotransmitters and neurotransmission, including the autonomic nervous system discuss sleep-wake regulation explain the concept of brain death discuss pharmacology of major drug classes used and the effect of the blood-brain barrier outline the principles of diffusion, osmosis, and the chemical and electrical function of cell membranes outline the role of the peripheral nervous system with emphasis on pain pathways 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science to interpret clinical signs and major abnormalities on computerised tomography of the head apply basic science knowledge to appreciate the significance of and appropriately act on reports of electroencephalograms, nerve conduction studies and electromyograms, and autonomic function testing

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.8	Manage patients with disorders of the neurological system	
<ul style="list-style-type: none"> describe the central regulation of visceral function, including hunger, thirst and temperature. outline the basis of taste and smell 		
<ul style="list-style-type: none"> discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, management of and preventive strategies for: <ul style="list-style-type: none"> meningitis/encephalitis stroke 	<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arranges appropriate investigations, and independently initiate appropriate management for meningitis, encephalitis and stroke monitor for complications recognise complications or indicated special intervention (e.g. thrombolysis for stroke) and refer appropriately 	
<ul style="list-style-type: none"> discuss clinical presentation, initial investigations, initial management, potential complications, therapeutic options and indications for referral for the following conditions: <ul style="list-style-type: none"> Bell's palsy care of the elderly (cognitive decline) cerebellar disorders cerebral neoplasia (link to oncology) confusion (link to undifferentiated presentations) epilepsy (link to Theme 65.3 – health law/ driving) genetic disorders (Huntington's) Guillain Barre syndrome migraine motor neurone disease multiple sclerosis neurological manifestations of systemic disease (peripheral neuropathy, paraneoplastic, seizure) Parkinson's disease peripheral neuropathy – acquired and hereditary spinal cord compression syncope (link to undifferentiated presentations) temporal arteritis (link to rheumatology). 	<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 	

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.8	Manage patients with disorders of the neurological system	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals, and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions Austrroads: <i>Assessing fitness to drive</i>. 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Theme 11.3: Procedural skills Theme 12.1: Management of acute medical problems Theme 12.2: Management of patients with undifferentiated presentations Learning objective 12.3.1: Manage patients with disorders of the cardiovascular system Learning objective 12.3.7: Manage patients with disorders of the musculoskeletal system Learning objective 12.4.1: Manage patients with neoplastic diseases Learning objective 12.4.3: Manage adult patients with infectious diseases Theme 30.2: Clinical decision making Theme 65.3: Ethics and health law (driving) Theme 80.1: Assessment of fitness for work
Scope of learning required		
<p>For the purposes of testing at Stage A, you would be expected to interpret the report of an imaging study, a nerve conduction study and a neuropsychology assessment and to integrate these with other clinical findings. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to. You should be able to recognise without assistance gross lesions on an x-ray of the skull, the vertebral column, and large joints of the limbs. You may be tested on their recognition of lesions on a CT or MR scan.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.9	Manage patients with disorders of the renal and genitourinary systems	
Knowledge	Skills	
<p>Basic science</p> <ul style="list-style-type: none"> describe surface anatomy, structure and function of the renal system and male and female genital tract (link to care of the pregnant woman, endocrine) describe the functional histology of the renal glomerulus, the different parts of the nephron and the bladder outline the functional anatomy and physiology of the pelvis, its muscles and organs, and their blood supply discuss the principles of fluid regulation and electrolyte status define the principles of acid-base regulation (link to respiratory) describe urine composition discuss the principles of hormonal regulation, including antidiuretic hormone, renin-angiotensin system (link to endocrine) describe the measurement of renal function, calculation of creatinine clearance and glomerular filtration rate outline the principles of renal replacement therapy, transplant and dialysis discuss strategies for the recognition and management of urinary continence issues discuss pharmacology of major drug classes used 	<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs elicit a history of the effects of these conditions without creating undue embarrassment apply basic science knowledge to interpret clinical signs and laboratory tests (renal function, serum electrolytes, mid-stream urine microscopy and culture, arterial blood gases) apply basic science knowledge to appreciate the significance of, and appropriately act on, reports of imaging (renal tract ultrasound, functional renal scans, renal angiograms, urograms) and renal biopsies anticipate future need for dialysis or transplant, refer for vascular access where appropriate and avoid cannulation of target vessels 	
<ul style="list-style-type: none"> discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, management and preventive strategies for urosepsis 	<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate medical (non procedural) management for uncomplicated urosepsis recognise complications or when procedural intervention is required and provide initial emergency management, referring appropriately 	

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System		STAGE A: The basics
Learning Objective 12.3.9	Manage patients with disorders of the renal and genitourinary systems		
<ul style="list-style-type: none"> • discuss the clinical presentation, initial investigations, initial management, potential complications, therapeutic options and indications for referral for the following conditions: <ul style="list-style-type: none"> • acute and chronic renal failure • acute tubular necrosis • complications of renal replacement therapy • diabetic nephropathy • drug-related nephrotoxicity • genitourinary malignancies (prostate, testicular bladder, uterine/cervical/ovarian) • glomerulonephritis • interstitial kidney disease • obstructive uropathy • renal carcinoma • renal hypertension • renal manifestations of systemic disease • renovascular disease. 	<ul style="list-style-type: none"> • recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions 		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • clinical experience and reflective analysis • texts, websites, journals, and lectures • presenting and discussing cases with peers • structured observation and feedback of practice • supervisor discussions • Kidney Health Australia www.kidney.org.au 		<ul style="list-style-type: none"> • Theme 11.1: Clinical skills • Theme 11.2: Patient care and therapeutics (fluid management, adjusting for renal failure) • Learning objective 12.3.5: Manage patients with disorders of the immune system • Learning objective 12.4.1: Manage patients with neoplastic diseases • Theme 30.2: Clinical decision making 	
Scope of learning required			
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.10	Manage patients with disorders of the respiratory and sleep system	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the anatomy of the lungs, their lobes, the airways, the pulmonary blood supply and the pleura describe the surface anatomy of the major thoracic organs discuss the functional anatomy of the pharynx, larynx and epiglottis locate the position of the nasal sinuses and the overlying superficial structures of the face discuss the principles of gas exchange describe gas transport in the blood and the effects of anaemia and high altitude describe the mechanics of ventilation, spirometry and the various lung volumes explain ventilation perfusion matching – the V/Q ratio discuss the respiratory system’s role in acid-base balance describe respiratory responses to exercise and to hypoxia and hypercapnia discuss the effects of ageing on respiratory physiology apply respiratory physiology to interpret basic pulmonary function tests discuss pharmacology of major drug classes used describe the means of removal of insoluble inhaled foreign particles from the bronchial tree and the alveoli describe the effect of occupational and environmental toxins on the respiratory system (e.g. cigarette smoke, asbestos dust) outline the pathophysiological basis and causes of airway inflammation 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret clinical signs, imaging (chest x-ray, chest CT, ventilation perfusion ratio (V/Q) scans, pulse oximetry, blood gases, basic pulmonary function tests apply basic science knowledge to appreciate the significance of and appropriately act on reports of bronchoscopy, tissue biopsy, and sleep studies

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.10	Manage patients with disorders of the respiratory and sleep system	
<ul style="list-style-type: none"> discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, management and preventive strategies for the following common and important conditions: <ul style="list-style-type: none"> acute and chronic respiratory failure asthma chronic obstructive pulmonary disease pleural effusion pneumonia pulmonary embolus 	<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate management for these conditions monitor for complications recognise complications and refer appropriately 	
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications, therapeutic options and indications for referral for the following conditions: <ul style="list-style-type: none"> bronchiectasis cystic fibrosis diffuse lung disease hypersensitivity pneumonitis lung cancer pneumothorax pulmonary hypertension respiratory manifestations of systemic disease sleep apnoea tuberculosis. 	<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals, and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions <i>Austroroads: Assessing fitness to drive</i> BMJ Clinical Evidence – Sleep apnoea www.clinicalevidence.bmj.com/ceweb/conditions/sld/2301/2301.jsp 	<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Theme 11.3: Procedural skills Theme 12.1: Management of acute medical problems Theme 12.2: Management of patients with undifferentiated presentations Learning objective 12.3.5: Manage patients with disorders of the immune system Learning objective 12.4.1: Manage patients with neoplastic diseases Learning objective 12.4.3: Manage adult patients with infectious disease Theme 30.2: Clinical decision making 	

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.10	Manage patients with disorders of the respiratory and sleep system	
Scope of learning required		
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. At Stage A, you would not be tested on pulmonary vasculitides. It is important to know a lot about the diagnosis and likely forms of management of <i>common</i> conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.11	Manage patients with skin disorders	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the structure and function of skin, hair, and nails describe the pigmentary, inflammatory, and immune responses of the skin describe the changes in skin due to ageing and sustained exposure to ultraviolet describe venous drainage of the lower limbs discuss pharmacology of major drug classes used 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret clinical signs, including description of skin lesions using standard nomenclature apply basic science knowledge to appreciate the significance of and appropriately act on reports of skin and lesion biopsy
<ul style="list-style-type: none"> discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, management and preventive strategies for the following conditions: <ul style="list-style-type: none"> drug eruptions cellulitis 		<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate management for these conditions monitor for complications recognise complications and refer appropriately

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System		STAGE A: The basics
Learning Objective 12.3.11	Manage patients with skin disorders		
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> arterial and venous ulcers bacterial and fungal infections common disorders of the nails and hair common skin disorders such as acne, rosacea, solar keratoses, urticaria contact dermatitis naevi nodular skin lesions non-healing ulcers and wounds psoriasis scabies, head lice skin manifestations of systemic disease squamous cell carcinoma, basal cell carcinoma, and malignant melanoma vasculitis viral exanthems. 	<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals, and lectures presenting and discussing cases with peers structured observation and feedback of practice dermatology outpatient clinic Occupational Dermatology and Research and Education Centre www.occderm.asn.au 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.3: Procedural skills (skin biopsy) Learning objective 12.3.5: Manage patients with disorders of the immune system Learning objective 12.3.7: Manage patients with disorders of the musculoskeletal system Theme 30.2: Clinical decision making 	
Scope of learning required			
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.12	Manage patients with common eye conditions	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the orbit and its contents, the appearance of the fundus, the path of the optic nerve to the visual cortex, and the cell types of the retina describe the pituitary gland and its relations to major arteries and the optic nerve characterise the functions of the several parts of the visual pathway explain common variations in colour vision discuss the pathophysiology of visual field defects 		<ul style="list-style-type: none"> identify and remove superficial foreign bodies from the eye apply first aid treatment for any substance likely to be harmful to the eye use fluorescein stain to evaluate the cornea apply ophthalmoscopy as part of an eye examination apply basic science principles to interpret clinical findings, reports of perimetry
<ul style="list-style-type: none"> discuss the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> common causes of eye trauma common conditions of the adnexae such as dry eye common medical conditions of the eyeball such as conjunctivitis, cataract, glaucoma common ocular concomitants of ageing. 		<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange appropriate initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions texts, websites, journals and lectures Austroroads: <i>Assessing fitness to drive</i>. 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.3: Procedural skills Learning objective 12.5.4: Manage problems in the older person Theme 30.2: Clinical decision making
Scope of learning required		
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.3	Management of Patients with Disorders of an Organ System	STAGE A: The basics
Learning Objective 12.3.13	Manage patients with common ear conditions	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> illustrate the cavities that house the various parts of the ear and their contents, and the neurosensory structure of the ear and vestibular apparatus identify perception of speech as a combination of auditory function, visual cues, and anticipation of the words likely to be uttered discuss basic physics of sound 		<ul style="list-style-type: none"> use an otoscope and tuning fork read an audiogram recognise audiogram (pure tone and bone) of noise-induced hearing impairment and differentiate from conductive loss and presbycusis apply basic science principles to interpret clinical findings, special tests (e.g. Hallpike's), and reports of audiometry
<ul style="list-style-type: none"> describe the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> disease of the middle ear, including otitis media, 'glue ear', and otosclerosis inflammation of the ear canal, obstruction by cerumen, and perforation of the tympanic membrane Meniere's disease, noise-induced hearing loss, tinnitus, vertigo, and cochlear dysfunction. 		<ul style="list-style-type: none"> recognise the presentation, establish a provisional diagnosis, plan and arrange initial investigations, initiate symptomatic therapy, discuss broad therapeutic options, and refer appropriately for these conditions.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions Austroads: <i>Assessing fitness to drive</i> audiometry training course. 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.3: Procedural skills Learning objective 12.5.4: Manage problems in the older person Theme 30.2: Clinical decision making
Scope of learning required		
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

THEME 12.4: MANAGEMENT OF PATIENTS WITH DEFINED DISEASE PROCESSES

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
12.4.1 Manage patients with neoplastic diseases
12.4.2 Manage patients with genetic disorders
12.4.3 Manage adult patients with infectious diseases
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes	STAGE A: The basics
Learning Objective 12.4.1	Manage patients with neoplastic diseases	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> outline the principles of cell growth and ageing, cell injury, and apoptosis describe molecular and cellular oncogenesis describe the anatomy of the breast and histology of the mammary gland describe the pathogenesis of malignant neoplasm and metastatic spread outline the principles of staging and treatment of neoplasms outline the pharmacological principles of chemotherapy, radiotherapy, and immunotherapy list the screening tests for neoplastic diseases 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs apply basic science knowledge to interpret clinical signs, chest x-ray, CT head, chest, abdomen, bone scan, and laboratory tests, e.g. tumour markers, cytology, body fluid analysis apply basic science knowledge to appreciate the significance of and appropriately act on reports of more specialised imaging, predictive genetic testing

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes	STAGE A: The basics
Learning Objective 12.4.1	Manage patients with neoplastic diseases	
<ul style="list-style-type: none"> discuss the management of important acute complications of cancer, including: <ul style="list-style-type: none"> malignant hypocalcaemia pericardial tamponade spinal cord compression superior vena caval obstruction uncontrolled pain discuss the management of important complications of cancer therapy, including: <ul style="list-style-type: none"> bone marrow suppression neutropenic sepsis 	<ul style="list-style-type: none"> initiate management of complications, including pain, neutropenic sepsis, and common chemotherapy side effects 	
<ul style="list-style-type: none"> discuss the risk factors, clinical presentation, natural history, broad therapeutic options, and preventive strategies including screening for the following malignancies: <ul style="list-style-type: none"> brain breast carcinoma of unknown primary gastrointestinal leukaemia lung lymphoma multiple myeloma neoplasms recognised as related to occupation prostate potentially curable cancers skin. 	<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate management of presenting symptoms for these conditions develop a management plan in consultation with the ward supervisor if a diagnosis of cancer is considered recognise complications and/or when procedural intervention is required, provide initial emergency management, and refer appropriately. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> clinical experience and reflective analysis texts, websites, journals, and lectures presenting and discussing cases with peers structured observation and feedback of practice supervisor discussions guidelines such as Austroads: <i>Assessing fitness to drive</i> Cancer Council NSW and in most states and territories www.nswcc.org.au 	<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Learning objective 12.3.4: Manage patients with non-malignant disorders of the haematological system Learning objective 12.3.5: Manage patients with disorders of the immune system Learning objective 12.3.11: Manage patients with skin disorders Learning objective 12.4.3: Manage adult patients with infectious diseases 	

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes	STAGE A: The basics
Learning Objective 12.4.1	Manage patients with neoplastic diseases	
	<ul style="list-style-type: none"> • Learning objective 12.5.5: Manage patients at the end of life • Theme 30.2: Clinical decision making • Theme 30.3: Diagnostic and screening tests • Theme 69.3: Prevention and control 	
Scope of learning required		
<p>When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. It is important to know a lot about the diagnosis and likely forms of management of common conditions. With regard to rare conditions, have a broad understanding of the likely presentation and pathophysiology, the broad categories of treatment, clues to recognition of more serious conditions, and whom to refer to.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes	STAGE A: The basics
Learning Objective 12.4.2	Manage patients with genetic disorders	
Knowledge	Skills	
<p>Basic science</p> <ul style="list-style-type: none"> • describe the structure and function of human cells, genes, DNA, RNA, and proteins • outline the principles of Mendelian, sex linked, polygenic and mitochondrial inheritance, parental disomy, and repeating triplet sequences • define polymorphism, mutation, genetic segregation analysis and sex linked, multifactorial, and polygenic inheritance • describe the principles of major cancer genetics • discuss the basic principles of individualised medicine and pharmacogenetics • describe genetic testing techniques, including polymerase chain reaction (PCR) and gene sequencing 	<ul style="list-style-type: none"> • conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs • collate an accurate family history • construct and interpret a family pedigree • apply basic science knowledge to appreciate the significance of, and appropriately act on, reports of genetic tests 	

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes		STAGE A: The basics
Learning Objective 12.4.2	Manage patients with genetic disorders		
<ul style="list-style-type: none"> • identify and evaluate genetic databases • discuss the Human Genome Project • recognise the implications to an individual of a genetic diagnosis, e.g. life insurance • recognise the implications to family of a genetic diagnosis 			
<ul style="list-style-type: none"> • discuss the inheritance, phenotype(s), clinical presentation, natural history, complications and comorbidities principles of ongoing management and appropriate referral for the following conditions: <ul style="list-style-type: none"> • cystic fibrosis • familial neoplasia • hypertrophic obstructive cardiomyopathy • otosclerosis. 	<ul style="list-style-type: none"> • develop a management plan in consultation with supervisor if a genetic disease is present or considered. 		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • reflective application of basic medical knowledge • texts, websites and journals • presenting and discussing cases with peers. 		<ul style="list-style-type: none"> • Theme 30.3: Diagnostic and screening tests • Theme 61.1: Physician-patient communication • Theme 61.2: Communication with a third party, including the patient's employer or their family and/or carers 	
Scope of learning required			
<p>At Stage A, you would <i>not</i> be examined on the following genetic syndromes — Down, Turner, Marfan, Klinefelter, Huntington — or on haemochromatosis. Question scenarios would commonly refer to causes of disease, e.g. neoplasia, and the <i>genetic influence</i> on this.</p>			

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes	STAGE A: The basics
Learning Objective 12.4.3	Manage adult patients with infectious diseases	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> describe the biology of common and important pathogens describe host response to infection outline the principles of laboratory testing for infectious diseases outline the principles of infection control discuss the principles of immunisation discuss pharmacology of major drug classes used recognise local guidelines for post exposure prophylaxis recognise local guidelines for public health notification 		<ul style="list-style-type: none"> conduct a focussed clinical examination and apply basic science knowledge to interpret clinical signs interpret clinical signs, laboratory tests (full blood count, inflammatory markers, microbiology, virology, serology), and basic imaging (chest x-ray, CT head, CT abdomen/pelvis) assess potential routes of infection/transmission and secondary sites of infection apply basic science knowledge to appreciate the significance of, and appropriately act on, reports of complex investigations, including nuclear medicine and ultrasound scans
<ul style="list-style-type: none"> discuss the epidemiology, pathophysiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, potential complications, management, and preventive strategies for the following common and important conditions: <ul style="list-style-type: none"> cellulitis conjunctivitis diarrhoeal illness infective endocarditis influenza and pandemics meningitis/encephalitis pneumonia/lower respiratory tract infections, including influenza and Legionella infection septicaemia/bacteraemia upper respiratory tract infections, including otitis media and tonsillitis urinary tract infection 		<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arrange investigations, and independently initiate management for these conditions monitor for complications recognise complications and refer appropriately

DOMAIN 10	CLINICAL PRACTICE		Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes		STAGE A: The basics
Learning Objective 12.4.3	Manage adult patients with infectious diseases		
<ul style="list-style-type: none"> • discuss the clinical presentation, initial investigations, initial management, potential complications and disease associations, therapeutic options, adverse effects of disease management, and indications for referral for the following conditions: <ul style="list-style-type: none"> • common sexually transmitted infections • cytomegalovirus /toxoplasmosis • diseases well-recognised as transmitted from animals and birds in Australia and New Zealand • Epstein-Barr virus • exanthemata e.g. varicella • fever in the returning traveller, including malaria, dengue fever, parasitic infections • hepatitis viruses • HIV • infections in the immuno-compromised host • meningococcaemia • osteomyelitis • septic arthritis • tuberculosis • water-borne and food-borne gastrointestinal disease • emerging infectious diseases, as they arise. 	<ul style="list-style-type: none"> • recognise the presentation, establish a provisional diagnosis, plan and arrange initial investigations, initiate empiric therapy, discuss broad therapeutic options, and refer appropriately for these conditions. 		
Suggested ways to learn	Links to other parts of the curriculum		
<ul style="list-style-type: none"> • clinical experience and reflective analysis • texts, websites, journals, and lectures • presenting and discussing cases with peers • supervisor discussions • NSW Health Infectious Disease www.health.nsw.gov.au/publichealth/Infectious/ • occupational assessment, screening and vaccination against specified infectious diseases • revised hepatitis B and TB requirements for students and new recruits www.health.nsw.gov.au/publichealth/immunisation/ohs/ 	<ul style="list-style-type: none"> • Theme 11.1: Clinical skills • Learning objective 11.1.4: Plan and arrange investigations appropriately • Theme 11.2: Patient care and therapeutics • Theme 12.2: Management of patients with undifferentiated presentations (e.g. PUO) • Learning objective 12.3.5: Manage patients with disorders of the immune system • Theme 30.2: Clinical decision making • Theme 30.3: Diagnostic and screening tests • Theme 61.1: Physician-patient communication 		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.4	Management of Patients with Defined Disease Processes	STAGE A: The basics
Learning Objective 12.4.3	Manage adult patients with infectious diseases	

- Australian Immunisation Handbook
www.health.nsw.gov.au/PublicHealth/Infectious/immunhandbook.asp

- Theme 69.3: Prevention and control

Scope of learning required

When examined at Stage A, questions asked of you may have an occupational scenario incorporated, but the question would be directed to diagnosis and/or clinical management rather than issues of work-relatedness. An examination scenario may refer to a widely-publicised and recent infectious disease, e.g. a variant of influenza.

THEME 12.5: MEDICINE THROUGH THE LIFESPAN - GROWTH AND DEVELOPMENT

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics

- 12.5.1 Manage common presentations in adolescents
- 12.5.2 Manage issues in regard to pregnancy and reproduction
- 12.5.3 Manage common problems associated with the menopause
- 12.5.4 Manage problems in the older person
- 12.5.5 Manage patients at the end of life

Advanced Stage B: Learning the Ropes

Nil

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.5	Medicine through the Lifespan – Growth and Development	STAGE A: The basics
Learning Objective 12.5.1	Manage common presentations in adolescents	
Knowledge		Skills
<ul style="list-style-type: none"> identify the physical, intellectual, emotional, psychological, and social factors in adolescent development relate the law and ethical principles to dealing with adolescents discuss eating disorders in adolescence discuss issues of body perception and self awareness in adolescents discuss substance use problems in adolescents and their onset discuss mental health disorders in adolescence and their various presentations identify risk behaviours and self harm in adolescence discuss the basis of sexual and reproductive health. 		<ul style="list-style-type: none"> take history and conduct a physical examination appropriate to this age group negotiate management plan in collaboration with young person recognise important mental health issues in adolescents particularly where they arise in setting of chronic disease assess the cognitive ability of patients to understand and make choices and provide informed consent identify risk behaviours and counsel and educate the young person regarding these assess psychosocial aspects of the patient involve a chaperone during physical examination liaise and communicate with community, health, drug and alcohol, education, and welfare practitioners, where appropriate.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge texts, websites, and journals presenting and discussing cases with peers. 		<ul style="list-style-type: none"> Learning objective 12.3.6: Manage patients with mental health disorders Theme 61.1: Physician-patient communication Theme 65.2: Personal ethics Theme 65.3: Ethics and health law
Scope of learning required		
<p>The scope of adolescent health in the AFOEM curriculum will be confined to those issues likely to arise in a workplace. Hence it is much narrower than what appears in the RACP Adult Basic Training Curriculum.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.5	Medicine through the Lifespan – Growth and Development	STAGE A: The basics
Learning Objective 12.5.2	Manage issues in regard to pregnancy and reproduction	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> • discuss the physiological changes associated with normal pregnancy and lactation • describe the changes in pharmacokinetics with normal pregnancy • describe the mechanisms of teratogenesis and other adverse reproductive outcomes (drugs, infections, radiation, pre-pregnancy lifestyle issues) and prevention • discuss post-chickenpox exposure management • recognise changes in normal ranges of common blood tests in pregnancy (full blood count, thyroid function tests, electrolytes, creatinine, liver function tests, arterial blood gases, ECG) • describe the physiology of spermatogenesis 		<ul style="list-style-type: none"> • take a sexual history fluently • record an obstetric history • conduct physical examination and order sequence of special investigations • recognise pregnancy • differentiate normal symptoms of pregnancy from disease
<p>Clinical</p> <ul style="list-style-type: none"> • outline the risk factors for common pregnancy associated diseases, including hypertension, diabetes, and thromboembolism • define the natural history, presentations, differential diagnosis, initial investigations, diagnostic criteria, and emergency management of pre-eclampsia and eclampsia • outline the risks associated with various investigative procedures, particularly imaging during pregnancy • discuss the usual investigation and management of infertility • discuss pharmacotherapeutics in pregnancy. 		<ul style="list-style-type: none"> • manage common medical problems in the pregnant woman, e.g. asthma • diagnose and manage common conditions encountered more frequently in pregnancy, including urinary tract infection and thromboembolism • use available pharmacopoeia to identify safest drugs for use in pregnancy and lactation • recognise the presentation of pre-eclampsia and eclampsia, order appropriate initial investigations, provide emergency management and call for assistance • refer pregnancy associated disease and high risk pregnancy appropriately • consider the possibility of pregnancy, and advise or refer for pre-conception counselling as appropriate • counsel women regarding healthy behaviour during pregnancy.

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.5	Medicine through the Lifespan – Growth and Development	STAGE A: The basics
Learning Objective 12.5.2	Manage issues in regard to pregnancy and reproduction	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • reflective application of basic medical knowledge • texts, websites, and journals • presenting and discussing cases with peers. 		<ul style="list-style-type: none"> • Learning objective 12.3.6: Manage patients with mental health disorders • Theme 61.1: Physician-patient communication • Theme 65.2: Personal ethics • Theme 65.3: Ethics and health law
Scope of learning required		
<p>For occupational physicians, the main issues in regard to pregnancy and reproduction will be:</p> <ul style="list-style-type: none"> • whether a pregnant woman (or woman intending to become pregnant) may continue to work in a situation where she may be exposed to occupational hazards • whether failure to conceive could have work-related causes. <p>Such issues could obviously form part of an examination at Stage B. At Stage A, examination questions asked of you may have an occupational scenario incorporated, but the question would be directed to clinical management rather than issues of work-relatedness.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.5	Medicine through the Lifespan – Growth and Development	STAGE A: The basics
Learning Objective 12.5.3	Manage common problems associated with the menopause	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> define the physiological changes associated with peri-menopause and post-menopausal period describe the clinical presentation of menopause 		
<p>Clinical</p> <ul style="list-style-type: none"> discuss the diagnosis and treatment of cardiovascular disease during menopause discuss the diagnosis and treatment of depression during menopause define evidence for interventions to detect and prevent decline post-menopause (osteoporosis, cardiovascular disease) discuss the treatment of incontinence post-menopause outline the risk factors for disease in postmenopausal female, including neoplasia, osteoporosis, and osteopenia. 		<ul style="list-style-type: none"> detect symptoms of normal and abnormal menopause examine and investigate appropriately for postmenopausal female, including breast and pelvic examination and screening investigations conduct examination and investigation of early onset menopause manage disease associated with menopause detect symptoms of depression and recognition of psychosocial factors impacting on presentation counsel peri-menopausal and post-menopausal women regarding health lifestyle promote screening to detect early disease, including breast, cervical, bone density for those with risk factors, and cardiovascular risk screening.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge texts, websites, and journals presenting and discussing cases with peers. 		<ul style="list-style-type: none"> Learning objective 12.3.2: Manage patients with endocrine and metabolic disorders Learning objective 12.3.7: Manage patients with disorders of the musculoskeletal system Theme 61.1: Physician-patient communication Theme 65.2: Personal ethics Theme 69.3: Prevention and control
Scope of learning required		
<p>In occupational medicine, a woman may seek counselling on screening, including a work-based screening program, or may be referred in regard to work performance relating to, for example, mood changes.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.5	Medicine through the Lifespan – Growth and Development	STAGE A: The basics
Learning Objective 12.5.4	Manage problems in the older person	
Knowledge		Skills
<p>Basic science</p> <ul style="list-style-type: none"> discuss the physiology of ageing, including pharmacology and changes associated with ageing in major organ systems describe the processes of cellular ageing, tissue growth and repair define the non-specific presentation of illness in the elderly identify medico-legal aspects of care of the older person involving competence and duty-of-care 		<ul style="list-style-type: none"> interpret clinical signs, laboratory tests, basic imaging, tests of mental status examination, and tests of cognitive function recognise when a patient may be incompetent to make a decision and initiate appropriate referral
<p>Clinical</p> <ul style="list-style-type: none"> describe the epidemiology, clinical presentation, differential diagnosis, investigations, detailed initial management, principles of ongoing management, and preventive strategies for the following common and important problems in older people: <ul style="list-style-type: none"> cognitive decline falls functional decline polypharmacy and adverse drug reactions. 		<ul style="list-style-type: none"> recognise the presentation of illness, establish a provisional diagnosis, plan and arrange appropriate investigations, and independently initiate appropriate management for these conditions monitor for complications recognise complications and refer appropriately.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> reflective application of basic medical knowledge texts, websites, and journals presenting and discussing cases with peers. 		<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics Theme 12.1: Management of acute medical problems Learning objective 12.3.7: Manage patients with disorders of the musculoskeletal system Theme 61.1: Physician-patient communication Theme 65.3: Ethics and health law Theme 69.3: Prevention and control
Scope of learning required		
At Stage A in the AFOEM curriculum, in regard to the elderly patient, you would not be examined on the investigation and management of delirium, incontinence, or constipation.		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.5	Medicine through the Lifespan – Growth and Development	STAGE A: The basics
Learning Objective 12.5.5	Manage patients at the end of life	
Knowledge	Skills	
<ul style="list-style-type: none"> define the pathophysiology of pain discuss pharmacology of analgesics and other agents used to treat major symptom complexes identify medico-legal aspects of end-of-life care involving futility and consent. 	<ul style="list-style-type: none"> recognise a patient’s dying phase assess the needs of family and carers respect the wishes of family and carers. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> reflective application of basic medical knowledge texts, websites, and journals presenting and discussing cases with peers. 	<ul style="list-style-type: none"> Theme 11.1: Clinical skills Theme 11.2: Patient care and therapeutics (pain management) Theme 61.1: Physician-patient communication Theme 61.2: Communication with a third party, including the patient’s employer or their family and/or carers Theme 61.3: Communication with colleagues and the broader health care team Theme 65.3: Ethics and health law 	
Scope of learning required		
<p>There is very limited scope for end-of-life management in the normal practice of occupational and environmental medicine. Accordingly the scope of learning is much reduced in comparison with the RACP Adult Basic Training Curriculum. The sort of situation may be where a family member seeks counselling about a person dying of work-related disease.</p>		

THEME 12.6: DISEASES AFFECTED BY OCCUPATION AND ENVIRONMENT AND THEIR CONSEQUENCES

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics

Nil

Advanced Stage B: Learning the Ropes

- 12.6.1 Manage musculoskeletal or neurological conditions that affect or are affected by occupation or environment
- 12.6.2 Manage psychiatric conditions that affect or are affected by occupation or environment
- 12.6.3 Manage respiratory system conditions that affect or are affected by occupation or environment
- 12.6.4 Manage skin conditions that affect or are affected by occupation or environment
- 12.6.5 Manage cardiovascular conditions that affect or are affected by occupation or environment
- 12.6.6 Manage eye conditions that affect or are affected by occupation or environment
- 12.6.7 Manage ear conditions that affect or are affected by occupation or environment
- 12.6.8 Manage renal and urinary disorders that affect or are affected by occupation or environment
- 12.6.9 Manage conditions of the blood-forming or immune systems that affect or are affected by occupation or environment
- 12.6.10 Manage conditions of the endocrine or gastroenterological systems that affect or are affected by occupation or environment
- 12.6.11 Manage reproductive issues that affect or are affected by occupation or environment
- 12.6.12 Assess and manage specific toxicities relating to occupation or environment

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.1	Manage musculoskeletal or neurological conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> discuss the diagnosis and treatment of common degenerative conditions of the spine and limb joints define peripheral nerve disorders define the indicators of degenerative brain conditions outline the appropriate use, purpose and limitations of commonly-applied imaging, including x-ray, CT scan, MRI scans, ultrasound, and nuclear medicine scans discuss the appropriate use, purpose, and limitations of nerve conduction studies. 		<ul style="list-style-type: none"> perform a thorough and carefully focussed examination of axial, large, and peripheral joints perform a thorough and carefully focussed neurological examination.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> a publication of WorkCover Corporation of South Australia: <i>Assessing musculoskeletal injuries</i> guided instruction by experts in these areas of medicine, including occupational physicians and rehabilitation physicians peer discussion about successful (or otherwise) approaches to similar problems, including with trainees in Stage C presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.7: Manage patients with disorders of the musculoskeletal system Learning objective 12.3.8: Manage patients with disorders of the neurological system Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You should recognise the appearance of common and gross joint disorders and nerve entrapment on a CT scan or MRI. In any examination, subtle changes or rare conditions on imaging would be accompanied by a radiologist's report.</p> <p>At the end of Stage B, you should be able to interpret the findings of nerve conduction study conducted in relation to carpal tunnel syndrome.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.2	Manage psychiatric conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss anxiety states, e.g. due to accidents, threats, fire, warfare, and their implication for work, includes post-traumatic stress disorder • discuss the principles of depression and its implications for work • discuss the principles of major psychiatric illness and its implications for work • recognise various forms of substance abuse • recognise commonly-used psychotropic medication and their side-effects • identify and evaluate community resources that may assist treatment, e.g. for anger management • define the appropriate use, purpose, and limitations of neuropsychological tests • identify ways to overcome stigma often experienced at work by people with psychiatric illness. 		<ul style="list-style-type: none"> • conduct a mini mental state examination • conduct a psychiatric mental state examination • identify the psychologically impaired employee • identify and interpret danger signs of the violent, homicidal or suicidal employee.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by psychiatrists and psychologists • peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C • textbooks and journals • presenting cases at trainee meetings • authoritative websites • reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> • Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan • Learning objective 12.2.1: Manage patients with undifferentiated presentations • Learning objective 12.3.6: Manage patients with mental health disorders • Learning objective 20.2.5: Describe the potential health effects of common and important psychosocial hazards • Theme 61.1: Physician-patient communication • Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>The prime focus of assessment will be management of work placement or return to work of a person with changes to mood, judgment, coping ability, or alertness. This requires a very high level of understanding and judgment. Make sure you have much depth of knowledge of this area.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.3	Manage respiratory system conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> • detail the well-recognised causes of occupational asthma and hypersensitivity pneumonitis • describe the effect of advanced respiratory disease on capacity for work • describe the assessment and management of sleep apnoea • describe the various health effects of asbestos exposure • discuss the causes of pneumoconioses cases that have become clinically manifest in the last 20 years • describe the physiological effects of diving. 		<ul style="list-style-type: none"> • take a systematic history and examination of the respiratory system • interpret respiratory function tests • interpret plain chest x-rays.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by respiratory physicians and/or occupational physicians with experience in diagnosis and management of occupational lung diseases • peer discussion about successful (or otherwise) approaches to similar problems, including with trainees in Stage C • textbooks and journals • presenting cases at trainee meetings • authoritative websites • reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> • Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan • Learning objective 12.3.10: Manage patients with disorders of the respiratory and sleep system • Learning objective 12.4.1: Manage patients with neoplastic diseases • Learning objective 12.4.3: Manage adult patients with infectious diseases • Theme 61.1: Physician-patient communication • Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>In most situations nowadays, asthma, sleep apnoea and thoracic neoplasms will be of greater significance to an occupational and environmental physician than pneumoconioses. Learning should be slanted toward what is likely to occur nowadays in Australia and New Zealand although, across a long-term practice of occupational medicine, you will occasionally have the opportunity to apply some broad knowledge of the classical occupational dust diseases.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.4	Manage skin conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> identify common causes of irritant contact dermatitis list the well-recognised causes of allergic contact dermatitis list the well-recognised causes of photosensitive dermatitis define the causes of occupational cutaneous infections relate pigmentary causes with occupational causes of skin conditions discuss the symptoms, causes, diagnosis and treatment of skin neoplasms. 		<ul style="list-style-type: none"> recognise through systematic history and examination common skin conditions and when an occupational contributing factor is likely use material safety data sheets (MSDSs) and other information in determining cause manage disease, investigate workplace, and advise employer arrange referral for further assessment, particularly when allergic contact dermatitis is suspected, and management where appropriate.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by dermatologists, particularly those with interest in occupational medicine the website of the Occupational Dermatology Research and Education Centre (ODREC) website at www.occdern.asn.au links skin conditions and occupational skin care in a very explicit way peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.11: Manage patients with skin disorders Learning objective 12.4.1: Manage patients with neoplastic diseases Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You should be able to <i>interpret</i> and <i>act appropriately</i> on the results of patch testing to ascertain the causal factors in allergic dermatitis, although conduct of such tests is considered the province of a specialist clinic.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.5	Manage cardiovascular conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> describe occupational contributors to cardiovascular disease, including substances such as carbon disulphide and agents that can precipitate relevant symptoms, such as carbon monoxide describe how cardiovascular disease can affect occupation. 		<ul style="list-style-type: none"> evaluate fitness following major cardiac event evaluate fitness in the presence of cardiac risk factors evaluate fitness associated with arrhythmias and mild or recovering heart failure.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by cardiologists and occupational physicians peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge recognised guidelines e.g. Austroads' <i>Assessing fitness to drive</i>. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.1: Manage patients with disorders of the cardiovascular system Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>The prime focus of testing at Stage B will be management of work placement or return to work of a person with changes to exercise tolerance, or with arrhythmias that may cause episodes of incapacity.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.6	Manage eye conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> state the likely ability of different types of flying particle to penetrate the eyeball identify situations where eye irrigation is urgent list the causes of conjunctivitis discuss the signs, symptoms, causes, diagnosis and treatment of ultraviolet photokeratitis identify situations where full colour vision is required, and when not detail the occupational significance of squint detail the occupational significance of restricted visual fields or scotomata discuss the range of office tests for eye function. 		<ul style="list-style-type: none"> identify and remove superficial foreign bodies from the eye apply first aid treatment for any substance likely to be harmful to the eye use fluorescein stain to evaluate the cornea recognise ocular emergencies.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by ophthalmologists and occupational physicians peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.12: Manage patients with common eye conditions Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You should be able to apply simple primary care. It is important that you know enough about the natural history of common eye conditions and their current treatments to form opinions about a patient's fitness for work and his or her likely ability to return to the duties being conducted before the condition occurred or became manifest.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.7	Manage ear conditions that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> identify the common causes of temporary and permanent hearing impairment outline the pathophysiological basis of external, middle and inner ear disease, including tinnitus and vertigo outline the principles of noise mapping, hierarchy of controls for noise and their links to an ear protection program. 		<ul style="list-style-type: none"> recognise audiogram of noise-induced hearing impairment and differentiate from conductive loss.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by occupational physicians, audiologists and doctors with expertise in conditions that affect the ear peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge audiometry training course. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.13: Manage patients with common ear conditions Learning objective 12.4.3: Manage adult patients with infectious diseases Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You should be able to apply simple primary care in case of occlusion by wax of the ear canal. You should know enough about the natural history of common ear conditions and their current treatments to form opinions about a patient's fitness for work and his or her likely ability to return to the duties being conducted before the condition occurred or became manifest. In particular, be aware of the likely effect on work of patients with different levels of increased hearing threshold.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.8	Manage renal and urinary disorders that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> define work-related causes of renal impairment discuss the effect of chronic renal failure and its treatment on a person's capacity for work discuss the effect of obstructive urinary disorders on capacity for work discuss the effect of continence issues on capacity for work discuss recognised occupational causes of cancer of the genitourinary tract. 		<ul style="list-style-type: none"> show sensitivity to the embarrassment of continence issues for a worker, and the ability to negotiate apt changes to employment without worsening such embarrassment initiate management on the basis of clinical findings.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by occupational physicians, renal physicians, and urologists peer discussion about successful (or otherwise) approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.9: Manage patients with disorders of the renal and genitourinary systems Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You should be particularly aware of the likely implications for work of a patient with urinary infection or incontinence. You should know the chemical causes of bladder cancer that are still in use in industry. In addition, you need to know the likely effects on work of a person with renal failure requiring dialysis and treatment for anaemia.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.9	Manage conditions of the blood-forming or immune systems that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> discuss common pathologies of the haemopoietic and immune systems and their pathogenesis, where known describe common investigations and what information they offer outline exposures recognised to cause haemolysis, aplastic anaemia or leukaemia and the strength of evidence for this identify the special needs of workers who have undergone organ transplantation. 		<ul style="list-style-type: none"> use the terminology associated with key cellular components of the haemopoietic and immune system, yet formulate and express ideas in a way that is clear to people without medical training restrict diagnostic options to what may be reasonably justified by objective findings and verifiable aspects of a patient's history.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by occupational physicians, haematologists and immunologists peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.4: Manage patients with non-malignant disorders of the haematological system Learning objective 12.3.5: Manage patients with disorders of the immune system Learning objective 12.4.3: Manage adult patients with infectious diseases Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>The immune system is a vast complex of terminology. You should focus on conditions that are likely to be work-related or that may affect fitness for work or work placement in well-recognised ways.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.10	Manage conditions of the endocrine or gastroenterological systems that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss the diagnosis and management of diabetes mellitus and its various complications • recognise the existence of the Austroads guide to assessing fitness to drive and related train driving standards • discuss strategies for the management of obesity • describe the end-organ effects of obesity and their effect on work • describe the investigation, diagnosis and management of inflammatory bowel disease and irritable bowel syndrome • discuss the recognition and management principles of anorexia nervosa • discuss the diagnosis and management principles of acute and chronic liver disease • evaluate management principles of biliary system disorders • evaluate management principles of pancreatitis. 		<ul style="list-style-type: none"> • recognise and appropriately refer less common endocrine disorders • utilise biochemical testing • investigate and refer for complications of diabetes.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by occupational physicians, endocrinologists and gastroenterologists • peer discussion about successful, or otherwise, approaches to similar problems, including with other trainees • textbooks and journals • presenting cases at trainee meetings • authoritative websites • reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> • Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan • Learning objective 12.3.3: Manage patients with disorders of the gastrointestinal system • Learning objective 12.3.5: Manage patients with disorders of the immune system • Theme 61.1: Physician-patient communication • Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You should know the likely effect on fitness for work of treatments for and complications of diabetes and be able to anticipate the likely effects on ability to work of severe obesity and inflammatory bowel disease and other causes of diarrhoea or changes to body odour. You should be aware of the likely reactions of co-workers to a jaundiced person.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.11	Manage reproductive issues that affect or are affected by occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> identify work-related causes of adverse reproductive outcomes recognise the way that stage of pregnancy affects sensitivity to exposure identify the well-recognised teratogens identify classes of substances recognised to be endocrine-disrupters. 		<ul style="list-style-type: none"> listen, anticipate when a pregnant patient may exhibit anxiety and assist her to gain perspective on a workplace exposure judge when a warning of reproductive risk is apt, i.e. likely to do more good than harm discuss sexual history whilst including reference to relevant occupational or environmental exposures discuss reproductive history.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by medical experts in reproductive disorders peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.3.9: Manage patients with disorders of the renal and genitourinary systems Learning objective 12.4.2: Manage patients with genetic disorders Learning objective 12.5.2: Manage issues in regard to pregnancy and reproduction Theme 61.1: Physician-patient communication Theme 61.2: Communication in encounters with a patient's family Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work
Scope of learning required		
<p>You need to be particularly aware of well-recognised work-related causes of failure to conceive in both male and female partners. You should know the precautions commonly taken for women of child-bearing potential and during pregnancy, and be able to discuss with a patient matters that can be awkward.</p>		

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.12	Assess and manage specific toxicities relating to occupation or environment	
Knowledge		Skills
<ul style="list-style-type: none"> evaluate commonly used databases that refer to substances and their harmful effects discuss the metabolism, toxicokinetics and acute and chronic effects of exposure to the following substances: <ul style="list-style-type: none"> asbestos dust benzene cadmium dust carbon monoxide chromium hydrogen fluoride lead dust mercury vapour an organo-phosphorus compound toluene, ethyl benzene, and the xylene isomers other substances referred to in the Guidelines for Health Surveillance, NOHSC 7039 (1995) identify mode of action and usual method of application of antidotes for the following substances or substance groups: <ul style="list-style-type: none"> hydrofluoric acid hydrogen cyanide gas inhalation lead. 		<ul style="list-style-type: none"> estimate likely extent of absorption given the circumstances glean relevant information from a MSDS recognise a clinical situation where the use of an antidote would be appropriate and how urgently it should be given avoid intensive intervention when simpler supportive measures would be more appropriate apply apt health surveillance and monitoring apply apt environmental monitoring.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by occupational physicians peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks and journals presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge AFOEM publication on occupational cancer. 		<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 12.1.2: Manage acute specific medical problems (refers to managing poisoning with carbon monoxide and anticholinesterase substances) Theme 61.1: Physician-patient communication Learning objective 80.1.3: Perform a clinical assessment of a person's fitness for work

DOMAIN 10	CLINICAL PRACTICE	Sub-domain 12: Medical Expertise
Theme 12.6	Diseases Affected by Occupation and Environment and Their Consequences	STAGE B: Learning the ropes
Learning Objective 12.6.12	Assess and manage specific toxicities relating to occupation or environment	

Scope of learning required

You should be able to anticipate the likely health effects of broad categories of occupationally-encountered toxicants, e.g. anticholinesterase agents, hydrocarbon solvents. Be able to promptly identify key information on a MSDS in a pressure situation.

In referring to metabolism and toxicokinetics of such varied substances as listed here, it is recommended that you do not try to find precise figures for, say, the half-life of asbestos or the volume of distribution of hydrofluoric acid. Rather, you should have a broad perspective of the body spaces that such substances enter, about how long they stay there, the mode of removal, and their effect if they stay for a while.

For example, with asbestos, you should know that only small fibres will enter the airway. Of these, some will deposit on the bronchial walls where they will move within hours to the pharynx and be swallowed. Swallowed fibres are indigestible and will be expelled in faeces. Very small fibres will enter the alveoli where removal, via macrophages, is much slower - weeks, months, or years. Some of the fibres will migrate to other body spaces, e.g. the pleura or peritoneum. Fibres can cause two main types of cancer as well as other pathologies.

Similarly, with hydrofluoric acid, you should know that it is, perhaps counter-intuitively, a weak acid ($pK_a > 3$), and hence is far less ionised than a strong acid such as hydrochloric acid. This allows hydrogen fluoride to more easily penetrate the skin where it reacts with calcium to form insoluble calcium fluoride. This causes local then potentially general calcium depletion with the resulting symptoms.

With anticholinesterase compounds, you should know that they are metabolised quickly but that their effects can linger. Some, especially the very smelly insecticides, need to be metabolised (oxidised) before reaching maximum toxicity which means that the onset of symptoms can be delayed for at least several tens of minutes. The mechanism of cholinesterase inhibition matures over hours which makes important the timing of antidote administration

With inhaled cyanide, you should recognise that it acts quickly, is metabolised quickly, and that the administration of oxygen has a positive therapeutic effect. In addition, you should know that the most soluble cyanide compounds, e.g. sodium cyanide, are strongly alkaline.

DOMAIN 20: WORKPLACE HAZARD ASSESSMENT

The themes in Domain 20 are:

- 20.1: Properties and mechanisms of harm of agents that can affect health
- 20.2: Description of health effects of occupational hazards
- 20.3: Assessment and control of work-related hazards
- 20.4: Investigation of situations
- 20.5: Investigation of an outbreak

THEME 20.1: PROPERTIES AND MECHANISMS OF HARM OF AGENTS THAT CAN AFFECT HEALTH

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
20.1.1 Describe the properties of physical agents that can affect health
20.1.2 Describe the chemical properties that are relevant to health
20.1.3 Describe the properties of biological agents that can affect health
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.1		Properties and Mechanisms of Harm of Agents that can Affect Health	STAGE A: The basics
Learning Objective 20.1.1		Describe the properties of physical agents that can affect health	
Knowledge		Skills	
<ul style="list-style-type: none"> discuss the properties of the following physical agents and how they are known to harm health: <ul style="list-style-type: none"> sound excessive heat severe cold changes to ambient pressure ultraviolet radiation ionising radiation and radioactive particles. 		<ul style="list-style-type: none"> apply simple numerical reasoning to discussions concerning physical agents. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> peer discussion including guidance from trainees in Stage C textbooks and websites. 		<ul style="list-style-type: none"> Learning objective 20.2.1: Describe the potential health effects of common and important physical hazards Learning objective 20.3.1: Outline the major hazards commonly found in nominated workplaces Learning objective 20.3.2: Describe the general principles of workplace assessment Learning objective 20.3.6: Involve other occupational health professionals Learning objective 90.1.1: Define <i>environment</i> and factors that influence occurrence of exposure and the susceptibility of individuals or groups 	
Scope of learning required			
The important thing is <i>not</i> the detailed physics of these agents but how they interact with the human body or affect lifestyle.			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.1		Properties and Mechanisms of Harm of Agents that can Affect Health	STAGE A: The basics
Learning Objective 20.1.2		Describe the chemical properties that are relevant to health	
Knowledge		Skills	
<ul style="list-style-type: none"> describe what is meant by: <ul style="list-style-type: none"> an acid, an alkali, pKa and pH aromatic and aliphatic compounds diffusion and osmosis electrolysis and electrolytes an enzyme and its properties flammability and explosion a gas and the physical laws that relate to gases a halogen and a halogenated organic compound an inert gas an ion and a polar molecule a metal and a heavy metal nanoparticles odour threshold oxidation and reduction solubility a volatile organic compound. 		<ul style="list-style-type: none"> anticipate the likely route of exposure and rapidity of action based on the properties of a listed substance or a substance with similar properties gain access to and use a MSDS. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> peer discussion including guidance from trainees in Stage C textbooks reading authoritative websites. 		<ul style="list-style-type: none"> Learning objective 20.2.2: Describe the potential health effects of common and important hazards from substances used in workplaces Learning objective 20.3.1: Outline the major hazards commonly found in nominated workplaces Learning objective 20.3.2: Describe the general principles of workplace assessment Learning objective 20.3.6: Involve other occupational health professionals Learning objective 90.1.1: Define <i>environment</i> and factors that influence occurrence of exposure and the susceptibility of individuals or groups 	
Scope of learning required			
<p>When examined at Stage A, you would be provided with detailed information about any individual substance through a MSDS. You should realise that an understanding of these chemical properties is not an end in itself but is required to assist understanding of descriptions that are commonly applied to substances.</p>			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.1		Properties and Mechanisms of Harm of Agents that can Affect Health	STAGE A: The basics
Learning Objective 20.1.3		Describe the properties of biological agents that can affect health	
Knowledge		Skills	
<ul style="list-style-type: none"> describe the: <ul style="list-style-type: none"> distinguishing features of prions, viruses, bacteria, fungi and protozoa different types and sources of venom. 		<ul style="list-style-type: none"> use laboratory investigation appropriately. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> peer discussion including guidance from trainees in Stage C textbooks reading authoritative websites. 		<ul style="list-style-type: none"> Learning objective 20.2.3: Describe the potential health effects of common and important biological hazards 	
Scope of learning required			
<p>The types of micro-organism are distinguished in order to gain a better understanding of their different properties, e.g. ability to multiply outside the body or life cycle that involves other hosts. You should learn about these different biological agents with that in mind, rather than detailed microscopic structure or staining techniques.</p>			

THEME 20.2: DESCRIPTION OF HEALTH EFFECTS OF OCCUPATIONAL HAZARDS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics	
Nil	
Advanced Stage B: Learning the Ropes	
20.2.1	Describe the potential health effects of common and important physical hazards
20.2.2	Describe the potential health effects of common and important hazards from substances used in workplaces
20.2.3	Describe the potential health effects of common and important biological hazards
20.2.4	Describe the potential health effects of common and important design hazards
20.2.5	Describe the potential health effects of common and important psychosocial hazards
Advanced Stage C: Approaching Consultancy	
20.2.6	Describe the health effects of occupational hazards with discernment as to what is likely given the extent of exposure

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2		Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.1		Describe the potential health effects of common and important physical hazards	
Knowledge		Skills	
<ul style="list-style-type: none"> describe commonly encountered situations with exposure to the following physical hazards and the health effects that could result: <ul style="list-style-type: none"> changes in ambient pressure, e.g. caisson work cold, e.g. in chillers or outdoor work electricity, e.g. due to the nature of the task or faulty wiring heat, e.g. in foundries, glassmaking, fires or any highly vigorous activity ionising radiation, e.g. mining, non-destructive testing, health science activities noise that is loud and whirring, whining, whooshing or banging non-ionising radiation, e.g. ultraviolet outdoors, radiofrequency welding, lasers sources of drowning or engulfment, e.g. drains, siphons or grain silos sources of trauma, e.g. machines that press or cut, slippery or poorly lit surfaces, unguarded heights, vehicle crashes, and repetitive work vibration, e.g. in drilling, chipping or breaking rock or concrete. 		<ul style="list-style-type: none"> recognise situations to which knowledge of physical hazards can be put to good and apt use show reasonable mastery of the units used and numerical aspects of physical hazards give precedence to what appears likely, based on the properties of an agent, over material that appears to contradict this. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in occupational hygiene guided instruction by experts in occupational hygiene reading and discussing occupational hygiene reports textbooks and journals presenting at trainee meetings authoritative websites being involved in a relevant situation in a workplace. 		<ul style="list-style-type: none"> Learning objective 20.1.1: Describe the properties of physical agents that can affect health Learning objective 90.1.6: Describe the health risks of work in ambient environments of extreme temperature or pressure 	

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.1	Describe the potential health effects of common and important physical hazards	
Scope of learning required		
<p>For the purposes of assessment, you should be able to envisage the hazard, explain the mechanism of harm, its period of onset (e.g. seconds, days, years) and likely pathophysiology with reference to extent or intensity of exposure. You should be able to describe the basis on which, in an individual case, a medical condition with various known causes, e.g. sensorineural hearing loss, could be ascribed to hazardous work exposure. In addition, you should be able to offer evidence both for and against for conditions that are controversial, e.g. the health effects of extremely low frequency electromagnetic radiation. If medical conditions once well-recognised to be related to particular hazards are very unlikely to occur in modern-day workplaces, be able to recognise this.</p> <p>Particular emphasis in learning should be given to the harmful effects of workplace physical hazards that are well-recognised in standard textbooks, or that have been the subject of frequent discussion in journals or at conferences during the last decade.</p> <p>Examples of hazardous situations and the mechanisms of likely harms are more important than an exhaustive list of all known cases of harm ever attributed to such work situations.</p> <p>If there were to be an examination question on, for example, diving, you would not be expected to know the details of diving tables. However, you would need the perspective that each 10 metres of extra depth adds one atmosphere of pressure and so, during a diver's ascent from a prolonged dive, the pauses need to be longer as the surface gets closer because the proportional change in pressure is greater – i.e. the proportional change in ambient pressure during the 10 metre ascent from 10 atmospheres to nine is 10%, but in the 10 metre ascent from three atmospheres to two the proportional change is 33%, more than three times as great.</p>		

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.2	Describe the potential health effects of common and important hazards from substances used in workplaces	
Knowledge		Skills
<ul style="list-style-type: none"> identify common substances with the following types of health effect: <ul style="list-style-type: none"> acids and volatile liquids whose vapour irritates, e.g. hydrochloric acid, some aldehydes dusts well-recognised to cause pneumoconiosis, e.g. crystalline silica, or hypersensitivity pneumonitis, e.g. bird droppings gases that asphyxiate by interaction with proteins, e.g. carbon monoxide, hydrogen sulphide, hydrogen cyanide 		<ul style="list-style-type: none"> glean what is pertinent from a MSDS or other commonly-used and reliable sources of information about a substance discern what is known about relevant substances to a specific situation and, given the extent of likely exposures, communicate what is important to relevant people recognise a likely source of contamination of the air in a workplace recognise a confined space

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.2	Describe the potential health effects of common and important hazards from substances used in workplaces	
<ul style="list-style-type: none"> halogenated organic substances, perhaps little encountered now, that persist for years or decades in the environment, e.g. 'dioxin' (TCDD), polychlorinated biphenyls (PCBs) irritant gases, e.g. formaldehyde, sulphur dioxide, nitrogen dioxide, ozone may cause haemolysis, e.g. arsine, lead, or methaemoglobinaemia, e.g. nitrites may cause renal damage, e.g. lead, mercury, cadmium may contribute to peripheral neuropathy, e.g. n-hexane, inorganic arsenic may evoke acute neurological effects, e.g. cholinesterase inhibitors may precipitate attacks of asthma, e.g. isocyanates, Western Red Cedar, protein dusts, working in an aluminium smelter may sensitise through inhalation, e.g. isocyanates may sensitise through skin contact, e.g. nickel, chromium, epoxy resin, perming solutions, creosote (sensitising to UV) the particular risks of a confined space recognition that the terminology and dose-relevant information about substance-hazards will be strange to many people substances presently used in bulk that are classified in regulations in Australia and New Zealand as carcinogens or teratogens the various forms of asbestos volatile liquids whose vapours may cause narcosis, e.g. toluene, trichloroethylene, petrol locate useful websites and other sources of information about substance hazards. 	<ul style="list-style-type: none"> recognise a likely source of fire or explosion arrange for any group of workers handling strong caustic powders or solutions to develop skills in eye irrigation. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in occupational hygiene guided instruction by experts in occupational hygiene reading and discussing occupational hygiene reports textbooks and journals presenting at trainee meetings 	<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 11.1.4: Plan and arrange investigations appropriately Learning objective 12.6.12: Assess and manage specific toxicities relating to occupation or environment 	

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2		Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.2		Describe the potential health effects of common and important hazards from substances used in workplaces	
<ul style="list-style-type: none"> authoritative websites being involved in a relevant situation in a workplace. 		<ul style="list-style-type: none"> Learning objective 20.1.2: Describe the chemical properties that are relevant to health 	
Scope of learning required			
<p>For the purposes of assessment, you should be able to envisage the hazard, explain the mechanism of harm, its period of onset (e.g. seconds, days, years) and likely pathophysiology with reference to dose. You should be able to describe the basis on which, in an individual case, a medical condition with various known causes, e.g. asthma or neuropathy, could be ascribed to hazardous work exposure. Evidence both for and against should be offered for conditions that are controversial, e.g. a newly-alleged occupational cause of cancer.</p> <p>Learning should be able to link harm with dose, and to link <i>modern-day</i> exposures with likely dose. Do not attempt to commit to memory the individual properties of all common solvents. Instead, you should learn the health-relevant properties of one member of a class, e.g. toluene, trichloroethylene, so that a reasonable prediction could be made about other members of that class (homologues). Broad patterns of harmful effects should be learnt, not all the minor variations between homologous substances.</p> <p>In the normal, modern practice of occupational medicine, some data source of the properties of a substance, e.g. a MSDS, would be sought. A MSDS may indeed be provided in an examination. However, it is important to know enough about the physical properties of commonly-used substances that you can predict the likely properties of a class of substance, e.g. that solvents tend to be volatile, that many pesticides can be absorbed through intact skin, that gases with extreme pH are likely to irritate, that benzene stands out among aromatic solvents for the particular nature of the harms that it is well-recognised to cause.</p> <p>Academic coursework in occupational hygiene is recommended – enough to assist you to be a discerning consumer of hygiene services, not an occupational hygienist.</p>			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2		Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.3		Describe the potential health effects of common and important biological hazards	
Knowledge		Skills	
<ul style="list-style-type: none"> identify common micro-organisms with the following types of health effect: <ul style="list-style-type: none"> blood-borne viral infections and prion-related disease, e.g. HIV, hepatitis B, C, and D, Creutzfeldt-Jacob disease diseases transmitted from animals and birds, e.g. Q-fever, influenza, leptospirosis, brucellosis, anthrax 		<ul style="list-style-type: none"> recognise situations in workplaces where there is potential for micro-organisms to harbour, to multiply, or to elaborate a toxin recognise situations in workplaces where there is potential for micro-organisms to be transmitted to workers from other people, animals or insect vectors, or from surfaces, fomites or through the air 	

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.3	Describe the potential health effects of common and important biological hazards	
<ul style="list-style-type: none"> • food-borne disease, e.g. rotavirus, norovirus, hepatitis A, Campylobacter, salmonella, staphylococcal toxin, giardia • infections spread by kissing, coughing and cohabiting, e.g. influenza, tuberculosis, infectious mononucleosis, chlamydia, tinea, viral warts • an overseas traveller who becomes or returns ill, e.g. malaria, schistosomiasis, viral hepatitis E, typhoid, SARS, rabies • waterborne disease, e.g. giardia, cryptosporidium, legionella • discuss the types of micro-organisms that pose potential threat (e.g. bacteria, viruses, protozoa), their ability to multiply outside the human body, their usual mode of spread and the types of workplace situations that present this risk • define the purpose, function and maintenance of the cooling tower of an air-conditioning system • identify work practices that increase risk of accumulation of mould • identify biological agents with potential for terrorist use, e.g. anthrax, fungal and bacterial toxins, haemorrhagic viral fevers • discuss the potential health effects of, and strategies for managing, mite infestations • describe the treatment of venomous bites and stings, e.g. snakes, spiders, bees, wasps, marine creatures. 	<ul style="list-style-type: none"> • access and evaluate current sources of information relevant to prevention of infection, infestation, bites or stings among those who travel to remote areas or abroad • assess a workplace for the potential for spread of micro-organisms through the air or from surfaces • interpret the result of a laboratory report concerning the presence of micro-organisms in a workplace. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • related academic coursework in occupational hygiene • textbooks and journals • presenting at trainee meetings • authoritative websites • being involved in a relevant situation in a workplace • reading workplace records of illness and of ad hoc and routine microbiological testing. 	<ul style="list-style-type: none"> • Learning objective 12.4.3: Manage adult patients with infectious diseases • Learning objective 20.1.3: Describe the properties of biological agents that can affect health 	

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes	
Learning Objective 20.2.3	Describe the potential health effects of common and important biological hazards		
Scope of learning required			
<p>Learning should focus particularly on linking biological hazards with workplace situations and the likely exposure of workers. Start with the mechanism of exposure related to the behaviour of the organism should be the starting point and build your expertise from there.</p> <p>You are not expected to be able to conduct a thorough inspection of an air-conditioning system. However, you should be able to discern the direction of airflows in a room, to know the type of maintenance that is required for a cooling tower, and to interpret related records of maintenance and bacteriological reports.</p>			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes	
Learning Objective 20.2.4	Describe the potential health effects of common and important design hazards		
Knowledge		Skills	
<ul style="list-style-type: none"> • identify hazards likely to cause slips, trips or falls • define the principles of correct manual handling, including high and low lifts, static loading of muscles and use of large muscles where possible • recognise manual handling Code of Practice • define the method of measuring illuminance recognise where to find guidance on illumination standards • locate and evaluate posture and seating information • locate standards on access, exits, stairs, surfaces, fire extinguishers and first aid equipment. 		<ul style="list-style-type: none"> • perceive without measurement whether: <ul style="list-style-type: none"> • first aid equipment is easy to access and close enough to hand • illumination is likely to be inadequate or glaring • lifting, pushing or pulling tasks are satisfactorily equipped • location and type of fire extinguishers are appropriate • routes of access and egress, stairs and surfaces are appropriate • the grip on a hand tool is safe and designed well • the pacing of a task is likely to be appropriate • there are obvious sources of dangerous energy • a worker's posture is awkward • use simple equipment such as a tape measure or hand-held spring balance to assess relevant heights and weights in workplaces. 	

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes	
Learning Objective 20.2.4	Describe the potential health effects of common and important design hazards		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in ergonomics guided instruction by experts in ergonomics reading and discussing reports on ergonomics, including lighting reading and discussing reports on fires or other workplace emergencies textbooks and journals presenting at trainee meetings authoritative websites being involved in a relevant situation in a workplace relevant Australian/New Zealand standards. 		<ul style="list-style-type: none"> Learning objective 80.1.1: Assess the task demands and environment of the work of an employee 	
Scope of learning required			
<p>You should be able to demonstrate anticipation and a 'good eye' for situations in workplaces where there are likely to be hazards from manual handling or poor lighting. In addition, you should be able to perform simple measurements but know when ergonomic expertise should be sought.</p> <p>It is recommended that you focus on how to plan, prioritise and conduct a walkthrough of a workplace in line with a manual handling code of practice or standards for lighting. Understand the principles for design of stairs or surfaces for walking, e.g. in wet or narrow areas, but do not trouble to learn the materials involved in construction of such entities.</p>			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes	
Learning Objective 20.2.5	Describe the potential health effects of common and important psychosocial hazards		
Knowledge		Skills	
<ul style="list-style-type: none"> recognise adverse effects of exposure to psychosocial hazards will typically manifest as behavioural change, e.g. due to anxiety or depression describe: <ul style="list-style-type: none"> interaction between mental health and psychosocial factors in the workplace interaction between psychosocial factors and biomechanical risk factors the likely effects of a major scare such as a major fire, an explosion, an armed robbery, a gas leak, a large spill or a bomb threat the manifestations of various common forms of substance abuse the principles of training a worker for a new workplace situation, including active participation by the trainee and on-the-job feedback procedures commonly adopted when a worker's performance is sub-optimal various factors and situations that can lead to alienation of a worker work-related factors that together interact to frustrate a worker's hopes or plans or serve to increase a worker's levels of anxiety, such as interpersonal relationships, task design, cognitive demands and broader organisational factors affecting change or security of employment. 		<ul style="list-style-type: none"> recognise not just the final event, the 'last straw' (e.g. "he harassed me"), but also perceive or deduce the poor management practices that allow workers to be ill-trained, alienated, bullied, harassed or likely to put fellow workers at risk. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> involvement in a relevant situation in a workplace textbook and journal reading authoritative websites. 		<ul style="list-style-type: none"> Learning objective 12.6.2: Manage psychiatric conditions that affect or are affected by occupation or environment Learning objective 50.2.1: Define and describe the effects of organisational factors on health and safety performance Learning objective 61.1.1: Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news 	

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2		Description of Health Effects of Occupational Hazards	STAGE B: Learning the ropes
Learning Objective 20.2.5		Describe the potential health effects of common and important psychosocial hazards	
		<ul style="list-style-type: none"> • Learning objective 61.1.2: Empower patients and be respectful of their rights in all aspects of communication • Learning objective 61.2.1: Apply communication skills in encounters with a third party, including a patient's employer or family (including extended family) and/or carers • Learning objective 68.1.1: Know and apply the key principles, processes and limitations of advocacy 	
Scope of learning required			
<p>Nowadays, this area of occupational medicine practice is burgeoning. This makes it difficult to specify limitations. However, in preparing for examination, you should be particularly familiar with the many different symptoms associated with anxiety, depression and the differential diagnosis and common modes of treatment of these conditions.</p> <p>The term <i>occupational stress</i> is used sparingly in this curriculum. The term stress can be ambiguous. This happens because it is an omnibus term applied both to diagnosis and exposure and, included within its broad spread, are some exposures where preventive effort can be reasonably applied (e.g. bullying, poor task design) and other exposures, such as tight deadlines, dealing with several issues at once, that are intrinsic to a person's job (e.g. a chef). If you elect to use the term, <i>occupational stress</i>, be carefully aware of what you mean by it and, as part of effective communication, explain to others what you have embraced within its purview.</p>			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2		Description of Health Effects of Occupational Hazards	STAGE C: Approaching consultancy
Learning Objective 20.2.6		Describe the health effects of occupational hazards with discernment as to what is likely given the extent of exposure	
Knowledge		Skills	
<ul style="list-style-type: none"> • discuss the dose-related nature of the association between exposure and related human pathology. 		<ul style="list-style-type: none"> • obtain the nature and extent of likely relevant exposures from a worker's history and other appropriate records • prepare a clinical report recognising the extent of exposure when defining the work-relatedness or environment-relatedness of a disease. 	

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.2	Description of Health Effects of Occupational Hazards	STAGE C: Approaching consultancy	
Learning Objective 20.2.6	Describe the health effects of occupational hazards with discernment as to what is likely given the extent of exposure		
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • guided instruction by experts in occupational medicine • peer discussion about related issues and problems • textbooks and journals • journal clubs • presenting at trainee meetings • guiding trainees at Stages A and B • authoritative websites • being involved in a relevant situation in a workplace • textbook and journal reading • perusing authoritative websites. 		<ul style="list-style-type: none"> • 11.1.5: Take, record and analyse an occupational and environmental history from an individual • Theme 20.1: Properties and mechanisms of harm of agents that can affect health • Learning objective 30.5.1: Appraise support for an alleged causal association between a health effect and an exposure 	
Scope of learning required			
<p>This area approaches the highest reach of the art of an occupational and environmental physician. It is of central importance. You should think frequently and carefully about what is likely to happen to a person given an exposure of a particular nature <i>and its extent</i>. You need to bring the very important distinction between <i>hazard</i> and <i>risk</i> to all your thinking about the harmful effects of hazardous exposures.</p> <p>This area is as important to occupational medicine as medication dosage is to hospital-based practice.</p>			

THEME 20.3: ASSESSMENT AND CONTROL OF WORK-RELATED HAZARDS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics	
Nil	
Advanced Stage B: Learning the Ropes	
20.3.1	Outline the major hazards commonly found in nominated workplaces
20.3.2	Describe the general principles of workplace assessment
20.3.3	Determine whether current hazard control mechanisms and procedures are satisfactory
20.3.4	Compile a report of a workplace assessment that can be understood by people without scientific expertise

Advanced Stage C: Approaching Consultancy

- 20.3.5 Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues
- 20.3.6 Involve other occupational health professionals

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.3		Assessment and Control of Work-Related Hazards	STAGE B: Learning the ropes
Learning Objective 20.3.1		Outline the major hazards commonly found in nominated workplaces	
Knowledge		Skills	
<ul style="list-style-type: none"> • outline the major hazards commonly found in the following workplaces: <ul style="list-style-type: none"> • abattoir • aluminium smelter • bakery • cargo wharf • car smash repairer • electronics assembly • electroplating shop • fishing vessel • forest work • foundry • freeway construction • glass maker • heavy vehicle driving • hospital • machine shop • metal press area • office workplaces • orchard • paint manufacturer • paper manufacturer • plastic extrusions factory • pottery • stone quarry • tunnelling • underground mine • veterinary practice • woodworking shop. 		<ul style="list-style-type: none"> • apply the underlying principles of hazards to practical situations in familiar and unfamiliar workplaces • identify hazards in various workplaces • identify potential sources of hazards • outline processes to alleviate potential hazards, including risk assessment and management principles. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • visiting such worksites together with or followed by discussion with educational supervisor • textbook and journal reading • peer discussion • presentation at trainee meetings. 		<ul style="list-style-type: none"> • Theme 20.3: Assessment and control of work-related hazards • Learning objective 80.1.1: Assess the task demands and environment of the work of an employee 	
Scope of learning required			
<p>You should seek to visit workplaces of this type during training. Such visits could be supplemented by discussion of the event or by video material.</p> <p>Mere discussion of video material without actual visit would be a second-best learning experience, but can be enhanced by careful, insightful commentary.</p>			

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.3	Assessment and Control of Work-Related Hazards	STAGE B: Learning the ropes	
Learning Objective 20.3.2	Describe the general principles of workplace assessment		
Knowledge		Skills	
<ul style="list-style-type: none"> define the areas of expertise of an ergonomist, occupational hygienist and risk engineer, and describe how they apply the methods they use outline the principles of workplace assessment, considering the worker, the work, the equipment, the organisational practices and the environment. 		<ul style="list-style-type: none"> recognise the presence of hazards by conducting a walkthrough survey evaluate workplace hazards by conducting preliminary quantitative or semi-quantitative measurements. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> direct, on-the-spot guidance from educational supervisor or other occupational health professional, or a trainee in Stage C textbook and journal reading authoritative websites. 		<ul style="list-style-type: none"> Learning objective 20.3.5: Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues Learning objective 20.3.6: Involve other occupational health professionals Learning objective 61.4.4: Identify and address barriers to communication in a non-medical workplace Learning objective 90.1.4: Recognise and advise on health risks in the general environment arising from workplace activities 	
Scope of learning required			
Ensure you reach a high level of ability in this. Guided practice is essential.			

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.3	Assessment and Control of Work-Related Hazards	STAGE B: Learning the ropes
Learning Objective 20.3.3	Determine whether current hazard control mechanisms and procedures are satisfactory	
Knowledge	Skills	
<ul style="list-style-type: none"> define the principles of preventive action in workplaces discuss the hierarchy of control describe how to measure the success of hazard control mechanisms relate SI units of measurement to hazard control recognise the likely general content of a report prepared by an occupational hygienist or ergonomist define the 13 metric prefixes ranging from femto- (10^{-15}) up to tera- (10^{12}) identify where to obtain information about relevant standards and laws. 	<ul style="list-style-type: none"> assess the adequacy of a report prepared by an occupational hygienist or ergonomist. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> direct, on-the-spot guidance from educational supervisor or other occupational health professional, or a trainee in Stage C textbook and journal reading authoritative websites. 	<ul style="list-style-type: none"> Theme 20.1: Properties and mechanisms of harm of agents that can affect health Theme 20.3: Assessment and control of work-related hazards Learning objective 20.5.3: Identify and evaluate appropriate preventive measures following events such as clusters or outbreaks Learning objective 30.6.1: Appraise interventions including strategies to improve adherence to protective measures 	
Scope of learning required		
<p>This could appear in either a written examination or the exhibit-based assessments in the practical examination. You should demonstrate a systematic approach and clear understanding of relevant terminology. Knowledge of this range of metric prefixes is sought because these appear in reports of biological and air monitoring.</p>		

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.3	Assessment and Control of Work-Related Hazards	STAGE B: Learning the ropes
Learning Objective 20.3.4	Compile a report of a workplace assessment that can be understood by people without scientific expertise	
Knowledge	Skills	
<ul style="list-style-type: none"> enlist commonly used terminology to describe risk and hazard in a workplace identify terms that may create ambiguity or that would be difficult to understand without special training. 	<ul style="list-style-type: none"> speak and write at a level that will meet the needs of your audience. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> observing reports written by others, including trainees in Stage C guidance from textbooks and government publications or websites. 	<ul style="list-style-type: none"> Theme 20.3: Assessment and control of work-related hazards Learning objective 40.4.1: Present research findings in a written form Learning objective 61.4.3: Describe the ethical and legal constraints on communicating medical information to a third party Learning objective 61.4.4: Identify and address barriers to communication in a non-medical workplace Learning objective 70.3.1: Describe courts and their procedures Learning objective 70.3.2: Prepare a medical report for the purposes of a legal process 	
Scope of learning required		
You should strive for a high level of ability in this. It will be further developed in Stage C.		

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.3	Assessment and Control of Work-Related Hazards	STAGE C: Approaching consultancy
Learning Objective 20.3.5	Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues	
Knowledge	Skills	
<ul style="list-style-type: none"> • discuss the features of a broad range of occupations, identifying likely workplace hazards • recognise relevant laws, standards, codes and guides • identify those who hold the greatest influence on changes to occupational health and safety practice in the workplace. 	<ul style="list-style-type: none"> • consult with others relevant to the anticipation and management of workplace hazards • prepare a well-organised, clear report: <ul style="list-style-type: none"> • with correct grammar and spelling • that explains any abbreviations, acronyms or units of measurement • that takes account of relevant laws, standards, codes and guides. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • guided instruction by experts in occupational medicine • peer discussion about related issues and problems • textbooks and journals • journal clubs • presenting at trainee meetings • guiding trainees at Stages A and B • authoritative websites • being involved in a relevant situation in a workplace • textbook and journal reading • perusing authoritative websites. 	<ul style="list-style-type: none"> • Theme 20.3: Assessment and control of work-related hazards • Learning objective 61.5.1: Demonstrate understanding of the modalities of influence within an organisation • Learning objective 61.5.2: Present a 'toolbox talk' to a group of workers 	
Scope of learning required		
<p>Practise visiting a workplace with a colleague after first discussing what is likely to be the issues there, given the nature of the process. During and afterwards, you should compare notes with your colleague. It takes much time to develop facility with this. You should seek guidance from colleagues and your educational supervisor on the scope and depth of your inspections, and where your appreciation overlaps with that of other occupational health and safety professionals or requires their involvement.</p>		

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.3	Assessment and Control of Work-Related Hazards	STAGE C: Approaching consultancy
Learning Objective 20.3.6	Involve other occupational health professionals	
Knowledge		Skills
<ul style="list-style-type: none"> describe the range of activities and skills expected of occupational hygienists, ergonomists, risk engineers, government workplace inspectors and police and coroner (in case of accidents) identify the aims and profiles of organisations these other professionals tend to belong. 		<ul style="list-style-type: none"> use workplace measurements when they are likely to be useful discern when such measurements are unnecessary interpret a report from another occupational health professional.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by experts in occupational medicine peer discussion about related issues and problems textbooks and journals journal clubs presenting at trainee meetings guiding trainees at Stages A and B authoritative websites being involved in a relevant situation in a workplace textbook and journal reading perusing authoritative websites. 		<ul style="list-style-type: none"> Learning objective 20.3.2: Describe the general principles of workplace assessment
Scope of learning required		
Gain a clear idea of the scope and limitations of the work of other occupational health and safety professionals, including areas of overlap.		

THEME 20.4: INVESTIGATION OF SITUATIONS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
Nil
Advanced Stage B: Learning the Ropes
20.4.1 Apply a screening test to a work group
20.4.2 Use apt communication techniques to dissuade the use of an inappropriate test
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.4	Investigation of Situations	STAGE B: Learning the ropes
Learning Objective 20.4.1	Apply a screening test to a work group	
Knowledge	Skills	
<ul style="list-style-type: none"> describe the situation where the screening test will be performed, including who will do it, what specimens will be collected, how will the samples travel and who shall analyse it state how to judge the validity and reliability of any proposed test, given what it is intended to discover recognise laws relevant to the nature and conduct of screening tests at work discuss particular issues around alcohol and drug screening recognise equal opportunity and disability discrimination law when conducting screening tests. 	<ul style="list-style-type: none"> justify or oppose a screening test based on the nature of the test being proposed and those to whom it will be applied discern when screening is likely to lead to beneficial action circumscribe the list of those to be screened and to justify exclusion of some groups assume responsibility for interpreting the result and counselling individuals. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C AFOEM publication on alcohol and drug screening textbooks and journals reflective application of basic medical knowledge university course work authoritative websites. 	<ul style="list-style-type: none"> Learning objective 11.1.4: Plan and arrange investigations appropriately Learning objective 30.3.1: Appraise a test in accord with the properties of the test and characteristics of those being tested Learning objective 61.1.1: Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news 	
Scope of learning required		
<p>You should have a current and broad knowledge of the types of screening that are conducted in workplaces and the advantages and problems associated with them. Be prepared to justify any screening that you do and the standards that define the boundary of a person's satisfactory performance on a test. You should be aware of associated laws and recognise any potential industrial relations implications. Have plans for communication to anyone whose performance on a test is unsatisfactory, and a clear policy in place to deal with that eventuality. You should recognise the need for security and duplicates for screening with high-stakes consequences and the need to restrict workplace screening to people who have a higher than average risk of having the condition being screened for, lest there be a significant proportion of false positive results.</p>		

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.4		Investigation of Situations	STAGE B: Learning the ropes
Learning Objective 20.4.2		Use apt communication techniques to dissuade the use of an inappropriate test	
Knowledge		Skills	
<ul style="list-style-type: none"> recognise that it is never appropriate to use a test whose result cannot be interpreted (e.g. a genetic test where a positive result is a weak risk factor for a severe chronic condition with many other causes) explain why it is not appropriate to authorise use of a test where you know in advance that its result is unlikely to change planned action recognise that tests which may be fit for use in certain circumstances may not be appropriate for the situation at hand recognise that the use of a screening test in a population or group where there is likely to be a very small proportion of people with the condition sought will be likely to create many false positive results recognise that painful or potentially embarrassing tests (e.g. biopsy, semen collection) are unlikely to be accepted as screening tests (or group follow-up tests) except in very special circumstances recognise that in some circumstances (e.g. for alcohol or drug screening) a positive test result may not necessarily imply impairment. 		<ul style="list-style-type: none"> articulate that ill-judged action and fear can be generated by application of an inappropriate test, and that no screening is often better than ill-conceived screening explain this to several different audiences with patience and an understanding that some people will hold contrary views. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by occupational and environmental physicians peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites. 		<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication Theme 61.5: The influencing of groups 	

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.4	Investigation of Situations	STAGE B: Learning the ropes
Learning Objective 20.4.2	Use apt communication techniques to dissuade the use of an inappropriate test	
Scope of learning required		
<p>You should have a current and broad knowledge of the types of screening that are conducted in workplaces and the advantages and problems associated with them. Be prepared to justify any screening that you do and the standards that define the boundary of a person's satisfactory performance on a test. You should be aware of associated laws and recognise any potential industrial relations implications. Have plans for communication to anyone whose performance on a test is unsatisfactory, and a clear policy in place to deal with that eventuality. You should recognise the need for security and duplicates for screening with high-stakes consequences and the need to restrict workplace screening to people who have a higher than average risk of having the condition being screened for, lest there be a significant proportion of false positive results.</p>		

THEME 20.5: INVESTIGATION OF AN OUTBREAK

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics	
Nil	
Advanced Stage B: Learning the Ropes	
Nil	
Advanced Stage C: Approaching Consultancy	
20.5.1	Investigate an outbreak of an acute disorder, such as an infectious disease, or an apparent cluster of disease cases or symptom complaints
20.5.2	Deal with the human and political factors that accompany events such as clusters or outbreaks
20.5.3	Identify and evaluate appropriate preventive measures following events such as clusters or outbreaks

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.5	Investigation of an Outbreak	STAGE C: Approaching consultancy
Learning Objective 20.5.1	Investigate an outbreak of an acute disorder, such as an infectious disease, or an apparent cluster of disease cases or symptom complaints	
Knowledge	Skills	
<ul style="list-style-type: none"> explain how to recognise a cluster or outbreak discuss the methods of formulating a reasonable approach plan with awareness of your personal role. 	<ul style="list-style-type: none"> identify what information is required and assemble it rapidly generate and test hypotheses as to the cause or trigger of the cluster or outbreak. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous relevant academic coursework guided instruction by physicians with a background in outbreak investigation peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meeting authoritative websites simply doing it. 	<ul style="list-style-type: none"> Learning objective 30.5.1: Appraise support for an alleged causal association between a health effect and an exposure Learning objective 40.1.1: Contribute to the development of new knowledge by active involvement in research Learning objective 61.4.4: Identify and address barriers to communication in a non-medical workplace 	
Scope of learning required		
<p>Other health professionals may take greater responsibility and set the pace in such an investigation. However, the occupational and environmental physician should retain a place at the table, follow what is happening, take part in communicative activities (e.g. hot line or data gathering), and retain a keen interest in future, related preventive activities.</p>		

DOMAIN 20	WORKPLACE HAZARD ASSESSMENT	
Theme 20.5	Investigation of an Outbreak	STAGE C: Approaching consultancy
Learning Objective 20.5.2	Deal with the human and political factors that accompany events such as clusters or outbreaks	
Knowledge	Skills	
<ul style="list-style-type: none"> • identify organisations that should be notified and individuals that should be involved • describe the role (if any) of emergency services • discuss the method, and likely time required, to confirm cases • discuss the likely reaction of those involved and those nearby • explain how to keep those affected and the community adequately informed. 	<ul style="list-style-type: none"> • use various media forms constructively • state clearly what is the case and what is likely to happen • arrange a 'hotline' or other enquiry and response mechanism. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • previous academic coursework in risk management • guided instruction by an occupational physician • peer discussion about successful (or otherwise) approaches to similar problems • media training • textbooks and journals • presenting at trainee meeting • authoritative websites • simply doing it. 	<ul style="list-style-type: none"> • Learning objective 61.1.1: Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling and breaking bad news 	
Scope of learning required		
As for the scope of learning specified for learning objective 20.5.1.		

DOMAIN 20		WORKPLACE HAZARD ASSESSMENT	
Theme 20.5		Investigation of an Outbreak	STAGE C: Approaching consultancy
Learning Objective 20.5.3		Identify and evaluate appropriate preventive measures following events such as clusters or outbreaks	
Knowledge		Skills	
<ul style="list-style-type: none"> define the natural history, clinical features and severity of the medical condition that is clustered discuss the likely availability of preventive measures identify need for isolation or separation of cases discuss the appropriate involvement of families and others close to those affected. 		<ul style="list-style-type: none"> create or arrange for preventive measures to be given orally and in writing to relevant people arrange for timely supply of equipment needed for screening and prevention. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous relevant academic coursework guided instruction by an occupational physician peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meeting authoritative websites simply doing it. 		<ul style="list-style-type: none"> Learning objective 11.2.3: Incorporate health and wellness promotion in clinical practice Learning objective 20.3.3: Determine whether current hazard control mechanisms and procedures are satisfactory Learning objective 20.3.6: Involve other occupational health professionals 	
Scope of learning required			
<p>You should discern what preventive action is appropriate, given the situation. A level of judgment and compromise is usually required. Some stakeholders will want absolute guarantees of no further cases, or seek extreme preventive measures in reaction to this occurrence. Such expectations need to be managed taking account of the severity of the medical condition, the number of people affected, and the likelihood that the medical condition indeed had a local cause.</p>			

DOMAIN 30: CRITICAL APPRAISAL OF INFORMATION

The themes in Domain 30 are:

- 30.1: Finding and application of information
- 30.2: Clinical decision making
- 30.3: Diagnostic and screening tests
- 30.4: Evaluating health interventions
- 30.5: Attribution of cause
- 30.6: Compliance with preventive interventions and procedures

THEME 30.1: FINDING AND APPLICATION OF INFORMATION

The sole learning objective within this theme is in Stage A.

Learning objective 30.1.1 is drawn from the RACP PQC where it appears as Learning objective 3.2.2.

Learning objectives 3.2.2, 6.1.1, 6.1.2, 6.1.3 and 6.1.4 from the RACP PQC are incorporated in this domain. Their site of placement is clearly designated

DOMAIN 30		CRITICAL APPRAISAL OF INFORMATION	
Theme 30.1		Finding and Application of Information	STAGE A: The basics
Learning Objective 30.1.1		Demonstrate understanding of the principles of evidence-based medicine, the limitations of evidence and the challenge of applying research findings to daily clinical practice	
This appears in the RACP PQC as Learning objective 3.2.2			
Knowledge		Skills	
<ul style="list-style-type: none"> discuss the advantages and disadvantages of different study methodologies, e.g. case-control studies, cohort studies, and randomised controlled trials identify factors contributing to validity of research recognise the challenge of translating research into clinical practice. 		<ul style="list-style-type: none"> appraise research literature: <ul style="list-style-type: none"> conduct a literature search evaluate the quality and applicability of evidence formulate a clinical question from a case scenario or clinical case identify the limitations of evidence apply evidence to a specific clinical situation and describe how some findings will influence your practice. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by educational supervisors and peers, including trainees in Stage C texts, websites, journals and lectures presenting and discussing cases with peers journal clubs. 		<ul style="list-style-type: none"> Theme 40.1: Research procedure 	
Scope of learning required			
<p>A high standard is required, including ability to discern likely biases and confounders. Statistical understanding is required to the extent that you completely understand the concept of an estimate and its confidence interval and, in the appraisal itself, whether the test(s) used were apt for the purpose, what it means, and whether allowance or acknowledgment has been made for multiple comparisons.</p> <p>You should practise explaining the commonly-used terms in ways that would be clear to a person new to epidemiology. It is imperative that you <i>do not</i> simply recite a textbook definition; you should take the trouble to explain each term in your <i>own</i> words.</p>			

THEME 30.2: CLINICAL DECISION MAKING

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Learning objectives 30.2.1, 30.2.2, 30.2.3 and 30.2.4 are drawn from the RACP PQC where they appear as Learning objectives 6.1.1, 6.1.2, 6.1.3 and 6.1.4 respectively.

Basic Stage A: The Basics

- 30.2.1 Understand and apply the process of diagnostic reasoning
- 30.2.2 Prognosticate and predict risk
- 30.2.3 Derive therapeutic decisions which maximise patient benefit and acceptance
- 30.2.4 Use evidence effectively and efficiently to inform clinical decision making

Advanced Stage B: Learning the Ropes

Nil

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.2	Clinical Decision Making	STAGE A: The basics
Learning Objective 30.2.1	Understand and apply the process of diagnostic reasoning	
This appears in the RACP PQC as Learning objective 6.1.1		
Knowledge	Skills	
<ul style="list-style-type: none"> describe processes of diagnostic reasoning discuss the probabilistic nature of clinical medicine outline the steps of hypothetico-deductive diagnostic reasoning: <ul style="list-style-type: none"> developing problem syntheses and problem lists formulating initial conceptualisation of the clinical problem(s) generating hypotheses perceiving and interpreting symptoms and signs testing, refining and verifying hypotheses using focussed inquiry strategies. 	<ul style="list-style-type: none"> apply an understanding of clinical disease and event probabilities to clinical reasoning demonstrate the ability to: <ul style="list-style-type: none"> construct a meaningful and concise problem synthesis and problem list construct an inclusive, concise and meaningful problem statement based on initial data generate plausible hypotheses at an early stage interpret and integrate data, collect additional relevant data using hypothesis-directed inquiry strategies and reformulate and refine working hypotheses perceive and interpret clinical features to gauge their reliability and import and to distinguish normal from abnormal cues. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> observing peers, educational supervisors and other physicians undertaking this task role plays and other simulations relevant texts and short courses. 	<ul style="list-style-type: none"> Learning objective 11.1.3: Synthesise findings from history and physical examination to develop a differential diagnosis and management plan Learning objective 11.1.4: Plan and arrange investigations appropriately 	
Scope of learning required		
You need to be <i>very good</i> at this.		

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.2	Clinical Decision Making	STAGE A: The basics
Learning Objective 30.2.2	Prognosticate and predict risk	
This appears in the RACP PQC as Learning objective 6.1.2		
Knowledge	Skills	
<ul style="list-style-type: none"> discuss the concepts of: <ul style="list-style-type: none"> absolute risk attributable risk cohort studies multivariate risk prediction natural history of disease risk calculators identify potential biases affecting the validity of cohort studies, case-control studies and multivariate risk models in defining future risk of events and prognostic factors. 	<ul style="list-style-type: none"> apply risk prediction rules and risk calculators to defining event risk in individual patients appraise studies that define risk to individual patients. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by mentors and peers, including trainees in Stage C texts, websites, journals and lectures presenting and discussing cases with peers, journal clubs supervisor discussions course work (e.g. Grad Dip, MPH). 	<ul style="list-style-type: none"> Theme 12.3: Management of patients with disorders of an organ system Theme 12.4: Management of patients with defined disease processes 	
Scope of learning required		
<p>You should apply the principles to many different clinical situations. This cannot be satisfactorily learnt away from clinical context. Only by application will you see where these concepts can be smoothly applied and where improvisation is needed.</p>		

DOMAIN 30		CRITICAL APPRAISAL OF INFORMATION	
Theme 30.2		Clinical Decision Making	STAGE A: The basics
Learning Objective 30.2.3		Derive therapeutic decisions which maximise patient benefit and acceptance	
This appears in the RACP PQC as Learning objective 6.1.3			
Knowledge		Skills	
<ul style="list-style-type: none"> discuss the concepts of: <ul style="list-style-type: none"> relative risk reduction (RRR) absolute risk reduction (ARR) odds ratio (OR) number needed to treat (NNT) number needed to harm (NNH) identify potential biases affecting the validity of clinical trials explain how the 'average' benefits and risks of treatments as measured and reported in clinical studies are individualised in caring for specific patients illustrate methods by which patients can better understand the evidence behind different management options and assist them in choosing one option over another. 		<ul style="list-style-type: none"> apply risk prediction rules and risk calculators to defining event risk in individual patients appraise studies that define risk to individual patients. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by mentors and peers, including trainees in Stage C texts, websites, journals and lectures presenting and discussing cases with peers, journal clubs supervisor discussions. 		<ul style="list-style-type: none"> Learning objective 11.2.2: Prescribe appropriate and safe pharmacotherapy 	
Scope of learning required			
As for the scope of learning specified for Learning objective 30.2.1.			

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.2	Clinical Decision Making	STAGE A: The basics
Learning Objective 30.2.4	Use evidence effectively and efficiently to inform clinical decision making	
This appears in the RACP PQC as Learning objective 6.1.4		
Knowledge	Skills	
<ul style="list-style-type: none"> identify methods for retrieving relevant and valid information from the medical literature that can be used in optimising clinical decisions discuss the potential applications of systematic reviews, clinical prediction rules, decision analysis and clinical practice guidelines describe the fundamentals of commonly used statistical methods. 	<ul style="list-style-type: none"> retrieve high-quality information from electronic sources retrieve, comprehend and apply results of systematic reviews, clinical prediction rules, decision analysis and clinical practice guidelines understand confidence intervals, levels of significance (p-values) and study power when interpreting results of clinical trials apply the knowledge related to this domain in specific clinical circumstances identify error in reasoning and reflect on one's own clinical reasoning process. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by mentors and peers, including trainees in Stage C texts, websites, journals and lectures presenting and discussing cases with peers, journal clubs supervisor discussions. 	<ul style="list-style-type: none"> Theme 12.3: Management of patients with disorders of an organ system Theme 12.4: Management of patients with defined disease processes 	
Scope of learning required		
<p>You should apply the principles to many different clinical situations. This material cannot be satisfactorily learnt away from clinical context. A great deal of practice and discussion with colleagues is required to gain mastery of this centrally-important area. Only by application will you see where these concepts can be smoothly applied and where improvisation is needed.</p>		

THEME 30.3: DIAGNOSTIC AND SCREENING TESTS

The sole learning objective within this theme is in Stage A.

DOMAIN 30		CRITICAL APPRAISAL OF INFORMATION	
Theme 30.3		Diagnostic and Screening Tests	STAGE A: The basics
Learning Objective 30.3.1		Appraise a test in accord with the properties of the test and characteristics of those being tested	
Knowledge		Skills	
<ul style="list-style-type: none"> distinguish screening tests from diagnostic tests in regard to purpose describe the means of assessing the performance of a test, e.g. sensitivity, specificity, positive predictive value, likelihood ratios identify the indications for any test that is considered discuss the risks and benefits of conducting and reporting a test explain the meaning of normal values, how these are determined, and what constitutes normality in a particular context. 		<ul style="list-style-type: none"> decide when a test is likely to be useful and explain why its use is appropriate place a single finding in perspective with other features a patient presents. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by mentors and peers, including trainees in Stage C journal clubs textbook reading authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.4: Plan and arrange investigations appropriately Learning Objective 20.4.1 Apply a screening test to a work group Learning objective 20.5.1: Investigate an outbreak of an acute disorder, such as an infectious disease, or an apparent cluster of disease cases or symptom complaints 	
Scope of learning required			
<p>You should strive to understand the principles of screening and when screening may or may not be appropriate. Examination questions would be likely to refer to specific screening tests, but a good answer would depend upon a grasp of the principles, i.e. what does screening achieve and not achieve, and why.</p>			

THEME 30.4: EVALUATION OF HEALTH INTERVENTIONS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
30.4.1 Appraise the likely efficacy of a reported health intervention
30.4.2 Appraise the economic evaluation of an intervention
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.4	Evaluation of Health Interventions	STAGE A: The basics
Learning Objective 30.4.1	Appraise the likely efficacy of a reported health intervention	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss types of studies used to evaluate health interventions explain 'levels of evidence' and relate its meaning to health interventions. 	<ul style="list-style-type: none"> weight flaws or imperfections in a study appropriately. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by mentors and peers, including trainees in Stage C journal clubs textbook reading authoritative websites. 	<ul style="list-style-type: none"> Theme 30.2: Clinical decision making Theme 40.3: Analysis, summary and depiction of data Theme 69.3: Prevention and control 	
Scope of learning required		
Similar to screening, it is the principles that are important: what makes a treatment apt and how this is decided.		

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.4	Evaluation of Health Interventions	STAGE A: The basics
Learning Objective 30.4.2	Appraise the economic evaluation of an intervention	
Knowledge	Skills	
<ul style="list-style-type: none"> describe the methods and terminology of economic evaluation identify sources of direct cost, such as labour, supplies and overheads identify sources of indirect cost, such as time, travel and treatment of side-effects identify sources of indirect benefit, such as averted treatment costs and averted productivity losses define quality-adjusted life years (QALYs) and their range of values recall the economic evaluation ratio (incremental costs/incremental benefits). 	<ul style="list-style-type: none"> discern omission of important and relevant information in a report recognise assumptions and appraise their realism mount an argument based on economic evaluation, including when such evaluation appears adverse. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> relevant academic coursework guided instruction by experts in health economics reading reports related to health intervention and their costs and benefits texts and websites. 	<ul style="list-style-type: none"> Theme 69.5: Economics of health 	
Scope of learning required		
<p>The examination would not require calculations, but rather a grasp of the terminology and the factors involved in making such evaluation.</p>		

THEME 30.5: **ATTRIBUTION OF CAUSE**

The sole learning objective within this theme is in Stage A.

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.5	Attribution of Cause	STAGE A: The basics
Learning Objective 30.5.1	Appraise support for an alleged causal association between a health effect and an exposure	
Knowledge		Skills
<ul style="list-style-type: none"> recognise the particular limitations of ecological, cross-sectional, case-control and cohort studies discuss the nature of bias and confounding list the criteria of causation. 		<ul style="list-style-type: none"> discern the salient points from large volumes of data judge causation based on application of the criteria of causation articulate a defence of one’s personal stance on an issue.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in critical appraisal peer discussion about approaches to critical appraisal textbooks on epidemiology presenting at trainee meetings authoritative websites journal clubs. 		<ul style="list-style-type: none"> Learning objective 61.5.3: Address an occupational or environmental issue at a meeting of more than a dozen interested people Learning objective 61.5.4: Offer expert evidence to a government or judicial inquiry on an occupational or environmental issue
Scope of learning required		
<p>It is extremely important for you to have clear and deep knowledge about attributing cause. A high standard is required, including ability to discern likely biases and confounders. Statistical understanding is required to the extent that you completely understand the concept of an estimate and its confidence interval and, in the appraisal itself, whether the test(s) used were apt for the purpose, what it means, and whether allowance or acknowledgment has been made for multiple comparisons.</p>		

THEME 30.6: COMPLIANCE WITH PREVENTIVE INTERVENTIONS AND PROCEDURES

The sole learning objective within this theme is in Stage A.

DOMAIN 30	CRITICAL APPRAISAL OF INFORMATION	
Theme 30.6	Compliance with Preventive Interventions and Procedures	STAGE A: The basics
Learning Objective 30.6.1	Appraise interventions including strategies to improve adherence to protective measures	
Knowledge		Skills
<ul style="list-style-type: none"> judge how well the evidence fits with the present situation. 		<ul style="list-style-type: none"> persuade others by means of training and personalised attention.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> relevant academic coursework guided instruction by occupational physicians and occupational hygienists peer discussion about approaches to control of hazards in workplaces textbooks on epidemiology presenting at trainee meetings authoritative websites journal clubs. 		<ul style="list-style-type: none"> Learning objective 20.3.3: Determine whether current hazard control mechanisms and procedures are satisfactory Learning objective 20.3.5: Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues
Scope of learning required		
Such strategies are published from time to time in OHS journals. It essentially gets at the difficulties of implementing a program of personal protective equipment and ways to assist people at work to find use of such equipment as straightforward as possible to achieve.		

Although all the learning objectives for Domain 30 appear in Stage A, the need to critically appraise information will extend into your research project (Domain 40), and you will be tested on your ability to apply the skills of critical appraisal to an article related to occupational or environmental health at the end of Stage B.

DOMAIN 40: RESEARCH METHODS

The themes in Domain 40 are:

- 40.1: Research procedure
- 40.2: Ethical conduct of research
- 40.3: Analysis, summary and depiction of data
- 40.4: Research presentation

THEME 40.1: RESEARCH PROCEDURE

The sole learning objective within this theme is in Stage B.

DOMAIN 40		RESEARCH METHODS
Theme 40.1	Research Procedure	STAGE B: Learning the ropes
Learning Objective 40.1.1	Contribute to the development of new knowledge by active involvement in research	
This appears in the RACP PQC as Learning objective 3.2.1		
Knowledge		Skills
<ul style="list-style-type: none"> • discuss qualitative and quantitative research methods, and the difference between a descriptive approach and an analytical approach to an investigation • identify key biostatistical and epidemiological tools used in research and how the method and imperfections of the chosen sampling process will likely influence the interpretation of the result • identify and evaluate a range of research publications and electronic literature databases • describe scientific styles of writing, e.g.: <ul style="list-style-type: none"> • ethics submission • publication • referee • research grant • describe the process of peer review • identify sources of research funding. 		<ul style="list-style-type: none"> • formulate an answerable research question to address the investigation of a health problem • perform a literature search and review • appraise information from different sources • develop appropriate protocol and methods for research, including submission to an appropriate ethics committee • prepare a budget and apply for funding • use data recording and storage procedures that comply with contemporary perspectives on the security and confidentiality of personal data on individuals • plan and execute a research project • apply knowledge of statistical methods • collect, store, analyse and evaluate research data • write a scientific or medical paper with referencing.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • academic coursework in research methods • guided instruction by occupational physicians and peers • peer discussion about approach to research 		<ul style="list-style-type: none"> • Learning objective 20.5.1: Investigate an outbreak of an acute disorder, such as an infectious disease, or an apparent cluster of disease cases or symptom complaints

DOMAIN 40	RESEARCH METHODS	
Theme 40.1	Research Procedure	STAGE B: Learning the ropes
Learning Objective 40.1.1	Contribute to the development of new knowledge by active involvement in research	
<ul style="list-style-type: none"> textbooks and journals authoritative websites. 	<ul style="list-style-type: none"> Learning objective 30.1.1: Demonstrate understanding of the principles of evidence-based medicine, the limitations of evidence and the challenge of applying research findings to daily clinical practice Learning objective 30.3.1: Appraise a test in accord with the properties of the test and characteristics of those being tested Learning objective 30.5.1: Appraise support for an alleged causal association between a health effect and an exposure Learning objective 40.2.1: Understand and apply ethical principles underpinning the conduct of research Learning objective 40.3.1: Discern the essence of a data set and summarise and depict this in a meaningful and logical way 	
Scope of learning required		
<p>This is assessed independently of the other domains. A research project is a major undertaking. It requires discipline in time management and a good record system. You will need guidance from one who is experienced in the conduct of research; this person may not be your usual mentor. You will need guidance on costs and how to be effective and efficient in this venture and to focus strictly on what is likely to be achieved rather than what is wished for. If you use a questionnaire, you will need guidance on its design and a pilot project to check that it will achieve what you want it to. You will need to anticipate sources of error. You are likely to need guidance on preparing a submission for an ethics committee.</p>		

THEME 40.2: ETHICAL CONDUCT OF RESEARCH

The sole learning objective within this theme is in Stage B.

DOMAIN 40	RESEARCH METHODS	
Theme 40.2	Ethical Conduct of Research	STAGE B: Learning the ropes
Learning Objective 40.2.1	Understand and apply ethical principles underpinning the conduct of research	
This appears in the RACP PQC as Learning objective 5.1.2		
Knowledge	Skills	
<ul style="list-style-type: none"> recognise international, national, state/territory and local codes, principles and declarations regarding the ethical conduct of research discuss the legal regulation of research at federal, state and territory levels outline the principles of informed consent. 	<ul style="list-style-type: none"> identify the purpose of the research obtain approval for research (and modification of research) from the appropriate ethics committee prior to commencing research conduct scientifically valid research with methods that are appropriate to aims obtain genuine informed consent from the subject or appropriate legally authorised guardian carefully consider, manage and minimise risk associated with research (beneficence and non-maleficence). 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> Australian NHMRC guidelines for ethical conduct of research obtain and read an application form for ethics approval of a research committee to gain an idea of its size and scope local ethics committee guidelines. 	<ul style="list-style-type: none"> Learning objective 40.1.1: Contribute to the development of new knowledge by active involvement in research Learning objective 65.1.1: Demonstrate ability to apply an ethical framework in clinical practice Theme 65.3: Ethics and health law 	
Scope of learning required		
You should learn particularly the ethical principles that are involved in research on humans.		

THEME 40.3: ANALYSIS, SUMMARY AND DEPICTION OF DATA

The sole learning objective within this theme is in Stage B.

DOMAIN 40		RESEARCH METHODS	
Theme 40.3		Analysis, Summary and Depiction of Data	STAGE B: Learning the ropes
Learning Objective 40.3.1		Discern the essence of a data set and summarise and present this in a meaningful and logical way	
Knowledge		Skills	
<ul style="list-style-type: none"> differentiate between the expression of health-related phenomena as frequencies or rates define and interpret a rate and the information that it conveys explain how to calculate prevalence, incidence and incidence density and interpret their meaning describe commonly-used measures of association in epidemiology recognise that incidence gives a measure of absolute risk discuss the potential effect of chance (random variation) on measurements, observations and the results of an investigation state the meaning of a confidence interval and a p-value explain how the presence of confounders may affect the interpretation of association between a putative determinant and a health outcome discuss the variety of methods available to deal with confounding explain the distinction between confounding and interaction (or effect modification). 		<ul style="list-style-type: none"> prepare and interpret appropriate tabulations, which summarise the distribution of a single variable or the relationship between two or more variables prepare and interpret appropriate illustrations, which summarise graphically the distribution of a single variable or the relationship between two or more variables calculate and interpret appropriate statistics. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in research methods, including access to research supervision and an ethics committee guided instruction by occupational physicians peer discussion about approach to research authoritative websites. 		<ul style="list-style-type: none"> Learning objective 30.1.1: Demonstrate understanding of the principles of evidence-based medicine, the limitations of evidence and the challenge of applying research findings to daily clinical practice Learning objective 30.5.1: Appraise support for an alleged causal association between a health effect and an exposure 	

DOMAIN 40	RESEARCH METHODS	
Theme 40.3	Analysis, Summary and Depiction of Data	STAGE B: Learning the ropes
Learning Objective 40.3.1	Discern the essence of a data set and summarise and present this in a meaningful and logical way	
Scope of learning required		
This is extremely important if you are going to make a useful contribution to everyone's knowledge. The concepts here may be tested by the written examination, but the prime purpose of this learning objective is to aid your research report.		

THEME 40.4: RESEARCH PRESENTATION

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics	
Nil	
Advanced Stage B: Learning the Ropes	
Nil	
Advanced Stage C: Approaching Consultancy	
40.4.1	Present research findings in a written form
40.4.2	Prepare and give a succinct oral presentation of an investigation

DOMAIN 40		RESEARCH METHODS
Theme 40.4	Research Presentation	STAGE C: Approaching consultancy
Learning Objective 40.4.1	Present research findings in a written form	
This was adapted from the RACP PQC, Learning objective 3.2.3		
Knowledge		Skills
<ul style="list-style-type: none"> describe the accepted format for scientific papers describe the process for preparing research for publication define referencing protocol discuss the need for insight sufficient to depict the truth and fairly interpret the findings of the study. 		<ul style="list-style-type: none"> present research data in written form, including: <ul style="list-style-type: none"> preparing research for publication using appropriate referencing and referencing software writing an abstract express ideas in a clear and interesting way prepare appropriate tables and graphs.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> simply doing it under guidance previous academic coursework in research methods guided instruction by physicians with a research background peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals authoritative websites preparing a poster. 		<ul style="list-style-type: none"> Learning objective 20.3.4: Compile a report of a workplace assessment that can be understood by people without scientific expertise
Scope of learning required		
<p>To do this you must be able to write succinctly and to convey clear meaning. Schools develop grammar, spelling and vocabulary to a lower level than once they did. If you consider that your writing skills need improvement, you should seek assistance to do this. There are courses in writing and also several slim texts on writing style and editing (the Table of Contents refers to a reference list).</p> <p>Achievement of this learning objective is tested by the satisfactory completion of the written report of your research project.</p>		

DOMAIN 40	RESEARCH METHODS	
Theme 40.4	Research Presentation	STAGE C: Approaching consultancy
Learning Objective 40.4.2	Prepare and give a succinct oral presentation of an investigation	
This was adapted from the RACP PQC, Learning objective 3.2.3		
Knowledge	Skills	
<ul style="list-style-type: none"> • explain the purpose of the presentation • identify the likely general interests of the group to whom it will be presented • recognise what will fit within the allotted time. 	<ul style="list-style-type: none"> • present research data in oral form, including: <ul style="list-style-type: none"> • presentation at Grand Rounds • Ramazzini presentation • enunciate clearly • use audiovisual aids effectively • respond appropriately to questions. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • presentation at trainee meetings • previous academic coursework in research methods • guided instruction by physicians with a research background • peer discussion about successful (or otherwise) approaches to similar problems. 	<ul style="list-style-type: none"> • Learning objective 61.5.3: Address an occupational or environmental issue at a meeting of more than a dozen interested people 	
Scope of learning required		
Achievement of this learning objective is tested at the Ramazzini presentation at the Annual Scientific Meeting, although you may find it helps to rehearse your presentation earlier with a more intimate audience.		

DOMAIN 50: WORKING WITH LEADERS

The themes in Domain 50 are:

- 50.1: Nature of organisations
- 50.2: Organisational factors affecting health and safety performance
- 50.3: Quality assurance
- 50.4: Managing and marketing an independent occupational health service within an organisation

THEME 50.1: NATURE OF ORGANISATIONS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics

Nil

Advanced Stage B: Learning the Ropes

- 50.1.1 Describe and distinguish the various forms of management within an organisation
- 50.1.2 Outline the purpose of government regulators, trade unions and special interest groups

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.1	Nature of Organisations	STAGE B: Learning the ropes
Learning Objective 50.1.1	Describe and distinguish the various forms of management within an organisation	
Knowledge		Skills
<ul style="list-style-type: none"> discuss the likely tasks, creative aspects and problem-solving requirements of: <ul style="list-style-type: none"> financial management human resource management management of change marketing policy development production program management strategic planning. 		<ul style="list-style-type: none"> interact with people in these management roles as an occupational health and safety professional work with leaders to achieve necessary health-relevant change.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework related to management aspects of occupational medicine guided instruction by those with managerial, human resources and industrial relations background authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 20.3.2: Describe the general principles of workplace assessment Learning objective 50.3.1: Describe the components of a process of quality assurance by continuous improvement within an organisation Learning objective 90.2.1: Assist planning for reduction of risks both in the prevention of an incident and the management of an incident should it occur
Scope of learning required		
In a large organisation, be sure you know broadly who is responsible for what.		

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.1	Nature of Organisations	STAGE B: Learning the ropes
Learning Objective 50.1.2	Outline the purpose of government regulators, trade unions and special interest groups	
Knowledge		Skills
<ul style="list-style-type: none"> define the purpose, spectrum, strengths and limitations of: <ul style="list-style-type: none"> disability support organisations environmental activist groups local government local single-issue community action groups state or federal government departments and their staff union representatives who visit or are employed in workplaces. 		<ul style="list-style-type: none"> meet, put reasonably at ease, listen to and communicate with people with a range of abilities discern the issues at stake in a disagreement and respond to the associated emotional concomitants observe the approach of a protagonist to a negotiation and be able to discern, as far as possible, what is important to that person.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework related to management aspects of occupational medicine guided instruction by those with managerial, human resources and industrial relations background peer discussion authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 61.4.4: Identify and address barriers to communication in a non-medical workplace Learning objective 70.2.1: Describe the process of reaching industrial agreements and their influence on health and safety Learning objective 90.3.3: Develop strategies to address varying stakeholder issues
Scope of learning required		
This will vary between Australia and New Zealand so that an examination question will explore your broad understandings of roles of organisations in the community and in occupational and environmental health.		

THEME 50.2: ORGANISATIONAL FACTORS AFFECTING HEALTH AND SAFETY PERFORMANCE

The sole learning objective within this theme is in Stage B.

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.2	Organisational Factors Affecting Health and Safety Performance	STAGE B: Learning the ropes
Learning Objective 50.2.1	Define and describe the effects of organisational factors on health and safety performance	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss factors influencing workplace culture • describe types of organisational structure • describe the components of a business plan and organisational objectives • discuss the broad economic factors that influence business and factors influencing allocation of resources within a business • discuss trends toward casual work, part-time work, employment of immigrants, employment through agency hire and contracting companies, outworkers, working from home and flexible working hours, and how this may affect occupational health and safety and issues such as consultation with workers, reporting of hazards, and reporting of injury. 		<ul style="list-style-type: none"> • analyse the behaviour and culture of organisations • interpret a business plan • conduct a SWOT (or related) analysis of an occupational health service.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • academic coursework related to management aspects of occupational medicine • guided instruction by those with managerial, human resources and industrial relations background • peer discussion • authoritative websites • interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> • Learning objective 20.2.5: Describe the potential health effects of common and important psychosocial hazards • Learning objective 30.6.1: Appraise interventions including strategies to improve adherence to protective measures • Learning objective 90.4.2: Develop plan to remediate the site
Scope of learning required		
<p>This learning objective is about the level of health and safety protection that can be achieved within an organisation and the strategy required to achieve it. To this it adds an understanding of organisational behaviour and organisational culture as groundwork for your later working with organisations as a consultant.</p>		

THEME 50.3: QUALITY ASSURANCE

The sole learning objective within this theme is in Stage B.

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.3	Quality Assurance	STAGE B: Learning the ropes
Learning Objective 50.3.1	Describe the components of a process of quality assurance by continuous improvement within an organisation	
Knowledge		Skills
<ul style="list-style-type: none"> describe different quality assurance processes and their strengths and weaknesses. 		<ul style="list-style-type: none"> interpret a quality assurance report and make recommendations for improvement.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework related to management aspects of occupational medicine guided instruction by those with managerial, human resources and industrial relations background peer discussion presenting at trainee meetings authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 62.1.1: Use evidence to inform quality improvement (in a treatment setting) Learning objective 62.2.1: Optimise safe work practice which minimises error (in a treatment setting) Learning objective 63.1.1: Participate in effective continuing professional and educational development
Scope of learning required		
<p>An examination would seek your knowledge of the ingredients for a process of continuing improvement – which, in fact, has much in common with learning – and your understanding of what makes a process effective and what barriers hamper it.</p>		

THEME 50.4: MANAGING AND MARKETING AN INDEPENDENT OCCUPATIONAL HEALTH SERVICE WITHIN AN ORGANISATION

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics	
Nil	
Advanced Stage B: Learning the Ropes	
50.4.1	Identify the health and safety needs of an organisation
50.4.2	Determine the goals of the occupational health service
Advanced Stage C: Approaching Consultancy	
50.4.3	Operate or work in close liaison with the person that operates the occupational health service
50.4.4	Develop a plan to market the occupational health service
50.4.5	Demonstrate how to manage professional liability risk for an occupational health service

DOMAIN 50		WORKING WITH LEADERS	
Theme 50.4		Managing and Marketing an Independent Occupational Health Service within an Organisation	STAGE B: Learning the ropes
Learning Objective 50.4.1		Identify the health and safety needs of an organisation	
Knowledge		Skills	
<ul style="list-style-type: none"> discuss the vision and goals of the organisation and how a health service can support these as distinct from existing simply as an isolated, special-purpose entity define the culture of the organisation in regard to health and safety identify sources of information about past significant events, including written and electronic records and interpersonal information within the organisation evaluate information from the relevant industry association and union (if available) recognise relevant laws, codes of practice and industry standards that apply discuss the effect management structure has on health and safety activity and the sort of changes that could foster improvement. 		<ul style="list-style-type: none"> anticipate the needs of an organisation based on its type and its culture discern what is needed by what goes on and what is unsaid as well as what is stated sift from a law or code of practice what is relevant to the situation at hand diagnose situations within organisations by interaction with people and by recognition of frailties in safety management. 	

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.4	Managing and Marketing an Independent Occupational Health Service within an Organisation	STAGE B: Learning the ropes
Learning Objective 50.4.1	Identify the health and safety needs of an organisation	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • academic coursework related to management aspects of occupational medicine • guided instruction by those with managerial, human resources and industrial relations background • peer discussion about successful (or otherwise) approaches to similar workplaces • authoritative websites • interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> • Theme 20.3: Assessment and control of work-related hazards • Theme 50.1: Nature of organisations • Theme 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment • Learning objective 80.2.1: Develop a rehabilitation policy at a workplace • Learning objective 90.1.4: Recognise and advise on health risks in the general environment arising from workplace activities
Scope of learning required		
<p>The term 'safety' is included in the learning objective although you are likely to have a deeper grounding in health than safety. Know of the existence of, for example, scaffolding standards and rules, but no detail will be required in the examination. As a professional seeking to act as a consultant to organisations, you will benefit from knowledge of contemporary literature on organisational culture, including consideration of organisational maturity.</p>		

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.4	Managing and Marketing an Independent Occupational Health Service within an Organisation	STAGE B: Learning the ropes
Learning Objective 50.4.2	Determine the goals of the occupational health service	
Knowledge	Skills	
<ul style="list-style-type: none"> identify the goals of similar, already-established occupational health and safety services elsewhere discuss the present situation and perceived needs including what is important and what is urgent discuss potential issues of acceptability and any need for a staged introduction of services offered. 	<ul style="list-style-type: none"> meet and discuss with the main stakeholders discern what is essential from what may be 'nice to have' refuse (and justify refusal) to undertake inappropriate activity, e.g. ill-based fitness for work assessments that appear to contravene equal employment opportunity law work as part of a team of occupational health and safety professionals. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework related to management aspects of occupational medicine guided instruction by those with managerial, human resources and industrial relations background peer discussion about successful (or otherwise) approaches to this issue presenting at trainee meetings authoritative websites simply doing it interaction with workers, unions, employers and insurers. 	<ul style="list-style-type: none"> Theme 20.3: Assessment and control of work-related hazards Theme 50.1: Nature of organisations Learning objective 69.2.1: Identify and define the determinants of health Learning objective 69.3.1: Adopt a population health approach to the prevention of illness, promotion of health and control of disease Theme 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment Learning objective 80.2.1: Develop a rehabilitation policy at a workplace Learning objective 90.1.4: Recognise and advise on health risks in the general environment arising from workplace activities 	
Scope of learning required		
The examination would ask the sort of activities that an occupational health service would undertake, its priorities and what determines them.		

DOMAIN 50		WORKING WITH LEADERS	
Theme 50.4	Managing and Marketing an Independent Occupational Health Service within an Organisation	STAGE C: Approaching consultancy	
Learning Objective 50.4.3	Operate or work in close liaison with the person that operates the occupational health service		
Knowledge		Skills	
<ul style="list-style-type: none"> identify relevant laws, standards, codes and guides define the steps in maintaining independence of an occupational health service describe the type of information technology that is required and how to source the expertise required to install and run it. 		<ul style="list-style-type: none"> gather an effective team and keep it effective by encouraging two-way coaching and feedback on performance negotiate and manage budgets set up an occupational health service sufficiently equipped at a suitable location maintain the independence of the service evaluate the performance and effectiveness of the service coordinate and manage occupational and environmental health and safety programs, including health surveillance implement effective change in the workplace negotiate and resolve conflict relating to occupational and environmental health and safety issues secure the cooperation of management, employees and colleagues in the provision of a safe and healthy workplace. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous relevant academic coursework guided instruction by an occupational physician guided instruction by those with managerial, human resources and industrial relations background peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals authoritative websites simply doing it interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Theme 20.3: Assessment and control of work-related hazards Theme 50.1: Nature of organisations Learning objective 69.3.1: Adopt a population health approach to the prevention of illness, promotion of health and control of disease Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment Learning objective 80.2.2: Implement and evaluate a rehabilitation program for an employer Learning objective 90.4.3: Oversee implementation of the remediation process 	
Scope of learning required			
At Stage C, you may operate just part of an occupational health service but you should strive to gather knowledge of all the external and internal influences that can make for success or failure.			

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.4	Managing and Marketing an Independent Occupational Health Service within an Organisation	STAGE C: Approaching consultancy
Learning Objective 50.4.4	Develop a plan to market the occupational health service	
Knowledge	Skills	
<ul style="list-style-type: none"> define the aims of the service or program explain the purpose of marketing state how to deliver what is offered define the process for formulating a marketing plan, budget, target groups and assessment of the effect of marketing recognise the need for a 'plan B' if the initial approach proves sub-optimal. 	<ul style="list-style-type: none"> discern important needs and problems and design the occupational health service or program to address these gain timely endorsement of people that have influence among intended clients. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by an occupational physician guided instruction by those with managerial, human resources and industrial relations background peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals authoritative websites interaction with workers, unions, employers and insurers. 	<ul style="list-style-type: none"> Learning objective 50.1.1: Describe and distinguish the various forms of management within an organisation Learning objective 68.3.1: Demonstrate an understanding of the necessary steps required to effect change within organisations and the community Learning objective 69.5.1: Demonstrate a basic understanding of the societal, political and economic pressures that influence the way funding is provided and used Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment Learning objective 80.2.2: Implement and evaluate a rehabilitation program for an employer 	
Scope of learning required		
Marketing is about easing fears and solving problems. Find out what these are and state (in the exam) how you would know.		

DOMAIN 50	WORKING WITH LEADERS	
Theme 50.4	Managing and Marketing an Independent Occupational Health Service within an Organisation	STAGE C: Approaching consultancy
Learning Objective 50.4.5	Demonstrate how to manage professional liability risk for an occupational health service	
Knowledge	Skills	
<ul style="list-style-type: none"> describe the types of risk involved discuss insurance options. 	<ul style="list-style-type: none"> anticipate likely risks. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous relevant academic coursework guided instruction by an occupational physician peer discussion about successful (or otherwise) approaches to similar problems authoritative websites. 	<ul style="list-style-type: none"> Sub-domain 61: Communication Learning objective 62.2.1: Optimise safe work practice which minimises error Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment Learning objective 70.3.1: Describe courts and their procedures 	
Scope of learning required		
List the likely risks and the sort of risk management and insurance options could be applied.		

DOMAIN 60: PROFESSIONAL QUALITIES

This domain contains eight sub-domains: 61, 62, 63, 64, 65, 67, 68 and 69. There is no Sub-domain 66.

Domain 60: Professional Qualities incorporates all of the RACP PQC except the research components that have been relocated in full into Domain 40, and the critical appraisal components that have been relocated in full into Domain 30. Most of the PQC appears in Stage A of the AFOEM curriculum document, but there are some parts more appropriately located in Stages B and C. In order to keep the section numbering consistent between the PQC and this AFOEM curriculum document, 'sub-domains' have been created here.

Sub-domain 61: Communication

The themes in Sub-domain 61 are:

- 61.1: Physician-patient communication
- 61.2: Communication with a third party, including the patient's employer or their family and/or carers
- 61.3: Communication with colleagues and the broader health care team
- 61.4: Communication with the broader community
- 61.5: The influencing of groups

THEME 61.1: PHYSICIAN-PATIENT COMMUNICATION

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Learning objectives 61.1.1 and 61.1.2 appear in both Stage A and Stage B.

Basic Stage A: The Basics

- 61.1.1 Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news
- 61.1.2 Empower patients and be respectful of their rights in all aspects of communication

Advanced Stage B: Learning the Ropes

- 61.1.1 Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news
- 61.1.2 Empower patients and be respectful of their rights in all aspects of communication

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.1	Physician-Patient Communication	STAGE A: The basics
Learning Objective 61.1.1	Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news	
Knowledge	Skills	
<ul style="list-style-type: none"> • describe the structure of an effective interview • discuss questioning and listening techniques • identify aspects of culture and language that may affect the communication encounter • identify aspects of condition, illness or medication that may hinder communication • identify aspects associated with age, disability, emotional or mental state that may affect the communication encounter • recognise lay terms for medical jargon 	<ul style="list-style-type: none"> • build rapport with the patient • communicate effectively with adolescents • listen actively by: <ul style="list-style-type: none"> • asking open-ended questions • attending to verbal and non-verbal cues • clarifying information provided by patient • clarifying patient’s understanding of information delivered • clarifying your patient’s expectations and your role in addressing these • making appropriate eye contact • give feedback to patient in an open and honest way • use body language appropriately • use various questioning techniques to elicit information from the patient 	
<ul style="list-style-type: none"> • recognise relevant cultural practices, e.g. importance of involving extended family for indigenous people • identify relevant translation services and practices. 	<ul style="list-style-type: none"> • describe complex medical conditions in a way in which the patient can understand, i.e. pitch language use at the level of the patient • convey and discuss information on risks and benefits of tests or treatment by: <ul style="list-style-type: none"> • being open and frank about uncertainty • being sensitive and check for understanding • expressing quantitative information clearly and avoiding bias • making information real and relevant • putting information into context • using multiple formats to increase understanding • apply quality and safety guidelines to all communication encounters, including communicating risk, open disclosure, and obtaining consent • manage time pressures, environment, and personal factors which may affect communication • close a consultation appropriately • source further information for patients • maintain accurate, adequate and comprehensible medical records. 	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.1	Physician-Patient Communication	STAGE A: The basics
Learning Objective 61.1.1	Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflective application of basic medical knowledge • textbook reading • presenting and discussing cases with peers • filming consultations. 		<ul style="list-style-type: none"> • Theme 64.1: Cultural competency • Theme 65.1: Professional ethics • Further skills and areas of knowledge are added to this learning objective in Stage B.
Scope of learning required		
You should be able to do this well. It requires a great deal of practice in varied clinical situations.		

DOMAIN 60	PROFESSIONAL QUALITIES	
Theme 61.1	Physician-Patient Communication	Sub-domain 61: Communication STAGE B: Learning the ropes
Learning Objective 61.1.1	Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> • identify aspects of culture and language that may affect communication • define complaint and independent review procedures • discuss the emotional dimensions of communication, including counter-transference and emotional involvement • discuss scenarios where information may be withheld. 	<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> • overcome obstacles to communication, using an interpreter or technology where necessary, to facilitate effective communication • clarify the particular role of an occupational physician • put risk information into context, e.g. occupational risk as compared with general population risk • convey information regarding the effect of work on health and vice versa • support a patient in distress, especially when breaking bad news • manage one's own emotional reaction to information and situations and promote effective communication • manage patient follow-up (further consultation and/or written communication) • reflect on and manage patient complaints • communicate with supervisors/managers occupational health and safety personnel and return to work coordinators verbally and in writing • communicate occupation-specific matters to the patient, such as: <ul style="list-style-type: none"> • bad news such as lack of fitness to continue in a role, e.g. driving • obligations of both doctor and patient under the law, e.g. law concerning rail safety • purpose of a medical review • third-parties who expect to receive information about a medical review. 	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.1	Physician-Patient Communication	STAGE B: Learning the ropes
Learning Objective 61.1.1	Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflective application of basic medical knowledge • textbook reading • presenting and discussing cases with peers. 		<ul style="list-style-type: none"> • Learning objective 20.2.5: Describe the potential health effects of common and important psychosocial hazards • Learning objective 20.5.2: Deal with the human and political factors that accompany events such as clusters or outbreaks • Learning objective 61.1.2: Empower patients and be respectful of their rights in all aspects of communication • Learning objective 61.2.1: Apply communication skills in encounters with a third party, including a patient’s employer or family (including extended family) and/or carers • Theme 64.1: Cultural competency • Learning objective 80.1.6: Discuss with a patient the implications for employment of medication and convalescence from procedures
Scope of learning required		
You should be able to do this well. It is tested widely in both written and practical examinations.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.1	Physician-Patient Communication	STAGE A: The basics
Learning Objective 61.1.2	Empower patients and be respectful of their rights in all aspects of communication	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss the right to be involved in decision making to the extent that the patient feels comfortable • identify, and explain how to access, interpretative services • recognise a patient's right to confidentiality, even when using an interpreter • recognise a patient's right to be given accurate, appropriate, unbiased information about the risks and benefits of test and treatment options • describe methods for maximising effective communication with patients regarding the reasoning behind clinical recommendations • recognise legal and ethical requirements for obtaining consent from patients. 		<ul style="list-style-type: none"> • identify level of health literacy in the patient, and help educate the patient accordingly • identify and manage communication barriers with patients who: <ul style="list-style-type: none"> • have a different cultural background • have a learning disability • have poor health literacy • have poor literacy or numeracy • have visual or hearing impairments • speak a different language • apply the legal and ethical requirements for obtaining consent from patients • determine information that is relevant to the patient and convey this in a way they can understand • describe clearly the risks and benefits in context, and acknowledge any uncertainty • respect patients who withdraw consent.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflective application of basic medical knowledge • filming consultations. 		<ul style="list-style-type: none"> • Theme 64.1: Cultural competency • Theme 65.1: Professional ethics <p>Further skills and areas of knowledge are added to this learning objective in Stage B.</p>
Scope of learning required		
You should be able to do this well. It requires a great deal of practice in clinical settings.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.1	Physician-patient Communication	STAGE B: Learning the ropes
Learning Objective 61.1.2	Empower patients and be respectful of their rights in all aspects of communication	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> discuss the risks and benefits associated with different courses of action and their degree of certainty or uncertainty. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> identify a patient's preferred decision-making approach to a situation and respond appropriately.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 65.1.1: Demonstrate ability to apply an ethical framework in clinical practice
Scope of learning required		
You should be able to do this well. This requires much practice in a clinical setting.		

THEME 61.2: COMMUNICATING WITH A THIRD PARTY, INCLUDING THE PATIENT’S EMPLOYER OR THEIR FAMILY AND/OR CARERS

The sole learning objective within this theme, 61.2.1, appears in both Stage A and Stage B.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.2	Communication with a Third Party, Including the Patient’s Employer or Their Family and/or Carers	STAGE A: The basics
Learning Objective 61.2.1	Apply communication skills in encounters with a third party, including a patient’s employer or family (including extended family) and/or carers	
Knowledge		Skills
<ul style="list-style-type: none"> describe the role of the significant other in managing the chronically ill patient recognise legal and ethical requirements for obtaining consent by family or carer on behalf of patient recognise legal and ethical requirements for discussions about health management of the patient with the family or carers recognise specific issues of confidentiality in this situation explain how to involve family or carer in an effective interview describe aspects of culture and language that may affect the communication encounter, e.g. importance of extended family recognise lay terms for medical terminology discuss the importance of negotiation to enable seeing young people alone. 		<ul style="list-style-type: none"> identify significant others and determine their relationship to the patient and each other identify the role of significant other people and determine the need for these people to be involved, e.g. supervisors, occupational health and safety personnel and return-to-work coordinators obtain consent from the patient to share information with significant others or to have them present manage time pressures, environment, and personal factors that may affect communication transmit appropriate and relevant information to third parties, including employers and their representatives and the patient’s family and/or carers.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflective application of basic medical knowledge filming consultations. 		<ul style="list-style-type: none"> Theme 64.1: Cultural competency Theme 65.1: Professional ethics <p>Further skills and areas of knowledge are added to this learning objective in Stage B.</p>
Scope of learning required		
<p>This learning objective most directly applies to interactions based in hospitals or community treating clinics. However, the principles behind it, i.e. which third parties should receive what information and when, may be applied across the spectrum of occupational medical practice. The ability to obtain consent from patients to share information with significant others is particularly important in occupational medicine where third party involvement is common.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.2	Communication with a Third Party, Including the Patient's Employer or Their Family and/or Carers	STAGE B: Learning the ropes
Learning Objective 61.2.1	Apply communication skills in encounters with a third party, including a patient's employer or family (including extended family) and/or carers	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> • discuss scenarios where information may be withheld • describe complaint and independent review procedures • explain how to facilitate communication, where appropriate, between a young person and their parents/guardians around difficult issues and decide with them which issues to discuss with parents/guardians. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> • develop the ability to support a patient's family or carer if they are in distress, especially when breaking bad news • manage alternative and conflicting views from significant others • manage a consultation involving a third party, such as employer, in conflict with an employee • manage dissatisfied employers or their representatives • manage dissatisfied families who may be affected by your involvement in a case. In occupational medicine, your decisions can have significant financial impacts on a family • obtain a collaborative history • work effectively as part of an occupational health and safety team that may include risk engineers, occupational hygienists, ergonomists, occupational health nurses, and environmental scientists.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> • Theme 64.1: Cultural competency • Theme 65.1: Professional ethics
Scope of learning required		
<p>This objective most directly applies to interactions based in hospitals or community treating clinics. However, the principles behind it, i.e. which third parties should receive what information and when, may be applied across the spectrum of occupational medical practice.</p>		

THEME 61.3: COMMUNICATION WITH COLLEAGUES AND THE BROADER HEALTH CARE TEAM

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objectives 61.3.1 and 61.3.4 appear in both Stage A and Stage C.

Learning objectives 61.3.2 and 61.3.3 appear in both Stage A and Stage B.

Basic Stage A: The Basics

- 61.3.1 Communicate effectively within multidisciplinary teams
- 61.3.2 Communicate effectively with referring doctors, and when referring a patient to another specialist
- 61.3.3 Apply communication skills to facilitate effective clinical handover and transfer of care
- 61.3.4 Communicate effectively with health administration

Advanced Stage B: Learning the Ropes

- 61.3.2 Communicate effectively with referring doctors, and when referring a patient to another specialist
- 61.3.3 Apply communication skills to facilitate effective clinical handover and transfer of care

Advanced Stage C: Approaching Consultancy

- 61.3.1 Communicate effectively within multidisciplinary teams
- 61.3.4 Communicate effectively with health administration

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE A: The basics
Learning Objective 61.3.1	Communicate effectively within multidisciplinary teams	
Knowledge	Skills	
<ul style="list-style-type: none"> • discuss the effect of legal, policy and ethical considerations in communicating within the team • discuss the role of the team in health care management, including: <ul style="list-style-type: none"> • the components of effective teamwork • the skill set and contribution of team members. 	<ul style="list-style-type: none"> • communicate clinical reasoning via case notes, letters, discharge summaries and oral case presentation that facilitate understanding by other clinicians of the writer's reasoning and intended clinical actions • manage time pressures, environment and personal factors that may affect communication • use teamwork: <ul style="list-style-type: none"> • to enhance patient outcomes • to set achievable patient management goals • give clear verbal and written communication • communicate in written and verbal formats with relevant employers, return to work coordinators and insurers. 	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE A: The basics
Learning Objective 61.3.1	Communicate effectively within multidisciplinary teams	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> Theme 64.1: Cultural competency Theme 65.1: Professional ethics <p>Further skills and areas of knowledge are added to this learning objective in Stage C.</p>
Scope of learning required		
You should be able to do this well. The concept of ‘who should know what and when’ is very important when various experts with different skills are involved in an episode of care or the management of a situation.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE C: Approaching consultancy
Learning Objective 61.3.1	Communicate effectively within multidisciplinary teams	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage C should include:</p> <ul style="list-style-type: none"> describe the role of the team in health care management, including the barriers to effective teamwork. 		<p>In addition to skills gained in Stage A, skills in Stage C should include:</p> <ul style="list-style-type: none"> communicate effectively to workers, unions, management and OHS staff on all relevant occupational health areas for an organisation coordinate a team, including a health team of nurses and allied health professionals in an occupational health unit demonstrate ability to detail obligations of parties under the law, e.g. relevant occupational health and safety issues identify and mediate differences between the expectations of employers, supervisors, return-to-work coordinators and patients initiate difficult conversations, such as those regarding performance

DOMAIN 60	PROFESSIONAL QUALITIES		Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team		STAGE C: Approaching consultancy
Learning Objective 61.3.1	Communicate effectively within multidisciplinary teams		
		<ul style="list-style-type: none"> • manage barriers to effective communication within teams • use conflict resolution skills to facilitate team interactions. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> • Theme 64.1: Cultural competency • Theme 65.1: Professional ethics 	
Scope of learning required			
<p>You should be able to do this well. The concept of ‘who should know what and when’ is very important when various experts with different skills are involved in an episode of care or the management of a situation.</p> <p>In occupational medicine, there is nearly always a third party, e.g. employer, insurance agent, involved in some aspect of your interaction with the patient as the referring party or as your employer. Skills are required to communicate appropriately and effectively to these parties since it can significantly influence health, social and financial outcomes for your patient. Your understanding of the structure of the organisation, and the roles of people with whom you are interacting, is key to transmitting the appropriate information to the various stakeholders in a timely manner.</p>			

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE A: The basics
Learning Objective 61.3.2	Communicate effectively with referring doctors, and when referring a patient to another specialist	
Attitudes	Respect patient confidentiality Respect the role of the referring doctor in patient care	
Knowledge		Skills
<ul style="list-style-type: none"> define the components of an effective referral letter. 		<ul style="list-style-type: none"> establish rapport with referring doctors interpret information within a referral letter recognise information that needs enhancement or clarification.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> Theme 65.1: Professional ethics Learning objective 80.1.5: Prepare and implement a return to work or rehabilitation plan for an employee <p>Further skills and areas of knowledge are added to this learning objective in Stage B.</p>
Scope of learning required		
The skills required here are anticipation and understanding of what another health professional needs to know in order to be effective in their part of a person's care.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE B: Learning the ropes
Learning Objective 61.3.2	Communicate effectively with referring doctors, and when referring a patient to another specialist	
Attitudes	Respect patient confidentiality Respect the role of the referring doctor in patient care	
Knowledge		Skills
As for Stage A.		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> recognise occupational factors relevant to illness that need enhancement or clarification write a timely letter containing a clear opinion back to the referring doctor write an effective referral letter.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> Theme 65.1: Professional ethics
Scope of learning required		
<p>The skills required here are anticipation and understanding of what another health professional needs to know in order to be effective in their part of a person's care.</p> <p>You should not assume that other health professionals, including medical specialists, will reliably perceive the effect of health conditions on safety at work. Therefore, it is often important to provide additional detail in referral letters or to personally discuss relevant occupational health and safety factors with a patient's treating health professionals.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE A: The basics
Learning Objective 61.3.3	Apply communication skills to facilitate effective clinical handover and transfer of care	
Knowledge		Skills
<ul style="list-style-type: none"> describe the elements of communication required for safe and effective transfer of care between: <ul style="list-style-type: none"> different care institutions hospital and home inpatient and outpatient doctors medical and non-medical caregivers medical professionals within an institution primary and secondary care doctors describe communication factors affecting continuity of care. 		<ul style="list-style-type: none"> demonstrate skills in: <ul style="list-style-type: none"> email and internet use and, where applicable, electronic discharge summaries and prescribing identification of self, date, time on all written communications legible handwriting mouse and keyboard use verbal skills over the telephone and during a handover meeting voice dictation and electronic communication prioritise and communicate information on medical problems and disease severity when handing over the care of a patient to a colleague in various clinical situations, including: <ul style="list-style-type: none"> inter-service transfers repatriation to/from overseas transfers between specialties.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> Theme 64.1: Cultural competency Theme 65.1: Professional ethics <p>Further skills and areas of knowledge are added to this learning objective in Stage B.</p>
Scope of learning required		
<p>Although this objective is written with a strong emphasis on hospital-based practice, you should draw from it the type of skills that may be required when an injured patient is being transferred from a remote site or when procedures are taken over by another member of the health care team within your practice.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE B: Learning the ropes
Learning Objective 61.3.3	Apply communication skills to facilitate effective clinical handover and transfer of care	
Knowledge		Skills
As for Stage A.		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> • write a return to work plan and communicate this to all relevant parties • coordinate medical aspects of care with other professionals towards attaining these tasks • keep patients and significant others informed of progress towards this plan • write a discharge plan identifying relevant tasks to be completed before discharge in a timely manner.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> • Theme 64.1: Cultural competency • Theme 65.1: Professional ethics
Scope of learning required		
<p>Although this objective is written with a strong emphasis on hospital-based practice, you should draw from it the type of skills that may be required when an injured patient is being transferred from a remote site or when procedures are taken over by another member of the health care team within your practice.</p> <p>You should know how to gain access and present relevant material to rehabilitation coordinators and those responsible within a workplace for monitoring injured workers in return-to-work programs.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE A: The basics
Learning Objective 61.3.4	Communicate effectively with health administration	
Knowledge		Skills
<ul style="list-style-type: none"> discuss the health administration system, its structures and governance arrangements, and its interaction with employer-based health management systems discuss the importance of communication at this level to support physician-patient, multidisciplinary team and other communication. 		<ul style="list-style-type: none"> communicate effectively and in timely manner with health managers and employers.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> Theme 65.1: Professional ethics Theme 68.1: Advocacy for the patient <p>Further skills and areas of knowledge are added to this learning objective in Stage C.</p>
Scope of learning required		
<p>Here, it is important to discern what the health administration wants to know and what they have a right to know. Particularly sensitive issues will be events that will cost a lot of money, that may require significant re-allocation of staff, or that could be publicly embarrassing if not dealt with in a timely way. Administrators can handle bad news but are likely to be testy if faced with nasty surprises that others have observed to be occurring but have failed to communicate.</p> <p>In the practice of occupational medicine, you are likely to be communicating with the occupational health team within an organisation. This will involve providing information on individual patients and possibly larger groups of employees where there may be a significant effect on the organisation financially and culturally. You need to be aware of your professional and ethical responsibilities in the context of working for or providing advice to organisations, and understand your role if you are part of an organisation's management team. This can bring competing pressures which you need to be aware.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.3	Communication with Colleagues and the Broader Health Care Team	STAGE C: Approaching consultancy
Learning Objective 61.3.4	Communicate effectively with health administration	
Knowledge		Skills
As for Stage A.		<p>In addition to skills gained in Stage A, skills in Stage C should include:</p> <ul style="list-style-type: none"> • communicate effectively with policy makers • identify structural barriers to communication • involve health managers as part of a multidisciplinary team to obtain resources, data and access to services for better patient outcomes.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by physicians • simulations or role plays • reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> • Theme 65.1: Professional ethics • Theme 68.1: Advocacy for the patient <p>Already, skills and areas of knowledge were added to this learning objective in Stage A.</p>
Scope of learning required		
The scope of learning is as detailed for this learning objective in Stage A.		

THEME 61.4: COMMUNICATION WITH THE BROADER COMMUNITY

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Learning objective 61.4.1 appears in both Stage A and Stage B.

Learning objective 61.4.2 appears in all three stages

Basic Stage A: The Basics	
61.4.1	Communicate effectively with support organisations, administrative bodies, governments, and others in the wider community
61.4.2	Demonstrate the ability to apply specific medico-legal communication practices
Advanced Stage B: Learning the Ropes	
61.4.2	Demonstrate the ability to apply specific medico-legal communication practices
61.4.3	Describe the ethical and legal constraints on communicating medical information to a third party
61.4.4	Identify and address barriers to communication in a non-medical workplace
Advanced Stage C: Approaching Consultancy	
61.4.1	Communicate effectively with support organisations, administrative bodies, governments, and others in the wider community
61.4.2	Demonstrate the ability to apply specific medico-legal communication practices

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE A: The basics
Learning Objective 61.4.1	Communicate effectively with support organisations, administrative bodies, governments, and others in the wider community	
Knowledge		Skills
<ul style="list-style-type: none"> identify relevant agencies and the services they provide discuss the cost of accessing services discuss requirements of compensation insurers in relation to information and the power of the signed claim form. 		<ul style="list-style-type: none"> facilitate communication with such organisations on behalf of the patient define the limits of your involvement manage the ethical issues of the two roles of communication with patient and communication with external agencies.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by physicians simulations or role plays reflection on situations where communication was untimely, ambiguous or inadequate. 		<ul style="list-style-type: none"> Theme 65.1: Professional ethics Theme 67.2: Leadership and management of others Theme 68.1: Advocacy for the patient <p>Further skills and areas of knowledge are added to this learning objective in Stage C.</p>

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE A: The basics
Learning Objective 61.4.1	Communicate effectively with support organisations, administrative bodies, governments, and others in the wider community	

Scope of learning required

This may enter the realm of advocacy and so requires you to define the limits of your role as a doctor in a particular situation. Although comprehensive care for an individual patient may be linked to a broader public health issue, be aware that taking on two roles may have ethical implications. You should be clear in your own mind the fair limits of what (if anything) you should communicate to an insurer, a patient support group, a lawyer, or a social security organisation. It can be unhelpful to your patient to be too parsimonious, but it can be unethical to extend communication with such third parties beyond what is needed for the purpose at hand. Examples of where this caution may be relevant are rules for notification of driving capacity or obligations of doctors under injury compensation law.

If you plan to direct a patient down a particular path of care, be reasonably aware of the implications of this in terms of likely cost, duration, the capacity of the patient (and others close who are likely to be involved) to adhere to what is involved.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE C: Approaching consultancy
Learning Objective 61.4.1	Communicate effectively with support organisations, administrative bodies, governments, and others in the wider community	

Knowledge

In addition to knowledge gained in Stage A, knowledge in Stage C should include:

- discuss effective communication strategies for working with the media.

Skills

In addition to skills gained in Stage A, skills in Stage C should include:

- manage communication with the media.

Suggested ways to learn

- guided instruction by physicians
- simulations or role plays
- reflection on situations where communication was untimely, ambiguous or inadequate
- media training.

Links to other parts of the curriculum

- Theme 65.1: Professional ethics
- Theme 67.2: Leadership and management of others
- Theme 68.1: Advocacy for the patient

Scope of learning required

See the 'scope' requirement for this learning objective in Stage A.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE A: The basics
Learning Objective 61.4.2	Demonstrate the ability to apply specific medico-legal communication practices	
Knowledge		Skills
<ul style="list-style-type: none"> recognise relevant state, hospital and workplace policies and guidelines describe open disclosure guidelines discuss access rights to confidential medical records describe the special reporting requirements of a medical examination performed on behalf of a third party. 		<ul style="list-style-type: none"> source information and prepare specific medico-legal communication, including: <ul style="list-style-type: none"> letter of support on behalf of the patient police statement reports for insurers and other relevant third parties.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health guided instruction by occupational physicians interaction with workers, unions, employers and insurers. 		<p>Further areas of knowledge are added to this learning objective in Stage B.</p> <p>Further skills are added to this learning objective in Stage C.</p>
Scope of learning required		
You should do this well.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE B: Learning the ropes
Learning Objective 61.4.2	Demonstrate the ability to apply specific medico-legal communication practices	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> describe the procedure for obtaining consent for the release of confidential medical records and images to a third party recognise relevant health/medical legislation identify when witnesses are required, and who can be a witness. 		As for Stage A.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health guided instruction by occupational physicians interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 70.3.2: Prepare a medical report for the purposes of a legal process <p>Further skills are added to this learning objective in Stage C.</p>
Scope of learning required		
You should do this well.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	Stage C: Approaching consultancy
Learning Objective 61.4.2	Demonstrate the ability to apply specific medico-legal communication practices	
Knowledge		Skills
As for Stages A and B.		<p>In addition to skills gained in Stage A, skills in Stage C should include:</p> <ul style="list-style-type: none"> source information and prepare specific medico-legal communication, including: <ul style="list-style-type: none"> expert opinion report giving evidence in court preparing an opinion for the community advocate or guardianship tribunal give an objective and considered opinion.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health guided instruction by occupational physicians reading reports, with appropriate confidentiality precautions, written by others interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 20.3.4: Compile a report of a workplace assessment that can be understood by people without scientific expertise
Scope of learning required		
You should do this well.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE B: Learning the ropes
Learning Objective 61.4.3	Describe the ethical and legal constraints on communicating medical information to a third party	
Knowledge		Skills
<ul style="list-style-type: none"> describe the special reporting requirements of a medical examination performed on behalf of a third party, including presentation of information to lawyers and insurers. 		<ul style="list-style-type: none"> explain to a worker the purpose of the examination and the reporting arrangements, and seek consent to proceed.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health guided instruction by occupational physicians interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 65.1.1: Demonstrate ability to apply an ethical framework in clinical practice
Scope of learning required		
You should do this well.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.4	Communication with the Broader Community	STAGE B: Learning the ropes
Learning Objective 61.4.4	Identify and address barriers to communication in a non-medical workplace	
Knowledge		Skills
<ul style="list-style-type: none"> differentiate between objective and subjective arguments discuss ways in which messages may be distorted. 		<ul style="list-style-type: none"> test comprehension of messages transmitted to people at all levels within an organisation.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health guided instruction by occupational physicians guided instruction by those with managerial, human resources and industrial relations background interaction with workers, unions, employers and insurers simulations or role plays where a person acting as a line manager has a different imperative to the trainee (taking the role of occupational physician) in regard to, say, a preventive activity or return to work. The issue is recognising the different perspective and overcoming the barrier that it creates simulated or de-identified letter written by a doctor to an employer with analysis of how the wording, timing or extent of this communication may assist or hinder the doctor's aims. 		<ul style="list-style-type: none"> Learning objective 20.2.5: Describe the potential health effects of common and important psychosocial hazards Learning objective 20.3.4: Compile a report of a workplace assessment that can be understood by people without scientific expertise Learning objective 20.5.1: Investigate an outbreak of an acute disorder, such as an infectious disease, or an apparent cluster of disease cases or symptom complaints
Scope of learning required		
<p>You should imagine various different workplace situations of conflict, disagreement or failure to achieve an outcome, and apply communication in its various forms to overcome the difficulty. Semi-scripted role plays with peers can be useful ways to gain different views. You may be asked to demonstrate these skills in the written paper, and in the history-taking and exhibit-based assessments of the practical examination. Pre-examination practice is an imperative.</p>		

THEME 61.5: THE INFLUENCING OF GROUPS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objectives 61.5.1 appear in both Stage B and Stage C.

Basic Stage A: The Basics

Nil

Advanced Stage B: Learning the Ropes

61.5.1 Demonstrate understanding of the modalities of influence within an organisation

Advanced Stage C: Approaching Consultancy

61.5.1 Demonstrate understanding of the modalities of influence within an organisation

61.5.2 Present a 'toolbox talk' to a group of workers

61.5.3 Address an occupational or environmental issue at a meeting of more than a dozen interested people

61.5.4 Offer expert evidence to a government or judicial inquiry on an occupational or environmental issue

61.5.5 Participate effectively as a member or chairperson of a committee

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.5	The Influencing of Groups	STAGE B: Learning the ropes
Learning Objective 61.5.1	Demonstrate understanding of the modalities of influence within an organisation	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss common styles of influencing others • recognise the hierarchy within an organisation and its impact on how programs are initiated or stopped • discuss the politics within organisations • recognise the use of law as a lever for change • discuss industrial relations and the influence of unions. 		<ul style="list-style-type: none"> • engage individuals and groups in organisational change • identify individuals within a group who have the ability to initiate and drive effective change • gain consensus amongst decision makers.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by occupational physicians • interaction with workers, unions, employers and insurers • interaction with managerial training programs. 		<ul style="list-style-type: none"> • Theme 50.1: Nature of organisations
Scope of learning required		
Theory with some demonstration at a practical level would be examined at Stage B. Demonstration of effectiveness would be sought by end of Stage C.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.5	The Influencing of Groups	Stage C: Approaching consultancy
Learning Objective 61.5.1	Demonstrate understanding of the modalities of influence within an organisation	
Knowledge	Skills	
<p>In addition to knowledge gained in Stage B, knowledge in Stage C should include:</p> <ul style="list-style-type: none"> • discuss individual and social factors that commonly lead to acceptance or rejection of a new procedure • identify the important stakeholders and the situations where the recommendations are to be made • recognise the fate of prior similar initiatives in this workplace or environment • discuss major theories of personal interaction used to initiate and reinforce change. 	<p>In addition to skills gained in Stage B, skills in Stage C should include:</p> <ul style="list-style-type: none"> • discern the values of those involved • encourage or stimulate action without unduly engendering fear • take account of the emotional aspects of an issue as well as what is rational to do or not • write a report in a planned, organised and persuasive way, using language that is appropriate for the intended readers of the report. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • academic coursework in management aspects of occupational health • guided instruction by occupational physicians • guided instruction by those with managerial, human resources and industrial relations background • peer discussion about successful (or otherwise) approaches to similar issues • presenting at trainee meetings • simply doing it • interaction with workers, unions, employers and insurers • interaction with managerial training programs. 	<ul style="list-style-type: none"> • Learning objective 20.3.5: Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues • Learning objective 30.6.1: Appraise interventions including strategies to improve adherence to protective measures • Learning objective 40.4.2: Prepare and give a succinct oral presentation of an investigation • Theme 50.1: Nature of organisations 	
Scope of learning required		
<p>At Stage B, this objective may have already been met where perhaps the level, depth and quality of advice given would be limited to a single work process or a single harmful agent. However, by Stage C, you would be expected to take account of various processes in a complex workplace and how they interact.</p> <p>At Stage B, you would be expected to apply recommendations to a single program, e.g. use of respirators, as distinct from making a plan for the integrated approach of hazard control across a whole workplace. These circumscribed recommendations should be consistent with the hierarchy of control together with what was appropriate in the workplace as a whole.</p> <p>You should work toward a high level of ability in this. Presentation skill may have been tested in Stage B as part of an OSCE in the practical examination as a simulated meeting with an employer. It will also be tested in the Ramazzini presentations.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.5	The Influencing of Groups	Stage C: Approaching consultancy
Learning Objective 61.5.2	Present a 'toolbox talk' to a group of workers	
Knowledge		Skills
<ul style="list-style-type: none"> discuss methods by which people may learn new behaviours or adjust to new situations. 		<ul style="list-style-type: none"> take account of likely influences of ethnicity or organisational culture, e.g. a group of construction workers compared with a group of immigrant women involved in cleaning activities speak coherently and fluently in language that is as plain as the technical circumstances will permit seek feedback in ways that indicate the likely nature and extent of learning, e.g. by presenting a likely scenario and finding out what the group would do.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by an occupational physician guided instruction by those with managerial, human resources and industrial relations background peer discussion presenting at trainee meetings guiding trainees in Stages A and B authoritative websites simply doing it interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 20.3.5: Anticipate likely hazards at a workplace and, after inspection there, relate and make persuasive recommendations on the important issues
Scope of learning required		
<p>You should work toward a high level of ability in this area. Presentation skill may have been tested in Stage B as part of an OSCE in the practical examination as a simulated meeting with an employer. It will also be tested in the presentation of research projects (Ramazzini).</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.5	The Influencing of Groups	STAGE C: Approaching consultancy
Learning Objective 61.5.3	Address an occupational or environmental issue at a meeting of more than a dozen interested people	
Knowledge		Skills
<ul style="list-style-type: none"> discuss emotional drivers of activism. 		<ul style="list-style-type: none"> speak coherently and fluently in language that is as plain as the technical circumstances will permit.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by an occupational and environmental physician guided instruction by a person in public life or with a media background peer discussion presenting at trainee meetings. 		<ul style="list-style-type: none"> Learning objective 30.5.1: Appraise support for an alleged causal association between a health effect and an exposure Learning objective 90.1.2: Describe how environmental risk is assessed and perceived Learning objective 90.1.3: Describe the process of development of environmental standards for hazards arising from workplaces Learning objective 90.3.3: Develop strategies to address varying stakeholder issues
Scope of learning required		
<p>If this opportunity does not arise during the training period, it should at least be simulated. Presentation skill may have been tested in Stage B as part of an OSCE in the practical examination as a simulated meeting with an employer. It will also be tested in the Ramazzini presentations.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.5	The Influencing of Groups	STAGE C: Approaching consultancy
Learning Objective 61.5.4	Offer expert evidence to a government or judicial inquiry on an occupational or environmental issue	
Knowledge		Skills
<ul style="list-style-type: none"> define the terms of reference for the inquiry and any associated guidance material identify appropriate sources of information used to build and support the evidence given discuss appropriate styles of presentation. 		<ul style="list-style-type: none"> explain issues in language that is as plain as the technical circumstances will permit cope with verbal challenges to one's degree of expertise.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by an occupational and environmental physician guidance from person with government or relevant public service background peer discussion presenting at trainee meetings simply doing it. 		<ul style="list-style-type: none"> Learning objective 30.5.1: Appraise support for an alleged causal association between a health effect and an exposure Learning objective 61.4.1: Communicate effectively with support organisations, administrative bodies, governments and others in the wider community
Scope of learning required		
If this opportunity does not arise during the training period, it should at least be simulated. The skill of proffering expert opinion in writing will be tested in the communication portfolio.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 61.5	The Influencing of Groups	Stage C: Approaching consultancy
Learning Objective 61.5.5	Participate effectively as a member or chairperson of a committee	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss the importance of good preparation • define the rules of meeting procedure • discuss causes of conflict and the principles of conflict resolution. 		<ul style="list-style-type: none"> • recognise the essence of an issue • summarise discussions • record minutes in a form that leads to appropriately directed action • respond sensitively, although not obsequiously, to people from different cultural backgrounds.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by an occupational physician • peer discussion about successful (or otherwise) approaches to similar problems • presenting at trainee meetings • guiding trainees in Stages A and B • authoritative websites • simply doing it • interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> • Theme 50.1: Nature of organisations • Learning objective 61.4.1: Communicate effectively with support organisations, administrative bodies, governments and others in the wider community
Scope of learning required		
Presentation skill may have been tested in Stage B as part of an OSCE in the practical examination as a simulated meeting with an employer. Such simulation may have also involved management of anger.		

Sub-domain 62: Quality and safety

The themes in Sub-domain 62 are:

62.1: Use of evidence and information

62.2: Safe practice

62.3: Identification, prevention and management of potential harm

THEME 62.1: USE OF EVIDENCE AND INFORMATION

The sole learning objective within this theme is in Stage A.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 61: Communication
Theme 62.1	Use of Evidence and Information	STAGE A: The basics
Learning Objective 62.1.1	Use evidence to inform quality improvement	
Knowledge		Skills
<ul style="list-style-type: none"> discuss quality improvement methodology and the quality improvement cycle identify information and technology tools available for preventing errors. 		<ul style="list-style-type: none"> apply quality improvement methodology determine how applicable the evidence is to an individual patient use technology to access material to inform quality improvement make evidence available to co-workers and patients.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health books, including those by James Reason guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		<ul style="list-style-type: none"> Learning objective 50.3.1: Describe the components of a process of quality assurance by continuous improvement within an organisation
Scope of learning required		
<p>Ideas and technologies from areas like aviation, mining and sport are being adapted to the medical arena. You need to be aware of current developments and the ways that they are likely to affect practice. This learning objective comes from the RACP PQC and so its words are weighted toward hospital practice. The main ideas apply to any medical practice.</p>		

THEME 62.2: SAFE PRACTICE

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objective 62.2.1 appears in all three stages.

Learning objective 62.2.3 appears in Stage A and Stage B.

Basic Stage A: The Basics

62.2.1 Optimise safe work practice which minimises error

62.2.2 Facilitate safe prescribing and administration of medication and display an understanding of the associated error types, causes, and risks

62.2.3 Promote safe continuity of care for patients

Advanced Stage B: Learning the Ropes

62.2.1 Optimise safe work practice which minimises error

62.2.3 Promote safe continuity of care for patients

Advanced Stage C: Approaching Consultancy

62.2.1 Optimise safe work practice which minimises error

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE A: The basics
Learning Objective 62.2.1	Optimise safe work practice which minimises error	
Knowledge		Skills
<ul style="list-style-type: none"> describe the components of safe working environments and cultures in relation to safety of patients discuss work organisation, including how it works and interrelationships of its rules, regulations, policies, governance and structure discuss the importance of clear goals and objectives for the health care team describe the role of out-of-hours teams in improving patient care describe the role that the work environment plays in human errors outline the steps involved in the patient verification process to avoid misidentification discuss factors that can reduce misidentification. 		<ul style="list-style-type: none"> ensure team members understand their personal and collective responsibility for the safety of patients follow verification procedures to ensure the correct patient receives the right treatment at the right time involve staff and patients in checking the identity of patients using or about to receive a service or treatment.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health books, including those by James Reason guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team <p>Further areas of knowledge are added to this learning objective in Stage B.</p> <p>Further skills are added to this learning objective in Stage C.</p>
Scope of learning required		
<p>Ideas and technologies from areas like aviation, mining and sport are being adapted to the medical arena. You need to be aware of current developments and the ways that they are likely to affect practice. This learning objective comes from the RACP PQC and so its words are weighted toward hospital practice. The main ideas apply to any medical practice.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE B: Learning the ropes
Learning Objective 62.2.1	Optimise safe work practice which minimises error	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> characterise effective teams, the different types of health care teams and the barriers to forming effective teams discuss pre-emptive error-proofing strategies describe the roles of team members and the effect of change on a team. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> apply patient safety techniques, e.g. team-player responsibilities, to actions taken by your occupational health service on behalf of workers and organisational clients.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health books, including those by James Reason guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team <p>Further skills are added to this learning objective in Stage C.</p>
Scope of learning required		
See the 'scope' comment for this learning objective in Stage A.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE C: Approaching consultancy
Learning Objective 62.2.1	Optimise safe work practice which minimises error	
Knowledge		Skills
As for Stage A and Stage B.		<p>In addition to skills gained in Stage A and Stage B, skills in Stage C should include:</p> <ul style="list-style-type: none"> facilitate and maintain effective and efficient teamwork, including: <ul style="list-style-type: none"> coaching new members of the team encouraging effective communication encouraging innovation encouraging participation of all team members ensuring patients and workplace managers know how to contact the team with questions or concerns about treatment, return-to-work plans or occupational health issues ensuring all team members maintain appropriate standards of conduct and care ensuring the team has the right competencies and the right mix of competencies establishing clear lines of accountability and authority providing effective supervision using rewards appropriately introduce error-proofing strategies into the workplace involve staff in designing their work environment and standardising work practices manage fatigue and stress within the team monitor team objectives and provide regular individual and team feedback train staff to identify work conditions that cause errors and to be vigilant in the workplace.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health books, including those by James Reason guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		Theme 61.3: Communication with colleagues and the broader health care team

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE C: Approaching consultancy
Learning Objective 62.2.1	Optimise safe work practice which minimises error	
Scope of learning required		
See the 'scope' comment for this learning objective in Stage A.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE A: The basics
Learning Objective 62.2.2	Facilitate safe prescribing and administration of medication and display an understanding of the associated error types, causes, and risks	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss relevant actions, indications, contraindications and effects of medications • identify sources of information about adverse effects • discuss principles of drug monitoring • discuss where and when errors are most likely to occur and the opportunities for error in the process of administering medications for different patient locations • discuss methods to minimise medication errors • list the benefits of a multidisciplinary approach to medication safety • discuss reporting systems for medication errors • recognise legal and regulatory frameworks around prescribing as they apply to everyday clinical practice • discuss the side effects of medication and its potential effect on your patient and the safety of your patient's colleagues. 		<ul style="list-style-type: none"> • calculate drug doses • educate patients about their medications • identify relative and absolute contraindications • prescribe and administer medications safely • record in notes all medications prescribed and dispensed • record instructions and advice given to patients and employers/supervisors/return-to-work coordinators in relation to job modifications • report all medication errors (prescribing, dispensing, administering) and near misses • take steps to reduce the occurrence of medication errors • analyse and learn from medication errors • manage patients by reviewing long-term repeat prescribing • use information technology to support prescribing, dispensing and administering of medications.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • Quality Use of Medicine Guidelines – National Medicine Policy, Dept Health and Ageing • guided instruction by other physicians • journals and websites. 		<ul style="list-style-type: none"> • Learning objective 11.2.2: Prescribe appropriate and safe pharmacotherapy

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE A: The basics
Learning Objective 62.2.2	Facilitate safe prescribing and administration of medication and display an understanding of the associated error types, causes, and risks	
Scope of learning required		
<p>This learning objective was written to apply to treating practice. However, the main ideas apply to any medical practice. Ideas and technologies from areas like aviation, mining and sport are being adapted to the medical arena. You need to be aware of current developments and the ways that they are likely to affect practice.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE A: The basics
Learning Objective 62.2.3	Promote safe continuity of care for patients	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss how patients move between systems of care describe components of a patient-centred service recognise guidelines and protocol for transfer and handover of patients explain how shift changes, casual and short-term staff, rotations, or locums impact on the patient's continuity of care. 	<ul style="list-style-type: none"> conduct handover between physician and patient's local medical officer plan and conduct handover or follow-up of a long-running health surveillance program, e.g. for asbestos anticipate and address potentially important issues during handover. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by paramedics and by other physicians guidelines for evacuation of patients by air journals and websites. 	Further skills are added to this learning objective in Stage B.	
Scope of learning required		
<p>This learning objective is adapted from the RACP PQC and so some of its words are weighted toward hospital practice. In the practice of occupational medicine it will apply to the transfer of patients from remote locations, and in some situations of a patient's return to work after injury.</p> <p>The last dot point under 'skills' (above) may relate to conditions such as a claim lodged for cancer years after workplace exposure assessment and health surveillance has been done.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.2	Safe Practice	STAGE B: Learning the ropes
Learning Objective 62.2.3	Promote safe continuity of care for patients	
Knowledge	Skills	
As for Stage A.	<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> • establish and maintain effective patient handover and discharge systems • establish a system to identify the medical, and other, staff members responsible for a patient's care at all times • maintain records for the management of health surveillance programs for workers to ensure continuity of care and access to accurate medical information if required at a later date. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • guided instruction by paramedics and by other physicians • guidelines for evacuation of patients by air • journals and websites. 	<ul style="list-style-type: none"> • Theme 61.2: Communication with a third party, including the patient's employer or their family and/or carers • Theme 61.3: Communication with colleagues and the broader health care team 	
Scope of learning required		
See the 'scope' comment for this learning objective in Stage A.		

THEME 62.3: IDENTIFICATION, PREVENTION AND MANAGEMENT OF POTENTIAL HARM

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objectives 62.3.1, 62.3.2 and 62.3.4 appear in both Stage A and Stage B.

Basic Stage A: The Basics

- 62.3.1 Recognise, report on and manage adverse events and error
- 62.3.2 Identify, establish, implement and/or comply with relevant risk-management and risk-minimisation procedures
- 62.3.3 Identify risks to health arising from one's own work activities
- 62.3.4 Understand the process of managing complaints and how to utilise complaints to enhance medical care

Advanced Stage B: Learning the Ropes

- 62.3.1 Recognise, report on and manage adverse events and error
- 62.3.2 Identify, establish, implement and/or comply with relevant risk-management and risk-minimisation procedures
- 62.3.4 Understand the process of managing complaints and how to utilise complaints to enhance medical care

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	STAGE A: The basics
Learning Objective 62.3.1	Recognise, report on and manage adverse events and error	
Knowledge		Skills
<ul style="list-style-type: none"> define: <ul style="list-style-type: none"> an adverse event an error a near miss (near hit) discuss the models for understanding health care errors and system failures identify the many factors that contribute to adverse events, including system, environmental, situational and professional factors describe adverse event and error reporting processes recognise the legal aspects of investigation and disclosure of adverse events outline the basic principles underpinning systems theory and the role that complex systems play in errors describe basic quality improvement methodology. 		<ul style="list-style-type: none"> recognise and manage personal errors report on adverse events manage the needs of patient and staff when they are involved in an adverse event identify ways in which adverse events may be avoided in future identify the most common adverse events in the workplace recognise the learning opportunities from reporting error distinguish between system and individual errors describe the process of analysis of incident reports used by your workplace.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health books, including those by James Reason guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		Further skills are added to this learning objective in Stage B.
Scope of learning required		
Ideas and technologies from areas like aviation, mining and sport are being adapted to the medical arena. You need to be aware of current developments and the ways that they are likely to affect practice.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	STAGE B: Learning the ropes
Learning Objective 62.3.1	Recognise, report on and manage adverse events and error	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> discuss risk management approaches and systems used by corporate organisations. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> analyse incident reports, adverse events and near misses (near hits) to identify opportunities for improvements in care of workers and function of their workplaces employ quality improvement methods and analyse environmental and human factors to prevent future errors and reduce adverse events manage reports of adverse events or related complaints by workers recognise the psychological precursors of error – attitude, inattention, distraction, preoccupation, forgetfulness, fatigue and stress – and implement strategies aimed at reducing or managing these errors.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in management aspects of occupational health books, including those by James Reason guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team
Scope of learning required		
See the 'scope' comment for this learning objective in Stage A.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	STAGE A: The basics
Learning Objective 62.3.2	Identify, establish, implement and/or comply with relevant risk-management and risk-minimisation procedures	
Knowledge		Skills
<ul style="list-style-type: none"> outline the process for risk assessment and reporting hazards and risks in the workplace discuss ways in which risk-management can reduce adverse events of injury to patients or staff and understand the value of incident management identify the designated officer responsible for occupational health and safety in your workplace list risks and hazards associated with the use of various investigations such as ionising radiation, radio isotopes and invasive investigations. 		<ul style="list-style-type: none"> report known hazards and risks in the workplace work with the designated officer responsible for occupational health and safety follow procedures associated with potentially hazardous investigations.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in risk management guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		Further skills are added to this learning objective in Stage B.
Scope of learning required		
You should know this well.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	STAGE B: Learning the ropes
Learning Objective 62.3.2	Identify, establish, implement and/or comply with relevant risk-management and risk-minimisation procedures	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> identify risks associated with any specialised investigations used in occupational health assessments, e.g. use of chest x-rays in health surveillance programs and functional capacity assessments in employees with unstable cardiac conditions describe the risk management framework established in AS/NZS 4801. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> establish and implement specific activities that will reduce adverse events and risk, such as improved supervision, triage and protocols, e.g. hand washing, infection control, confidentiality use information from complaints, incident reports, litigation, coroner's reports and quality improvement reports and risk assessment to control risks use the appropriate hazard identification process/form developed in the workplace.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in risk management guided instruction by occupational physicians interaction with workers, unions, employers and insurers journals and websites. 		Learning objective 20.3.2: Describe the general principles of workplace assessment
Scope of learning required		
You should know this well.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	Stage A: The basics
Learning Objective 62.3.3	Identify risks to health arising from one's own work activities	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss common hazardous exposures in medical practice, e.g. micro-organisms in exhaled air, body fluids and sharps • discuss hazards from handling of therapeutic agents, e.g. cytotoxic drugs • discuss hazards from fugitive gases and vapours, e.g. during anaesthesia • discuss hazards from cleansing agents • discuss electrical hazards and minimisation of risk • discuss radiation hazards and minimisation of risk • discuss hazards involving fatigue • discuss strategies for handling violent behaviour or stalking from patients. 		<ul style="list-style-type: none"> • use appropriate procedure when handling sharps, rehearsed in emergency situations • use appropriate procedure when handling therapeutic or volatile agents • use appropriate procedure in use of electrical equipment • use appropriate protection from radiation hazards • recognise fatigue and gain assistance • use appropriate procedure when a person under care is violent • use appropriate procedure to work safely in varied working environments • comply with occupational health and safety measures existing within a workplace.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by educational supervisor and peers, including from trainees in Stage C • textbooks reading • authoritative websites. 		<ul style="list-style-type: none"> • Learning objective 20.1.1: Describe the properties of physical agents that can affect health • Learning objective 20.1.3: Describe the properties of biological agents that can affect health • Learning objective 20.2.1: Describe the potential health effects of common and important physical hazards • Learning objective 20.2.3: Describe the potential health effects of common and important biological hazards
Scope of learning required		
<p>In listing risks, you should give priority to recognised and likely risks. After brainstorming the possibilities, a realistic action list should be made.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	STAGE A: The basics
Learning Objective 62.3.4	Understand the process of managing complaints and how to utilise complaints to enhance medical care	
Knowledge		Skills
<ul style="list-style-type: none"> discuss how complaints can improve services recognise the complaint management policy for your organisation and the components of an effective complaint-management system define the principle of open disclosure. 		<ul style="list-style-type: none"> respond to complaints and use information to make improvements to health service delivery seek feedback from patients and carers about their health provision refer complaints raising significant health and safety issues to the appropriate body.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by educational supervisor and peers, including from trainees in Stage C role plays academic coursework in management aspects of occupational health or short courses on handling complaints texts and guidelines that refer to complaints and disclosure interaction with workers, unions, employers and insurers where feedback is sought from them relevant legal outcomes. 		<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication Theme 61.2: Communication with a third party, including the patient's employer or their family and/or carers <p>A further skill is added to this learning objective in Stage B.</p>
Scope of learning required		
<p>This learning objective comes from the RACP PQC and some items apply specifically to treating practice. However, the ability to receive and act on complaints will assist any medical practice. You will need to work with others to practise this and become adept.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 62: Quality and Safety
Theme 62.3	Identification, Prevention and Management of Potential Harm	STAGE B: Learning the ropes
Learning Objective 62.3.4	Understand the process of managing complaints and how to utilise complaints to enhance medical care	
Knowledge		Skills
As for Stage A.		In addition to skills gained in Stage A, skills in Stage B should include: <ul style="list-style-type: none"> actively seek feedback from organisations about your health service provision.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guided instruction by educational supervisor and peers, including from trainees in Stage C role plays academic coursework in management aspects of occupational health or short courses on handling complaints texts and guidelines that refer to complaints and disclosure interaction with workers, unions, employers and insurers where feedback is sought from them relevant legal outcomes. 		<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication Theme 61.2: Communication with a third party, including the patient's employer or their family and/or carers
Scope of learning required		
<p>This learning objective comes from the RACP PQC and some items apply specifically to treating practice. However, the ability to receive and act on complaints will assist any medical practice. You will need to work with others to practise this and become adept.</p> <p>In occupational medicine, due to the additional relationships between physician and employers, complaints may come from sources other than the patient. You should seek to develop skills to respond to complaints and use this information to improve your service delivery to organisations as well as patients.</p>		

Sub-domain 63: Teaching and learning (scholar)

The themes in Sub-domain 63 are:

63.1: Ongoing learning

63.3: Educator

There is no Theme 63.2. Theme 3.2 in the RACP PQC refers to research. This area of learning forms Domain 40 of the AFOEM Curriculum.

THEME 63.1: ONGOING LEARNING

The sole learning objective within this theme appears in all three stages.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 63: Teaching and Learning (Scholar)
Theme 63.1	Ongoing Learning	STAGE A: The basics
Learning Objective 63.1.1	Participate in effective continuing professional and educational development	
Knowledge		Skills
<ul style="list-style-type: none"> discuss different learning styles identify methods available to assess one's own learning needs recognise the requirements of the AFOEM and RACP continuing professional development program. 		<ul style="list-style-type: none"> identify preferred learning style(s) identify resources available for continuing professional and educational development develop and demonstrate a systematic approach to: <ul style="list-style-type: none"> developing a plan to manage learning needs using a training needs analysis to identify and prioritise learning needs using reflective learning techniques utilise e-portfolio to facilitate learning.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> participating in various modalities of learning reflecting on the success of different episodes of learning active participation in continuing professional development and, most particularly, in the learning of others. 		<ul style="list-style-type: none"> Theme 63.3: Educator <p>Further skills are added to this learning objective in Stage B and Stage C.</p>
Scope of learning required		
<p>You need to identify for yourself the ways that you best learn – type of forum, duration of individual episodes, particular strengths and weaknesses, the likely frequency by which learning should be refreshed.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 63: Teaching and Learning (Scholar)
Theme 63.1	Ongoing Learning	STAGE B: Learning the ropes
Learning Objective 63.1.1	Participate in effective continuing professional and educational development	
Knowledge		Skills
As for Stage A.		In addition to skills gained in Stage A, skills in Stages B and C should include: <ul style="list-style-type: none"> • model and promote continuing professional and educational development among staff and professional colleagues • participate in the AFOEM training program.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • participating in various modalities of learning • reflecting on the success of different episodes of learning • active participation in continuing professional development and, most particularly, in the learning of others. 		<ul style="list-style-type: none"> • Theme 63.3: Educator
Scope of learning required		
See the 'scope' comment for this learning objective in Stage A.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 63: Teaching and Learning (Scholar)
Theme 63.1	Ongoing learning	STAGE C: Approaching consultancy
Learning Objective 63.1.1	Participate in effective continuing professional and educational development	
Knowledge		Skills
As for Stage A.		In addition to skills gained in Stage A, skills in Stages B and C should include: <ul style="list-style-type: none"> • model and promote continuing professional and educational development among staff and professional colleagues • participate in the AFOEM professional development program.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • participating in various modalities of learning • reflecting on the success of different episodes of learning • active participation in continuing professional development and, most particularly, in the learning of others • assisting the learning of trainees in Stages A and B. 		<ul style="list-style-type: none"> • Theme 63.3: Educator
Scope of learning required		
See the 'scope' comment for this learning objective in Stage A.		

At this point in the RACP PQC there are three learning objectives under Theme 3.2: Research:

- Learning objective 3.2.1: Contribute to the development of new knowledge by active involvement in research. This has been incorporated within Domain 40 in Stage B as learning objective 40.1.1.
- Learning objective 3.2.2: Demonstrate understanding of the principles of evidence-based medicine, the limitations of evidence and the challenge of applying research findings to daily clinical practice. This has been incorporated within Domain 30 in Stage A as learning objective 30.1.1.
- Learning objective 3.2.3: Demonstrate the ability to present research findings in a written or oral form. This has been incorporated within Domain 40 in Stage C as learning objectives 40.4.1 and 40.4.2.

THEME 63.3: EDUCATOR

The sole learning objective within this theme appears in all three stages.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 63: Teaching and Learning (Scholar)
Theme 63.3	Educator	STAGE A: The basics
Learning Objective 63.3.1	Recognise the importance of health education and the role of the physician as a teacher to patients, other physicians and in the wider community, and develop the skills to undertake this role	
Knowledge		Skills
<ul style="list-style-type: none"> describe different learning styles recognise the need for a wide English vocabulary and correct use of grammar when educating others. 		<ul style="list-style-type: none"> facilitate patients' learning, especially with regard to self-management, community services and liaison. This includes assisting patients to self-manage conditions following injury so as to minimise long-term disability recognise and maximise learning opportunities apply knowledge of different learning styles to teaching/learning activities exhibit a disposition of humility and a sense of humour.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> participating in various modalities of learning reflecting on the success of different episodes of learning participating in continuing professional development and, most particularly, in the learning of others presentations, critical appraisals with peers observing others who are very good at explanation take words, phrases and acronyms that are commonly applied to situations in occupational health and challenge oneself to explain these to a person who is new to the field or skilled in different areas. 		<ul style="list-style-type: none"> Sub-domain 61: Communication Sub-domain 64: Cultural competency <p>A further area of knowledge is added to this learning objective in Stage B.</p> <p>Further skills are added to this learning objective in Stages B and C.</p>
Scope of learning required		
<p>For the examination, particularly at the end of Stage B, you should practise the ability to explain technical concepts in simple terms, and get others to give you feedback on your ability to do this. It takes much effort to do this well, but it will serve you well through a lifetime of practice.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 63: Teaching and Learning (Scholar)
Theme 63.3	Educator	STAGE B: Learning the ropes
Learning Objective 63.3.1	Recognise the importance of health education and the role of the physician as a teacher to patients, other physicians and in the wider community, and develop the skills to undertake this role	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> identify effective methods to deliver health education. 		<p>In addition to skills gained in Stage A, skills in Stages B and C should include:</p> <ul style="list-style-type: none"> deliver occupational health information to different groups of workers with varying levels of understanding, e.g. managers as compared with workers as compared with occupational health and safety personnel facilitate the learning of colleagues and students plan and implement teaching/learning activities with colleagues and other people in the health care team use available information and develop new information to inform workers/patients and deliver health education. This is particularly important in occupational health.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> participating in various modalities of learning reflecting on the success of different episodes of learning active participation in continuing professional development and, most particularly, in the learning of others presentations, critical appraisals with peers observing others who are very good at explanation take words, phrases and acronyms that are commonly applied to situations in occupational health and challenge oneself to explain these to a person who is new to the field or skilled in different areas. 		<ul style="list-style-type: none"> Sub-domain 61: Communication Learning objective 63.1.1: Participate in effective continuing professional and educational development Sub-domain 64: Cultural competency
Scope of learning required		
<p>For the examination, particularly at the end of Stage B, you should practise the ability to explain technical concepts in simple terms, and get others to give you feedback on your ability to do this. It takes much effort to do this well, but it will serve you well through a lifetime of practice.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 63: Teaching and Learning (Scholar)
Theme 63.3	Educator	STAGE C: Approaching consultancy
Learning Objective 63.3.1	Recognise the importance of health education and the role of the physician as a teacher to patients, other physicians and in the wider community, and develop the skills to undertake this role	
Knowledge		Skills
As for Stage A and Stage B.		<p>In addition to skills gained in Stage A, skills in Stages B and C should include:</p> <ul style="list-style-type: none"> • deliver occupational health information to different groups of workers with varying levels of understanding, e.g. managers as compared with workers as compared with occupational health and safety personnel • facilitate the learning of colleagues and students • plan and implement teaching/learning activities with colleagues and other people in the health care team • use available information and developing new information to inform workers/patients, and deliver health education. This is particularly important in occupational health.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • participating in various modalities of learning • reflecting on the success of different episodes of learning • active participation in continuing professional development and, most particularly, in the learning of others • presentations, critical appraisals with peers • observing others who are very good at explanation • take words, phrases and acronyms commonly applied to situations in occupational health and challenge oneself to explain these to a person who is new to the field or skilled in different areas. 		<ul style="list-style-type: none"> • Sub-domain 61: Communication • Sub-domain 64: Cultural competency
Scope of learning required		
You are advised to make a substantial effort with this. It will really assist your development.		

Sub-domain 64: Cultural competency

The sole theme in Sub-domain 64 is:

64.1: Cultural competency

THEME 64.1: CULTURAL COMPETENCY

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objectives 64.1.1 and 64.1.3 appear in both Stage A and Stage B.

Learning objective 64.1.6 appears in all stages.

Basic Stage A: The Basics

- 64.1.1 Manage one's own cultural competency development
- 64.1.2 Demonstrate the ability to communicate effectively with people from culturally and linguistically diverse backgrounds
- 64.1.3 Apply specific knowledge of the patient's cultural and religious background, attitudes and beliefs in managing and treating the patient
- 64.1.6 Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes

Advanced Stage B: Learning the Ropes

- 64.1.1 Manage one's own cultural competency development
- 64.1.3 Apply specific knowledge of the patient's cultural and religious background, attitudes and beliefs in managing and treating the patient
- 64.1.4 Understand how the special history of Māori and Pacific peoples (NZ) and Aboriginal/Torres Strait Islander peoples (Australia) impacts on their current health status
- 64.1.6 Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes

Advanced Stage C: Approaching Consultancy

- 64.1.5 Identify and act on cultural bias within health care services and other organisations
- 64.1.6 Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE A: The basics
Learning Objective 64.1.1	Manage one's own cultural competency development	
Knowledge		Skills
<ul style="list-style-type: none"> define key concepts, terms and stages in cultural competence, e.g. culture, cultural safety and culturally-inclusive environment recognise the importance of being culturally sensitive to enhance patient care discuss the effects of cultural insensitivity. 		<ul style="list-style-type: none"> identify one's own cultural learning needs and undertake self-directed learning.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> 'diversity workshops' that explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery talks and websites books. 		<ul style="list-style-type: none"> Sub-domain 61: Communication Other parts of Sub-domain 64: Cultural competency <p>A further skill is added to this learning objective in Stage B.</p>
Scope of learning required		
<p>You should reflect on the extent and limits of interactions with any patients from a different cultural background. Some important questions to ask would be: What assumptions did you bring to the interaction? What surprises did the experience bring? In what ways has the practice of medicine with patients from other cultures affected the views and assumptions extending from your own upbringing?</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE B: Learning the ropes
Learning Objective 64.1.1	Manage one's own cultural competency development	
Knowledge		Skills
As for Stage A.		In addition to the skill gained in Stage A, skills in Stage B should include: <ul style="list-style-type: none"> • identify one's own cultural biases and the influence they have on interaction with others.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • 'diversity workshops' which explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery • talks and websites • books. 		<ul style="list-style-type: none"> • Sub-domain 61: Communication • Sub-domain 64: Cultural competency
Scope of learning required		
See the 'scope' of this learning objective in Stage A.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE A: The basics
Learning Objective 64.1.2	Demonstrate the ability to communicate effectively with people from culturally and linguistically diverse backgrounds	
Knowledge		Skills
<ul style="list-style-type: none"> identify potential barriers to effective cross-cultural communication evaluate resources available to support cross-cultural practice, e.g. interpreters, translated resources, community partners recognise legal and ethical issues around using children and relatives as interpreters. 		<ul style="list-style-type: none"> communicate effectively with people from culturally and linguistically diverse backgrounds source and use interpreters and translators use appropriate non-verbal communication.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conduct at least part of one's practice among a population with a substantially different cultural background from one's own 'diversity workshops' which explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery talks and websites work with hospital-based community liaison officers books. 		<ul style="list-style-type: none"> Sub-domain 61: Communication
Scope of learning required		
<p>You should demonstrate in clinical interactions a manner that welcomes and enables a patient from a different cultural background to speak of his or her background, previous experiences of medical treatment, use of alternative therapies, spiritual beliefs relating to illness, people close to the patient who assist the making of health care decisions, and the meaning of the illness to the patient. You should demonstrate discretion to the extent of knowing that a level of trust must be established over time before some important matters can be broached.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE A: The basics
Learning Objective 64.1.3	Apply specific knowledge of the patient’s cultural and religious background, attitudes and beliefs in managing and treating the patient	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss different belief systems and their impact on patients and their care • recognise health inequalities among culturally and linguistically diverse communities • distinguish cultural demographics of the community in which you practice. 		<ul style="list-style-type: none"> • access and use information about culturally and linguistically diverse communities, their histories and specific health issues as the context for understanding culture and health interactions • use information relating to: <ul style="list-style-type: none"> • beliefs • client expectations • customs • diet • family • health practices • migration history <p>in the management, treatment and care of the patient.</p>
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • conduct at least part of one’s practice among a population with a substantially different cultural background from one’s own • ‘diversity workshops’ which explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery • talks and websites • work with hospital-based community liaison officers. 		<ul style="list-style-type: none"> • Sub-domain 61: Communication <p>Further knowledge and skills are added to this learning objective in Stage B.</p>
Scope of learning required		
<p>You should be able to demonstrate in clinical interactions a manner that welcomes and enables a patient from a different cultural background to speak of his or her background, previous experiences of medical treatment, use of alternative therapies, spiritual beliefs relating to illness, people close to the patient who assist the making of health care decisions, and the meaning of the illness to the patient.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE B: Learning the ropes
Learning Objective 64.1.3	Apply specific knowledge of the patient's cultural and religious background, attitudes and beliefs in managing and treating the patient	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> recognise the context of the community in which a doctor will serve when you are responsible for involving that doctor in work in remote areas of Australia or abroad. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> access and use information about culturally and linguistically diverse communities and their work values as the context for understanding culture and health interactions in occupational settings, including for the implementation of health and wellness programs at work use the information above in the context of the placement of these individuals into different cultures, whether these are overseas, in Australia or in New Zealand.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conduct at least part of one's practice among a population with a substantially different cultural background from one's own 'diversity workshops' which explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery talks and websites work with hospital-based community liaison officers. 		<ul style="list-style-type: none"> Sub-domain 61: Communication
Scope of learning required		
<p>You should be able to demonstrate in clinical interactions a manner that welcomes and enables a patient from a different cultural background to speak of his or her background, previous experiences of medical treatment, use of alternative therapies, spiritual beliefs relating to illness, people close to the patient who assist the making of health care decisions, and the meaning of the illness to the patient. In occupational medicine this will include knowledge of the individual's work values and the workplace and its organisational structure when managing an individual patient's illness or injury.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE B: Learning the ropes
Learning Objective 64.1.4	Understand how the special history of Māori and Pacific peoples (NZ) and Aboriginal/Torres Strait Islander peoples (Australia) affects their current health status	
Knowledge		Skills
<ul style="list-style-type: none"> discuss how loss of land, language and culture has affected socioeconomic status and independence discuss how government and non-government policies and media portrayal has affected self-efficacy (mastery) recognise historical negative perceptions of hospitals in relation to death and cultural respect discuss the strong ties within Aboriginal, Torres Strait Islander, Māori and Pacific Islander families and communities, and how this can affect interactions between Aboriginal, Torres Strait Islander, Māori and Pacific Islander peoples and health services identify the role of culture and connectedness to the land and remote locations for Aboriginal, Torres Strait Islander, Māori and Pacific Islander peoples in the context of occupation. 		<ul style="list-style-type: none"> access and use information about Aboriginal, Torres Strait Islander, Māori and Pacific Islander peoples and their histories as the context for understanding culture and health interactions identify judgemental approach and develop empathic strategies to gain trust access and use information about Aboriginal, Torres Strait Islander, Māori and Pacific Islander peoples and their specific health issues as the context for understanding culture and health interactions access and use information about Aboriginal, Torres Strait Islander, Māori and Pacific Islander peoples and their culture as the context for understanding health interactions.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> 'diversity workshops' which explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery talks and websites books. 		<ul style="list-style-type: none"> Sub-domain 61: Communication Sub-domain 64: Cultural competency Learning objective 69.4.1: Implement strategies to reduce inequities in health status between population groups
Scope of learning required		
Outline of the history of first inhabitants of both countries and the major effects – both positive and negative – of the settlement of other peoples in these lands.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE C: Approaching consultancy
Learning Objective 64.1.5	Identify and act on cultural bias within health care services and other organisations	
Knowledge		Skills
<ul style="list-style-type: none"> discuss organisational cultural insensitivity and its effect on patient care discuss the effect of cultural bias in healthcare when this exists overseas. 		<ul style="list-style-type: none"> identify and take action to address cultural bias in colleagues and within the health care organisation advise colleagues on non-discriminatory work practices and advocate for change when such practices are displayed.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conduct at least part of one's practice among a population with a substantially different cultural background from one's own 'diversity workshops' which explore issues such as health beliefs, effect of gender difference on professional-patient relationships, family structure and dynamics that affect health care, treatment of children and the elderly, attitudes to medication and modes of delivery talks and websites work with hospital-based community liaison officers books. 		<ul style="list-style-type: none"> Theme 65.1: Professional ethics Learning objective 65.2.2: Demonstrate the ability to critically reflect on personal beliefs, biases and behaviours, and their alignment with health care policy and impact on interaction with patients Learning objective 67.2.1: Demonstrate ability to provide leadership and effectively manage others Learning objective 68.3.1: Demonstrate an understanding of the necessary steps required to effect change within organisations and the community
Scope of learning required		
<p>You should be able to demonstrate in clinical interactions a manner that welcomes and enables a patient from a different cultural background to speak of his or her background, previous experiences of medical treatment, use of alternative therapies, spiritual beliefs relating to illness, people close to the patient who assist the making of health care decisions, and the meaning of the illness to the patient. You should be able to identify when others in your team do not exhibit such respect and work to build their will to do so.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE A: The basics
Learning Objective 64.1.6	Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes	
Knowledge		Skills
<ul style="list-style-type: none"> recognise culture as a determinant of health. 		<ul style="list-style-type: none"> develop partnerships with appropriate individuals, organisations and representative networks and seek information and advice when working with other cultural groups.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conduct at least part of one's practice among a population with a substantially different cultural background from one's own work with community liaison officers and community leaders from different cultures community involvement alongside trainees or Fellows of different cultural background to yours. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team Learning objective 61.4.1: Communicate effectively with support organisations, administrative bodies, governments and others in the wider community <p>Parts of this learning objective also appear in Stages B and C.</p>
Scope of learning required		
Your experiences in this could form part of Case-based discussions.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE B: Learning the ropes
Learning Objective 64.1.6	Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> recognise the effect of culture on the behaviour of colleagues and staff describe how policies and practices of dominant cultures influence the health of other groups discuss the value of using culturally-aligned health workers. 		<p>In addition to skill gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> identify the values and needs of non-dominant cultural groups promote intra-cultural and cross-cultural relationships.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural Competency	STAGE B: Learning the ropes
Learning Objective 64.1.6	Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conduct at least part of one's practice among a population with a substantially different cultural background from one's own work with community liaison officers and community leaders from different cultures community involvement alongside trainees or Fellows of different cultural background to yours. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team Learning objective 61.4.1: Communicate effectively with support organisations, administrative bodies, governments and others in the wider community Part of this objective also appears in Stage C.
Scope of learning required		
Your experiences in this could form part of Case-based Discussions.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 64: Cultural competency
Theme 64.1	Cultural competency	STAGE C: Approaching consultancy
Learning Objective 64.1.6	Demonstrate the ability to promote effective cross-cultural partnerships and culturally diverse teams to improve health outcomes	
Knowledge		Skills
As for Stage A and Stage B.		As for Stage A and Stage B. <ul style="list-style-type: none"> promote intra-cultural and cross-cultural relationships; should continue to be developed across Stages B and C.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> conduct at least part of one's practice among a population with a substantially different cultural background from one's own work with community liaison officers and community leaders from different cultures community involvement alongside trainees or Fellows of different cultural background to yours. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team
Scope of learning required		
Your experiences in this could form part of case-based discussions.		

Sub-domain 65: Ethics

The themes in Sub-domain 65 are:

65.1: Professional ethics

65.2: Personal ethics

65.3: Ethics and health law

THEME 65.1: PROFESSIONAL ETHICS

The sole learning objective within this theme appears in both Stage A and Stage C.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.1	Professional Ethics	STAGE A: The basics
Learning Objective 65.1.1	Demonstrate ability to apply an ethical framework in clinical practice	
Knowledge		Skills
<ul style="list-style-type: none"> outline the bioethical principles of: <ul style="list-style-type: none"> autonomy beneficence justice non-maleficence recognise the place of the following in clinical practice: <ul style="list-style-type: none"> cultural practices in contributing to ethical decision making moral beliefs religion social justice values recognise international, national, state/territory and local codes, principles and declarations regarding ethical conduct. 		<ul style="list-style-type: none"> apply a range of problem-solving techniques to ethical dilemmas apply ethical principles in a variety of situations, including but not limited to: <ul style="list-style-type: none"> competence and consent dealing with older patients end-of-life care genetics inter-professional and intra-professional relationships physician-patient relationship relationship with industry research third party relationships withdrawal of care.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> ethics guides produced by medical registration boards with particular attention to the meaning and limits of words used to describe ethical principles, e.g. justice, autonomy university courses and workshops that discuss values, ethical conflicts, and how the quest for the values of the ideal life is comparatively expressed among different religions. 		Part of this learning objective appears in Stage C.
Scope of learning required		
There should be an ethical basis to your practice and how you demonstrate your conduct within the examination room.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.1	Professional ethics	STAGE C: Approaching consultancy
Learning Objective 65.1.1	Demonstrate ability to apply an ethical framework in clinical practice	
Knowledge		Skills
As for Stage A.		In addition to skills gained in Stage A, skills in Stage C should include: <ul style="list-style-type: none"> • apply ethical principles to resource allocation.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • ethics guides produced by medical registration boards with particular attention to the meaning and limits of words used to describe ethical principles, e.g. justice, autonomy • university courses and workshops that discuss values, ethical conflicts, and how the quest for the values of the ideal life is comparatively expressed among different religions. 		<ul style="list-style-type: none"> • Learning objective 69.5.1: Demonstrate a basic understanding of the societal, political and economic pressures that influence the way funding is provided and used
Scope of learning required		
Include this as a natural and routine part of your practice.		

At this point in the RACP PQC there is a learning objective under Theme 5.1: Professional ethics

- Learning objective 5.1.2: Understand and apply ethical principles underpinning the conduct of research.

This has been incorporated within Domain 40 in Stage B as Learning objective 40.2.1.

THEME 65.2: PERSONAL ETHICS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objectives 65.2.1 and 65.2.2 appear in both Stage A and Stage B.

Basic Stage A: The Basics
65.2.1 Develop a sound professional standard of personal conduct
65.2.2 Demonstrate the ability to reflect critically on personal beliefs, biases and behaviours, and their alignment with health care policy and impact on interaction with patients
Advanced Stage B: Learning the Ropes
65.2.1 Develop a sound professional standard of personal conduct
65.2.2 Demonstrate the ability to reflect critically on personal beliefs, biases and behaviours, and their alignment with health care policy and impact on interaction with patients
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.2	Personal Ethics	STAGE A: The basics
Learning Objective 65.2.1	Develop a sound professional standard of personal conduct	
Knowledge	Skills	
<ul style="list-style-type: none"> define duty of care discuss patient's rights in a clinical setting recognise relevant codes of conduct recognise legal responsibilities under the relevant Health Acts recognise Quality Use of Medicines guidelines discuss risk-management and risk-minimisation procedures. 	<ul style="list-style-type: none"> adhere to codes of conduct of registration boards in local jurisdictions recognise professional limitations and be prepared to refer as appropriate medicate safely respond professionally and appropriately to complaints. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> guides to medical practice produced by medical registration boards annual reports of medical registration boards guides to relevant Acts discussion of ethical conflicts at meetings with peers or your educational supervisor seminars conducted by medical defence associations. 	<ul style="list-style-type: none"> Sub-domain 62: Quality and Safety Sub-domain 64: Cultural Competency Theme 65.1: Professional ethics <p>Parts of this learning objective also appear in Stage B.</p>	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.2	Personal Ethics	STAGE A: The basics
Learning Objective 65.2.1	Develop a sound professional standard of personal conduct	
Scope of learning required		
There should be an ethical basis to your practice and how you conduct yourself within the examination room.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.2	Personal Ethics	STAGE B: Learning the ropes
Learning Objective 65.2.1	Develop a sound professional standard of personal conduct	
Knowledge		Skills
As for Stage A.		In addition to skills gained in Stage A, skills in Stage B should include: <ul style="list-style-type: none"> • manage adverse events and errors • manage differences in opinion.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guides to medical practice produced by medical registration boards • annual reports of medical registration boards • guides to relevant Acts • discussion of ethical conflicts at meetings with peers or your educational supervisor • seminars conducted by medical defence associations. 		<ul style="list-style-type: none"> • Sub-domain 62: Quality and safety • Sub-domain 64: Cultural competency • Theme 65.1: Professional ethics
Scope of learning required		
There should be an ethical basis to your practice and how you demonstrate your conduct within the examination room.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.2	Personal Ethics	STAGE A: The basics
Learning Objective 65.2.2	Demonstrate the ability to reflect critically on personal beliefs, biases and behaviours, and their alignment with health care policy and impact on interaction with patients	
Knowledge		Skills
<ul style="list-style-type: none"> recognise different belief and value systems and their alignment with health care policy and impact on interaction with patients describe the relationship of a belief system and how this may contribute to decisions about treatment 		<ul style="list-style-type: none"> critically reflect on own attitudes and values recognise personal moral considerations within the context of ethical decision making reflect and analyse own viewpoints on ethical dilemmas such as: <ul style="list-style-type: none"> abortion contraception euthanasia life-sustaining treatment inform and seek alternative care for a patient where a personal moral judgement or religious belief prevents appropriate professional engagement act to manage situations where one's own beliefs and institutional policy are not aligned.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> ethics guides produced by medical registration boards university courses and workshops that discuss values and ethical conflicts discussion of ethical conflicts at meetings with peers or your educational supervisor. 		Part of this learning objective appears in Stage B.
Scope of learning required		
You are advised to develop a set of approaches for dealing with ethical conflict at various levels: – physician-patient, inter-professional, and associated with your own contribution to the work of an organisation.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.2	Personal Ethics	STAGE B: Learning the ropes
Learning Objective 65.2.2	Demonstrate the ability to reflect critically on personal beliefs, biases and behaviours, and their alignment with health care policy and impact on interaction with patients	
Knowledge		Skills
As for Stage A.		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> critically reflect and analyse policy viewpoints on ethical dilemmas such as: <ul style="list-style-type: none"> financial harm to patients versus potential harm to themselves potential conflict in role of independent adviser versus role of registered practitioner potential for misuse of worker health information by clients the safety of workers and the public vs. right to privacy whether responsibility to an organisational client influences responsibility to act to minimise the hazardous exposures of employees.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> ethics guides produced by medical registration boards university courses and workshops that discuss values and ethical conflicts discussion of ethical conflicts at meetings with peers or your educational supervisor. 		<p>Theme 63.1: Ongoing learning</p> <p>Theme 63.3: Educator</p>
Scope of learning required		
<p>You should continue to develop a set of approaches for dealing with ethical conflict at various levels: physician-patient, inter-professional, and associated with your own contribution to the work of an organisation. One area particularly relevant to occupational medicine is the extent to which you turn a 'blind eye' to a problem in a workplace that is not your reason for being there but which you have observed and which you believe will increase the risk of harm to those who work there, e.g. failure of individual workers to wear personal protective equipment to reduce exposure to atmospheric pollutants or noise.</p>		

THEME 65.3: ETHICS AND HEALTH LAW

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objectives 65.3.1 and 65.3.2 appear in Stage A only.

Basic Stage A: The Basics
65.3.1 Demonstrate the ability to apply legal and ethical frameworks to physician-patient relationships
65.3.2 Demonstrate the ability to apply relevant legislation and ethical frameworks to interactions outside the direct physician-patient relationship
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.3	Ethics and Health Law	STAGE A: The basics
Learning Objective 65.3.1	Demonstrate the ability to apply legal and ethical frameworks to physician-patient relationships	
Knowledge	Skills	
<ul style="list-style-type: none"> describe the legal framework around privacy and confidentiality as it relates to the physician-patient relationship recognise the legal aspects of, and the importance of obtaining, informed consent recognise the patient's right to make their own decisions and their rights regarding refusal of treatment/procedures discuss the legal principles around decision making capacity (competence), including the appointment of surrogate decision makers recognise the legal issues around involuntary admission and involuntary detention recognise occupational health and safety legislation/guidelines, especially when treating mentally ill patients. 	<ul style="list-style-type: none"> maintain privacy and confidentiality in all patient encounters apply appropriate and effective communication techniques to obtain consent discuss all treatment options, regardless of health insurance or financial status of patient seek consent for conduct of medical procedures and treatments identify the need for a formal assessment of decision-making capacity and refer appropriately provide full information about the risks, benefits and possible side-effects of a procedure or treatment apply relevant worker's compensation laws and occupational health and safety laws where you may be a relevant party. 	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.3	Ethics and Health Law	STAGE A: The basics
Learning Objective 65.3.1	Demonstrate the ability to apply legal and ethical frameworks to physician-patient relationships	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guides to medical practice produced by medical registration boards courses and seminars that refer to relevant law guides to relevant Acts. 		<ul style="list-style-type: none"> Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment
Scope of learning required		
This learning objective is part of the RACP PQC so the weight of words applies to hospital-based practice. However, you need to be aware of the framework of law that applies to the various parts of the practice of community-based physician practice, occupational medicine and environmental medicine.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 65: Ethics
Theme 65.3	Ethics and Health Law	STAGE A: The basics
Learning Objective 65.3.2	Demonstrate the ability to apply relevant legislation and ethical frameworks to interactions outside the direct physician-patient relationship	
Knowledge		Skills
<ul style="list-style-type: none"> identify situations where reporting is necessary and appropriate and when it is mandated by legislation recognise legal issues, particularly those relating to: <ul style="list-style-type: none"> death certification role of the coroner (local Coroner's Act) mental illness surrogate decision making driving and medical risk communicable diseases. 		<ul style="list-style-type: none"> report to the appropriate authority apply knowledge of legal issues to clinical practice.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> guides to medical practice produced by medical registration boards courses and seminars that refer to relevant law guides to relevant Acts and agreements including Medical Practice Acts, the International Labour Organisation and the AMA/NZMA Code of Conduct. 		<ul style="list-style-type: none"> Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment
Scope of learning required		
See the 'scope' comment for Learning objective 65.3.1.		

There is no Sub-domain 66

At this point in the RACP PQC there is Domain 6 with a single theme, Theme 6.1: Clinical decision making. Within this are four learning objectives. These have now been incorporated in Domain 30 of this curriculum.

- Learning objective 6.1.1: Understand and apply the process of diagnostic reasoning.
This is incorporated in Learning objective 30.2.1.
- Learning objective 6.1.2: Prognosticate and predict risk.
This is now Learning objective 30.2.2.
- Learning objective 6.1.3: Derive therapeutic decisions that maximise patient benefit and acceptance.
This is now Learning objective 30.2.3.
- Learning objective 6.1.4: Use evidence effectively and efficiently to inform clinical decision making.
This is now Learning objective 30.2.4.

Sub-domain 67: Leadership and management

The themes in Sub-domain 67 are:

67.1: Self-management

67.2: Leadership and management of others

THEME 67.1: SELF-MANAGEMENT

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

Learning objective 67.1.1 appears in both Stage A and Stage B.

Basic Stage A: The Basics
67.1.1 Implement and model effective self-management practices
67.1.2 Identify personal attributes or health issues that could impair one's performance at work
Advanced Stage B: Learning the Ropes
67.1.1 Implement and model effective self-management practices
Advanced Stage C: Approaching Consultancy
Nil

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.1	Self-management	STAGE A: The basics
Learning Objective 67.1.1	Implement and model effective self-management practices	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss effective time and stress-management techniques. 	<ul style="list-style-type: none"> incorporate health maintenance as part of professional life, including regular contact with one's own GP apply time-management and prioritisation skills work in multidisciplinary and cross-cultural teams identify stressors and take action to minimise their effects manage stressful situations, and know when to ask for help manage personal and professional development cultivate the ability to identify one's own mistakes and learn from them 	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.1	Self-management	STAGE A: The basics
Learning Objective 67.1.1	Implement and model effective self-management practices	
	<ul style="list-style-type: none"> manage relationships, including those with: <ul style="list-style-type: none"> a broader health care team colleagues patients manage the balance between work life and home life recognise and respond to personal and professional limitations. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> observation of the conduct of others' practices discussion with peers and colleagues seminars on practice management seminars on various aspects of information technology. 	<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team Theme 64.1: Cultural competency Part of this learning objective appears in Stage B.	
Scope of learning required		
To do this well will assist your progress through traineeship; poor self-management is a potent cause of delays.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.1	Self-management	STAGE B: Learning the ropes
Learning Objective 67.1.1	Implement and model effective self-management practices	
Knowledge	Skills	
As for Stage A.	In addition to skills gained in Stage A, skills in Stage B should include: <ul style="list-style-type: none"> delegate and follow-up effectively manage relationships effectively, including those involving: <ul style="list-style-type: none"> an occupational health and safety team organisations and clients. 	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.1	Self-management	STAGE B: Learning the ropes
Learning Objective 67.1.1	Implement and model effective self-management practices	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • observation of the conduct of others' practices • discussion with peers and colleagues • seminars on practice management • seminars on various aspects of information technology. 		<ul style="list-style-type: none"> • 61.3: Communication with colleagues and the broader health care team • 64.1: Cultural competency
Scope of learning required		
See 'scope' comment for this learning objective in Stage A.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.1	Self-management	Stage A: The basics
Learning Objective 67.1.2	Identify personal attributes or health issues that could impair one's performance at work	
Knowledge		Skills
<ul style="list-style-type: none"> • describe the likely effects on medical practice of degenerative diseases that affect alertness, memory, reasoning, vision, hearing, balance, mobility, fine motor skills of the hands and stamina • describe the risk to others of personal infection, including the carrier state • describe the likely effects on medical practice of anxiety states, depression and other psychiatric conditions. 		<ul style="list-style-type: none"> • show insight into when one is exceeding one's abilities in routine or emergency situations • cope with competing demands on attention and time • organise, prioritise and influence others to do the same.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • guided instruction by mentor and peers, including from trainees in Stage C • textbooks reading • authoritative websites. 		<ul style="list-style-type: none"> • Learning objective 12.4.3: Manage adult patients with infectious diseases • Learning objective 12.6.1: Manage musculoskeletal or neurological conditions that affect or are affected by occupation or environment • Learning objective 12.6.2: Manage psychiatric conditions that affect or are affected by occupation or environment

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.1	Self-management	Stage A: The basics
Learning Objective 67.1.2	Identify personal attributes or health issues that could impair one's performance at work	
		<ul style="list-style-type: none"> Learning objective 20.2.5: Describe the potential health effects of common and important psychosocial hazards
Scope of learning required		
Focus your learning on physical and mental disabilities and how common diseases bring about these disabilities.		

THEME 67.2: LEADERSHIP AND MANAGEMENT OF OTHERS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows.

The sole learning objective within this theme is in Stage C.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.2	Leadership and Management of Others	Stage C: Approaching consultancy
Learning Objective 67.2.1	Demonstrate ability to provide leadership and effectively manage others	
Knowledge		Skills
<ul style="list-style-type: none"> discuss the principles and practices of effective leadership and team management describe the structure of the workplace, and the staff resources available recognise the importance and process/procedures for staff appraisal comment on the importance of constructive and consistent feedback to staff. 		<ul style="list-style-type: none"> demonstrate effective leadership skills manage staff and occupational health resources, including: <ul style="list-style-type: none"> assigning tasks and delegating coaching and mentoring as appropriate communicating effectively ensuring tasks are progressing as planned prioritising and allocating tasks during medical disasters prioritising tasks showing leadership conduct a staff appraisal give appropriate and helpful feedback to staff.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 67: Leadership and Management
Theme 67.2	Leadership and Management of Others	Stage C: Approaching consultancy
Learning Objective 67.2.1	Demonstrate ability to provide leadership and effectively manage others	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework related to management aspects of occupational medicine guided instruction by those with managerial, human resources and industrial relations background peer discussion authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Theme 61.3: Communication with colleagues and the broader health care team Theme 63.3: Educator
Scope of learning required		
This is gained by reflection and experience.		

Sub-domain 68: Health advocacy

The themes in Sub-domain 68 are:

68.1: Advocacy for the patient

68.2: Individual advocacy

68.3: Group advocacy

THEME 68.1: ADVOCACY FOR THE PATIENT

The sole learning objective within this theme appears in both Stage A and Stage B.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.1	Advocacy for the Patient	STAGE A: The basics
Learning Objective 68.1.1	Know and apply the key principles, processes and limitations of advocacy	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss key principles and processes of advocacy recognise the limitations of advocacy discuss the role of the community advocate/public guardian recognise that advocacy can be costly at a personal level identify and evaluate available community/family services discuss effective communication strategies for advocacy indicate when legal action or an appeals process on behalf of the patient is required. 	<ul style="list-style-type: none"> identify key issues for the patient and where he or she needs an advocate regarding: <ul style="list-style-type: none"> asthma support child care support disability services domestic violence/sexual assault education food and nutrition gay and lesbian resources housing immigration/refugee status job search and training respite care substance abuse/smoking cessation teen/youth resources communicate with community and family services elevate advocacy efforts as and when necessary. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> observation of the work of key members of well-established patient support groups experience at representing a patient's interests before a court, mediation, a hearing or an appeal observation of and discussion with people who are employed in an advocacy role, e.g. union officials, lawyers participation in seminars or workshops on advocacy, negotiation and mediation. 	<ul style="list-style-type: none"> Sub-domain 61: Communication Sub-domain 64: Cultural competency Theme 69.3: Prevention and control <p>Part of this learning objective appears in Stage B.</p>	

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.1	Advocacy for the Patient	STAGE A: The basics
Learning Objective 68.1.1	Know and apply the key principles, processes and limitations of advocacy	

Scope of learning required

As part of your training, you should attempt to participate in some role as an advocate. Reflect on what you did, the outcome, and the ways (if any) that it could have been done better. The preventive aspects of the practice of occupational and environmental medicine require advocacy.

In occupational and environmental medicine, the prevention of injury and illness is a core function. Advocacy can be for a group of workers or members of a community as well as for individual patients. Negotiation and mediation skills are of significant benefit to occupational physicians who may be involved in case management, e.g. return to work, involving adversarial parties.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.1	Advocacy for the Patient	STAGE B: Learning the ropes
Learning Objective 68.1.1	Know and apply the key principles, processes and limitations of advocacy	

Knowledge

In addition to knowledge gained in Stage A, knowledge in Stage B should include:

- discuss equal opportunity law as it applies to occupational medicine
- describe referral mechanisms for patients to legal and collective representations, e.g. law societies, dust disease boards, unions.

Skills

In addition to skills gained in Stage A, skills in Stage B should include:

- identify key issues for a patient and where he or she needs support, e.g. whether a worker-patient's health issue requires your advocacy on behalf of other workers as well
- identify potential barriers to change and develop appropriate strategies to overcome these.

Suggested ways to learn

- observation of the work of key members of well-established patient support groups
- experience at representing a patient's interests before a court, mediation, hearing or appeal
- observation of and discussion with people who are employed in an advocacy role, e.g. union officials, lawyers
- participation in seminars or workshops on advocacy, negotiation and mediation.

Links to other parts of the curriculum

- Sub-domain 61: Communication
- Sub-domain 64: Cultural competency
- Theme 69.3: Prevention and control
- Learning objective 80.1.2: Define and negotiate the standards of fitness required (refers to fitness for work and equal opportunity/disability discrimination law)

Scope of learning required

This is gained by reflection and experience.

THEME 68.2: INDIVIDUAL ADVOCACY

The sole learning objective within this theme appears in both Stage A and Stage B.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.2	Individual Advocacy	Stage A: The basics
Learning Objective 68.2.1	Identify and address key issues affecting personal work environment and recognise the role of advocacy	
Knowledge		Skills
<ul style="list-style-type: none"> evaluate the work environment, including policies, practices and governance identify factors that may adversely affect the work environment, e.g. undue stress, systems, procedures, processes, access to training identify key principles and processes of advocacy recognise the limitations of advocacy. 		<ul style="list-style-type: none"> prepare effective written or verbal arguments for change.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> observation of the work of key members of well-established patient support groups experience at representing a patient's interests before a court, mediation, a hearing or an appeal observation of and discussion with people who are employed in an advocacy role, e.g. union officials, lawyers participation in seminars or workshops on advocacy and negotiation. 		<ul style="list-style-type: none"> Theme 62.2: Safe practice Theme 62.3: Identification, prevention and management of potential harm Theme 65.2: Personal ethics <p>Part of this learning objective appears in Stage B.</p>
Scope of learning required		
<p>As part of your training, you should attempt to participate in some role as an advocate. Reflect on what you did, the outcome, and the ways (if any) that it could have been done better. The preventive aspects of the practice of occupational and environmental medicine require advocacy.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.2	Individual Advocacy	STAGE B: Learning the ropes
Learning Objective 68.2.1	Identify and address key issues affecting personal work environment and recognise the role of advocacy	
Knowledge		Skills
As for Stage A.		In addition to the skill gained in Stage A, skills in Stage B should include: <ul style="list-style-type: none"> • build support from colleagues and/or the community to promote change • take action to bring about effective change • take on a leadership role.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • observation of the work of key members of well-established patient support groups • experience at representing a patient's interests before a court, mediation, a hearing or an appeal • observation of and discussion with people who are employed in an advocacy role, e.g. union officials, lawyers • participation in seminars or workshops on advocacy and negotiation. 		<ul style="list-style-type: none"> • Theme 62.2: Safe practice • Theme 62.3: Identification, prevention and management of potential harm • Theme 65.2: Personal ethics
Scope of learning required		
See 'scope' comment for this learning objective in Stage A.		

THEME 68.3: GROUP ADVOCACY

The sole learning objective within this theme appears in both Stage A and Stage C.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.3	Group Advocacy	Stage A: The basics
Learning Objective 68.3.1	Demonstrate an understanding of the necessary steps required to effect change within organisations and the community	
Knowledge		Skills
<ul style="list-style-type: none"> identify population groups with particular health needs, e.g. refugees, aged, rural/remote communities discuss relevant public health issues evaluate relevant political, governmental, and institutional systems relating to health care discuss relevant key policies, practices and laws that affect specific groups of people, e.g. equal opportunity and disability discrimination legislation. 		<ul style="list-style-type: none"> work in a team.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> observation of the work of key members of environmental or occupational activist groups or of political parties observation of and discussion with people who are employed in an advocacy role, e.g. union officials, lawyers participation in seminars or workshops on advocacy and negotiation. 		<ul style="list-style-type: none"> Theme 65.1: Professional ethics Theme 65.3: Ethics and health law Theme 69.4: Priority population groups <p>Much of this learning objective appears in Stage C.</p>
Scope of learning required		
<p>The preventive aspects of the practice of occupational and environmental medicine require advocacy. In some activities, you may need to distinguish your role as a medical practitioner from that of a health-interested community representative of a cause.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 68: Health Advocacy
Theme 68.3	Group Advocacy	STAGE C: Approaching consultancy
Learning Objective 68.3.1	Demonstrate an understanding of the necessary steps required to effect change within organisations and the community	
Knowledge		Skills
As for Stage A.		<p>In addition to the skill gained in Stage A, skills in Stage C should include:</p> <ul style="list-style-type: none"> • advocate for change in legal requirements • advocate for appropriate occupational health resource allocation • develop, coordinate and work within an occupational health unit in a remote location or safety critical industry • gain the necessary support to effect change • identify barriers and ways to overcome them • work within an organisation to influence leaders • work with the media • undertake political lobbying or advocacy in regard to public policy.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • observation of the work of key members of environmental or occupational activist groups or of political parties • observation of and discussion with people who are employed in an advocacy role, e.g. union officials, lawyers • participation in seminars or workshops on advocacy and negotiation. 		<ul style="list-style-type: none"> • Theme 65.1: Professional ethics • Theme 65.3: Ethics and health law • Theme 69.4: Priority population groups
Scope of learning required		
See 'scope' comment for this learning objective in Stage A.		

Sub-domain 69: The broader context of health

The themes in Sub-domain 69 are:

- 69.1: Burden of disease
- 69.2: Determinants of health
- 69.3: Prevention and control
- 69.4: Priority population groups
- 69.5: Economics of health

THEME 69.1: BURDEN OF DISEASE

The sole learning objective within this theme appears in both Stage A and Stage B.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.1	Burden of Disease	STAGE A: The basics
Learning Objective 69.1.1	Demonstrate an awareness of the health priorities for the local community, and more broadly for Australia and New Zealand	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss key public health problems and health needs of priority population groups, e.g. Māori and Pacific Islander health, Aboriginal and Torres Strait Islander health • identify the major burden of disease in Australia and New Zealand • recognise the importance of capturing information consistently over time • recognise indicators for measuring health status, such as: <ul style="list-style-type: none"> • aggregate health indicators • causes of decreased quality of life, e.g. through chronic disease or disability • hospitalisation rates • injury rates • measures of positive dimensions of health • mortality, e.g. infant mortality, life expectancy, cancer deaths • recognise the National Health Priority Areas (NHPAs), and risk factors, in Australia: <ul style="list-style-type: none"> • arthritis and other musculoskeletal conditions • asthma • cancer • cardiovascular disease • diabetes • injury • mental health 		<ul style="list-style-type: none"> • analyse population health status data to identify health issues, including: <ul style="list-style-type: none"> • factors related to good health • leading causes of death • leading causes of hospitalisation • most commonly reported chronic conditions • most common notifiable diseases.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.1	Burden of Disease	STAGE A: The basics
Learning Objective 69.1.1	Demonstrate an awareness of the health priorities for the local community, and more broadly for Australia and New Zealand	
<ul style="list-style-type: none"> recognise the NHPAs, and risk factors, in New Zealand: <ul style="list-style-type: none"> alcohol and illicit and other drug use cancer cardiovascular disease child health and immunisation diabetes mental health nutrition obesity oral health physical activity smoking suicide violence. 		
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> various publications of government departments of health and social security national published lists of health priorities journal articles that refer to differing incidence and prevalence of health-related occurrences among different community groups. 	<ul style="list-style-type: none"> Theme 63.1: Ongoing learning 	
Scope of learning required		
You need to have a broad awareness of health status indicators, national health priorities, health-disadvantaged populations, and common chronic diseases.		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.1	Burden of Disease	STAGE B: Learning the ropes
Learning Objective 69.1.1	Demonstrate an awareness of the health priorities for the local community, and more broadly for Australia and New Zealand	
Knowledge		Skills
As for Stage A.		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> analyse and be aware of changing trends in occupational disease in the broader community analyse population health status data to identify health issues, including: <ul style="list-style-type: none"> health conditions affecting safety at work health conditions related to employment, e.g. proclaimed diseases apply evidence-based occupational medicine of disease trends to daily practice, e.g. health effects of emerging new technologies such as nanotechnology, trends in occupational asthma utilise disease patterns to inform and contextualise clinical practice.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> various publications of government departments of health and social security national published lists of health priorities journal articles that refer to differing incidence and prevalence of health-related occurrences among different community groups. 		<ul style="list-style-type: none"> Theme 63.1: Ongoing learning
Scope of learning required		
See 'scope' comment for this learning objective in Stage A.		

THEME 69.2: DETERMINANTS OF HEALTH

The sole learning objective within this theme appears in both Stage A and Stage B.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.2	Determinants of Health	Stage A: The basics
Learning Objective 69.2.1	Identify and define the determinants of health	
Knowledge		Skills
<ul style="list-style-type: none"> identify and define socio-economic, environmental, behavioural, biomedical and genetic determinants of health. 		<ul style="list-style-type: none"> assess the effects of work and social gradient on a person's health.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> courses that refer to health determinants various publications of government departments of health, the World Health Organisation and the International Labour Organisation local statistics of compensation-related disease health promotion texts and courses peer-group discussion. 		Part of this learning objective appears in Stage B.
Scope of learning required		
<p>You should be particularly aware of the main occupational and environmental influences on health. Be aware of useful targets for health promotion in the various workplaces that you serve. You need to recognise that any individual may be susceptible to disease because of multiple individual and environmental (including occupational) factors, and that this is so even when one single factor is nominated as the cause of his or her health decline. It is important that you are aware of the varying capacity of disease registers to capture data on the cases of the registrable diseases, i.e. ascertain their quality before accepting their statistics.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.2	Determinants of Health	Stage B: Learning the ropes
Learning Objective 69.2.1	Identify and define the determinants of health	
Knowledge		Skills
As for Stage A.		<p>In addition to the skill gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> use evidence from research and other sources to link health issues to their determinants and to clarify the dynamics by which these factors combine to cause health or illness, e.g. health affects of emerging new technologies such as nanotechnology, trends in occupational asthma.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> courses that refer to health determinants various publications of government departments of health, the World Health Organisation and the International Labour Organisation local statistics of compensation-related disease health promotion texts and courses peer-group discussion. 		<ul style="list-style-type: none"> Learning objective 20.3.1: Outline the major hazards commonly found in nominated workplaces Learning objective 64.1.3: Apply specific knowledge of the patient's cultural and religious background, attitudes and beliefs in managing and treating the patient Learning objective 90.1.1: Define <i>environment</i> and factors that influence occurrence of exposure and the susceptibility of individuals or groups
Scope of learning required		
See 'scope' comment for this learning objective in Stage A.		

THEME 69.3: PREVENTION AND CONTROL

The sole learning objective within this theme appears in both Stage A and Stage B.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.3	Prevention and Control	STAGE A: The basics
Learning Objective 69.3.1	Adopt a population health approach to the prevention of illness, promotion of health and control of disease	
Knowledge		Skills
<ul style="list-style-type: none"> outline the principles of illness prevention (1°, 2°, 3° prevention) and screening define the principles of epidemic control define the principles of infection control discuss the importance, use, benefits, costs and side-effects of screening discuss the use of patient registers and disease recall systems discuss notifiable diseases and their reporting process. 		<ul style="list-style-type: none"> promote participation in appropriate prevention or screening programs identify and define biomedical, environmental, genetic and socio-economic risk factors and risky health behaviours and know where preventive effort can be best applied demonstrate a working knowledge of the principles of immunisation and epidemic control utilise homes, educational settings, workplaces and communities as settings that actively promote healthy lifestyles improve screening uptake for high-risk population groups, such as older people and indigenous populations.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> courses that refer to the prevention of disease health promotion texts and courses various publications of government departments of health, the World Health Organisation and the International Labour Organisation. 		<ul style="list-style-type: none"> Theme 64.1: Cultural competency Theme 68.1: Advocacy for the patient Theme 68.3: Group advocacy <p>Part of this learning objective appears in Stage B.</p>
Scope of learning required		
<p>You need to become aware of means of preventing all well-recognised health conditions that are reasonably attributed to occupation or environment, the application of the hierarchy of control, and the rough-approximate cost of doing this. Be aware of useful targets for health promotion in the various workplaces that you serve. You need to be able to recognise that any individual may be susceptible to disease because of multiple individual and environmental (including occupational) factors, and that this is so even when one single factor is nominated as the cause of his or her health decline. It is important that you are aware of the varying capacity of disease registers to capture data on the cases of the registrable diseases.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.3	Prevention and Control	STAGE B: Learning the ropes
Learning Objective 69.3.1	Adopt a population health approach to the prevention of illness, promotion of health and control of disease	
Knowledge		Skills
<p>In addition to knowledge gained in Stage A, knowledge in Stage B should include:</p> <ul style="list-style-type: none"> discuss the economics of prevention and health promotion, including the influence of compensation mechanisms identify and evaluate sources of data on occupational disease and injury and their (likely) reliability. 		<p>In addition to skills gained in Stage A, skills in Stage B should include:</p> <ul style="list-style-type: none"> apply knowledge of occupational health surveillance demonstrate a capacity to develop, coordinate and analyse the results from an occupational health surveillance program develop a pandemic plan develop organisational plans for healthy eating, weight reduction, physical activity, smoking cessation and drug and alcohol abuse prevention improve screening and early detection opportunities for high-risk population groups, such as older people and indigenous populations, and specific occupational groups at risk of workplace exposures provide meaningful data and outcomes to employers and workers.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> courses that refer to the prevention of disease health promotion texts and course various publications of government departments of health, the World Health Organisation and the International Labour Organisation. 		<ul style="list-style-type: none"> Learning objective 64.1.2: Demonstrate the ability to communicate effectively with people from culturally and linguistically diverse backgrounds Theme 68.1: Advocacy for the patient Theme 68.3: Group advocacy
Scope of learning required		
See 'scope' comment for this learning objective in Stage A.		

THEME 69.4: PRIORITY POPULATION GROUPS

The sole learning objective within this theme is in Stage A.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.4	Priority Population Groups	STAGE A: The basics
Learning Objective 69.4.1	Implement strategies to reduce inequities in health status between population groups	
Knowledge		Skills
<ul style="list-style-type: none"> identify population characteristics that lead to inequality in health status, e.g. age, socio-economic status, geography, disability, gender and culture discuss health inequities in relation to priority population groups: <ul style="list-style-type: none"> indigenous people people from culturally and linguistically diverse groups people living in rural/remote areas people who are socio-economically disadvantaged people with a disability prisoners veterans discuss key reasons for health outcomes among Māori and Pacific Peoples and Aboriginal/Torres Strait Islander groups being worse than those among other minority groups with comparable socio-economic status. 		<p>The RACP PQC lists no skills for this learning objective. Accordingly it was decided to retain this learning objective in Stage A rather than placing it later.</p>
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> various publications of government departments of health and social security publications relating to the health of indigenous peoples journal articles that refer to differing incidence and prevalence of health-related occurrences among different community groups. 		<ul style="list-style-type: none"> Theme 64.1: Cultural competency Theme 68.3: Group advocacy
Scope of learning required		
<p>To undertake this role requires a combination of cultural sensitivity and advocacy.</p> <p>You should demonstrate in clinical interactions a manner that welcomes and enables a patient from a different culture to speak of his or her background, previous experiences of medical treatment, use of alternative therapies, spiritual beliefs relating to illness, people close to the patient who assist the making of health care decisions, and the meaning of the illness to the patient.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.4	Priority Population Groups	STAGE A: The basics
Learning Objective 69.4.1	Implement strategies to reduce inequities in health status between population groups	
<p>As part of your training, you should attempt to participate in some role as an advocate. You are advised to reflect on what you did, the outcome, and the ways (if any) that it could have been done better. The preventive aspects of the practice of occupational and environmental medicine require advocacy.</p>		

THEME 69.5: ECONOMICS OF HEALTH

The sole learning objective within this theme appears in both Stage A and Stage C.

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.5	Economics of Health	STAGE A: The basics
Learning Objective 69.5.1	Demonstrate a basic understanding of the societal, political and economic pressures that influence the way funding is provided and used	
Knowledge		Skills
<ul style="list-style-type: none"> identify who provides and funds services, and what types of services are funded discuss measures of cost effectiveness and anticipated positive health outcomes discuss protocol and processes of interaction between the patient and available health system resources describe economic implications of policies and procedures that support safe practice. 		The RACP PQC lists no basic-stage skills for this learning objective.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> courses and seminars on the topic of the health economics. 		The skills for this learning objective are found in Stage C.
Scope of learning required		
<p>You should take a broad view of the political and economic factors that determine the overall budget for a nation's health care and the major factors that influence funding within this.</p>		

DOMAIN 60	PROFESSIONAL QUALITIES	Sub-domain 69: The Broader Context of Health
Theme 69.5	Economics of Health	Stage C: Approaching consultancy
Learning Objective 69.5.1	Demonstrate a basic understanding of the societal, political and economic pressures that influence the way funding is provided and used	
Knowledge		Skills
As for Stage A.		<ul style="list-style-type: none"> develop an argument based on cost-benefit analysis for a particular service prioritise and allocate resources in accordance with quality and safety principles.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> courses and seminars on the topic of the health economics academic coursework related to management aspects of occupational medicine observation of the work of key members of environmental or occupational activist groups or of political parties guided instruction by those with managerial background peer discussion interaction with unions, employers and insurers. 		<ul style="list-style-type: none"> Theme 50.4: Management and marketing an independent occupational health service within an organisation
Scope of learning required		
<p>You need a broad understanding of this to function effectively as an occupational and environmental physician. The ability to prioritise and allocate resources in accordance with quality and safety principles is particularly important in occupational medicine where you may be required to make a business case to management for funding of an occupational health initiative.</p>		

DOMAIN 70: LAW AND MEDICINE

The themes in Domain 70 are:

70.1: Relevant laws and their administration

70.2: Industrial relations

70.3: The legal process

THEME 70.1: RELEVANT LAWS AND THEIR ADMINISTRATION

The sole learning objective within this theme is in Stage B.

DOMAIN 70		LAW AND MEDICINE	
Theme 70.1		Relevant Laws and Their Administration	STAGE B: Learning the ropes
Learning Objective 70.1.1		Locate and interpret legislation applicable to specific hazards in workplaces and the environment	
Knowledge		Skills	
<ul style="list-style-type: none"> describe how laws arise and generally what may be expected within an act as distinct from regulation or code of practice or guideline explain the purpose of laws relevant to workplaces and the environment and their administering authorities describe types and tiers of law explain the purpose of non-legislated guides and standards identify web locations (where available) of this information. 		<ul style="list-style-type: none"> discern the essential issues relevant to a particular situation from laws, standards, codes and guides decide an appropriate course of action when the law that applies does not make a clear reference to the type of situation at hand. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in legal and management aspects of occupational health guided instruction by occupational health professionals guided instruction by those with managerial, human resources and industrial relations background peer discussion about legal issues that involve occupational medicine practice textbooks and journals presenting at trainee meetings authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Theme 20.3: Assessment and control of work-related hazards Learning objective 80.2.1: Develop a rehabilitation policy at a workplace Learning objective 90.1.3: Describe the process of development of environmental standards for hazards arising from workplaces 	

DOMAIN 70	LAW AND MEDICINE	
Theme 70.1	Relevant Laws and Their Administration	STAGE B: Learning the ropes
Learning Objective 70.1.1	Locate and interpret legislation applicable to specific hazards in workplaces and the environment	
Scope of learning required		
<p>You need to gain a working understanding of relevant laws, standards, codes and guides. The full meaning of law can sometimes be buried in its convolutions, so guided interpretation by a lawyer will often assist your understanding of how a law works in practice - the sections of a statute that are pivotal, and those that are seldom applied. Statutes can be opaque because a person reading them may not realise what the really important parts are, but at least the wording of statutes is readily accessible on the web. The details of common law - law made by judges - is generally less readily accessible to those outside areas of legal practice yet, in occupational and environmental health, its influence can be great because tort cases involve exchange of large sums of money.</p>		

THEME 70.2: INDUSTRIAL RELATIONS

The sole learning objective within this theme is in Stage B.

DOMAIN 70	LAW AND MEDICINE	
Theme 70.2	Industrial Relations	STAGE B: Learning the ropes
Learning Objective 70.2.1	Describe the process of reaching industrial agreements and their influence on health and safety	
Knowledge		Skills
<ul style="list-style-type: none"> recognise local industrial relations mechanisms and their documented effects on health and safety recognise the vigour of activism by local employee representatives and advocates describe the nature of employer responses to this. 		<ul style="list-style-type: none"> discern the physiological basis of an industrial agreement, e.g. on fatigue or shift work, from overlays generated by industrial negotiation.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in legal and management aspects of occupational health guided instruction by occupational health professionals guided instruction by those with managerial, human resources and industrial relations background peer discussion about legal issues that involve occupational medicine practice textbooks and journals authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 50.1.2: Outline the purpose of government regulators, trade unions and special interest groups
Scope of learning required		
This will vary between Australia and New Zealand. You should be able to describe the influence of industrial relations in a large workplace and how this may affect the implementation of programs, e.g. on screening or return to work.		

THEME 70.3: THE LEGAL PROCESS

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
Nil
Advanced Stage B: Learning the Ropes
70.3.1 Describe courts and their procedures
Advanced Stage C: Approaching Consultancy
70.3.2 Prepare a medical report for the purposes of a legal process

DOMAIN 70	LAW AND MEDICINE	
Theme 70.3	The Legal Process	STAGE B: Learning the ropes
Learning Objective 70.3.1	Describe courts and their procedures	
Knowledge	Skills	
<ul style="list-style-type: none"> describe the purpose of courts describe constraints on what is submitted or spoken as expert evidence discuss the roles of medical panels and medical referees. 	<ul style="list-style-type: none"> prepare a medical report to serve a legal process. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in legal and management aspects of occupational health interaction with lawyers attending court peer discussion about legal issues textbooks and journals authoritative websites. 	<ul style="list-style-type: none"> Learning objective 20.3.4: Compile a report of a workplace assessment that can be understood by people without scientific expertise Learning objective 61.4.2: Demonstrate the ability to apply specific medico-legal communication practices 	
Scope of learning required		
<p>You should develop the ability to contribute effectively to a legal process, either by crafting a report or orally in briefing a lawyer or in the witness box. Understanding of courts and their procedures should be directed at that.</p> <p>A report prepared for medico-legal purposes forms part of the communication portfolio.</p>		

DOMAIN 70		LAW AND MEDICINE	
Theme 70.3		The Legal Process	STAGE C: Approaching consultancy
Learning Objective 70.3.2		Prepare a medical report for the purposes of a legal process	
Knowledge		Skills	
<ul style="list-style-type: none"> list the rules for giving expert evidence recognise the broad content of laws that relate to compensation for afflictions to which work or environment has contributed discuss typical requirements of lawyers and insurers who request such reports discuss the purpose of the report and matters to be addressed recognise the published guidelines for preparing such a report, e.g. by the worker's compensation authority discuss the equipment required to conduct the consultation. 		<ul style="list-style-type: none"> ensure that the person being examined understands the nature of the consultation prepare a medical report to serve a legal process. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by an occupational physician guidance by a person with knowledge of courtroom procedure and etiquette peer discussion about successful (or otherwise) approaches to similar problems presenting at trainee meetings authoritative websites simply doing it. 		<ul style="list-style-type: none"> Learning objective 20.3.4: Compile a report of a workplace assessment that can be understood by people without scientific expertise Learning objective 80.1.5: Plan and implement a return to work plan for an employee 	
Scope of learning required			
<p>The ability to read and write reports prepared to serve a legal process is a skill that needs to be highly developed in occupational physicians. The written or practical examination in Stage B may have included a question as part of a broader scenario that was worded something like "What will you say to the lawyer or to the insurer?" However, the main situation in which this skill will be tested is in the communication portfolio.</p> <p>For examination purposes, you do not need to quote sections of an Act, but you should know the general purposes for which compensation is provided by both statute and common law, e.g. incapacity payments which may be time-limited, payment of medical expenses, lump sums for impairment.</p>			

DOMAIN 80: FITNESS AND RETURN TO WORK

The themes in Domain 80 are:

80.1: Assessment of fitness for work

80.2: Development and implementation of a vocational rehabilitation policy and program

The assessment of a person's fitness (or continuing fitness) for work, especially for the performance of a safety-critical role, is among the most demanding tasks in the practice of occupational medicine. This is particularly so when the person being assessed has several chronic pathologies, none of which is enough on its own to sway a decision on fitness for the role but, when taken together, they seem likely to increase the risk of a lapse in performance. Quite often, the evidence base for such decisions is thin, so to confront this person with a decision that means the likely loss of high-status or well-paid work taxes the physician's current knowledge of that occupation and of medicine, and his or her wisdom and mettle.

THEME 80.1: ASSESSMENT OF FITNESS FOR WORK

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics

Nil

Advanced Stage B: Learning the Ropes

- 80.1.1 Assess the task demands and environment of the work of an employee
- 80.1.2 Define and negotiate the standards of fitness required
- 80.1.3 Perform a clinical assessment of a person's fitness for work
- 80.1.4 Describe the consequences of injury or illness and, in particular, its effect on a person's ability to work
- 80.1.5 Prepare and implement a return to work or rehabilitation plan for an employee
- 80.1.6 Discuss with a patient the implications for employment of medication and convalescence from procedures

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 80	FITNESS AND RETURN TO WORK	
Theme 80.1	Assessment of Fitness for Work	STAGE B: Learning the ropes
Learning Objective 80.1.1	Assess the task demands and environment of the work of an employee	
Knowledge		Skills
<ul style="list-style-type: none"> define common terms used to describe body actions and the ways of moving articles at work determine the weight, surface texture, conspicuity* and awkwardness of moving articles handled commonly in daily life so as to enable analogies to be used when speaking to others about task demands. 		<ul style="list-style-type: none"> conduct a focussed walkthrough of a workplace directed at the placement of a worker assess the tasks being undertaken by the worker assess the organisational demands on the worker and how they affect day to day work.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> academic coursework in vocational rehabilitation and assessing fitness guided instruction by occupational physicians and rehabilitation physicians peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meetings authoritative websites interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 20.2.4: Describe the potential health effects of common and important design hazards Learning objective 20.2.5: Describe the potential health effects of common and important psychosocial hazards Learning objective 20.3.2: Describe the general principles of workplace assessment Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment
Scope of learning required		
You should develop a broad and high level of knowledge and skill here so that you may walk through any workplace and apply relevant principles to your assessment.		

* *conspicuity* is the property of an object of interest or importance that helps it stand out amid a clutter of other things, e.g. a broken glass amid 30 other items being washed, a 'give way' sign against a background of vividly decorated shop windows, or flashing lights at a level crossing in the glare of bright sunlight.

DOMAIN 80		FITNESS AND RETURN TO WORK	
Theme 80.1		Assessment of Fitness for Work	STAGE B: Learning the ropes
Learning Objective 80.1.2		Define and negotiate the standards of fitness required	
Knowledge		Skills	
<ul style="list-style-type: none"> identify the likely requirements for strength, stamina, alertness, responsiveness, judgment and consistent performance for common occupational roles discuss the standards of fitness laid down by relevant legislation or industry standards recognise equal opportunity and/or disability discrimination law. 		<ul style="list-style-type: none"> discern and refuse to accept standards or schedules of fitness testing that are not congruent with work requirements. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in vocational rehabilitation guided instruction by occupational physicians and rehabilitation physicians peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meetings authoritative websites reflective application of basic medical knowledge interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment Learning objective 70.2.1: Describe the process of reaching industrial agreements and their influence on health and safety Learning objective 80.1.1: Assess the task demands and environment of the work of an employee 	
Scope of learning required			
<p>You should know how these standards are generated, who is involved, where to find them, and how variation in the application of standards is likely to be tolerated.</p>			

DOMAIN 80		FITNESS AND RETURN TO WORK	
Theme 80.1		Assessment of Fitness for Work	STAGE B: Learning the ropes
Learning Objective 80.1.3		Perform a clinical assessment of a person's fitness for work	
Knowledge		Skills	
<ul style="list-style-type: none"> • discuss the schedule of items for the level of fitness required (and justified) for the work involved • identify special rules on fitness for driving (personal, heavy vehicle, rail, crane, fork lift), fitness for air crew and for diving • recognise local laws and guidelines on incapacity payments and return to work • define appropriate placements for people with disabilities • discuss ways to maintain people at work who are no longer able to meet the demands of their job, e.g. through illness that is not work-related. 		<ul style="list-style-type: none"> • perform a careful, well-targeted occupational history • imagine or visualise a worker's daily activities based on a careful occupational history and persist sufficiently in questioning to obtain this • make timely and appropriate liaison with other health care professionals involved in a worker's care • garner relevant information about the requirements of a job and its ambience from a telephone conversation with an employer representative • question workers and employer representatives in ways that serve to cross-check subjective remarks • handle adeptly a situation where a worker is found not to be fit according to the examination standard (includes management of anger). 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • academic coursework in vocational rehabilitation • guided instruction by occupational physicians and rehabilitation physicians • peer discussion about successful (or otherwise) approaches to similar problems • textbooks and journals • presenting at trainee meetings • authoritative websites • reflective application of basic medical knowledge • interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> • Learning objective 11.1.2: Conduct an appropriate physical examination • Learning objective 11.1.5: Take, record and analyse an occupational and environmental history from an individual • Learning objective 67.1.2: Identify personal attributes or health issues that could impair one's performance at work 	
Scope of learning required			
<p>This is central to the practice of occupational medicine. During the course of your training, you are expected to have assessed the fitness for work of workers with many different types of disability for many different types of work. Tables or schedules of body systems to assess would be provided for any examination question on driving or where specific industry standards applied. You are not expected to learn the content of a book such as the <i>Austroads guide to assessing fitness to drive</i> but, if provided with an extract of such a document in the examination, you would be expected to be able to interpret it with ease. It is suggested that you find it and look through it beforehand. From the search engine, enter 'Austroads assessing fitness to drive'. Open the home page of 'Assessing fitness to drive.' Click on the PDF button of 'Assessing fitness to drive'.</p> <p>The Austroads guide is highlighted because it particularly shows the interaction between common afflictions and one's ability to perform a common task. Some safety-critical occupations also have guides to fitness, e.g. rail, aviation.</p>			

DOMAIN 80		FITNESS AND RETURN TO WORK	
Theme 80.1	Assessment of Fitness for Work	STAGE B: Learning the ropes	
Learning Objective 80.1.4	Describe the consequences of injury or illness and, in particular, its effect on a person's ability to work		
Knowledge		Skills	
<ul style="list-style-type: none"> differentiate between impairment, functional capacity and social participation and recognise that severe impairment is not necessarily mirrored by a major change to social participation and vice versa discuss methods of writing workers' compensation reports that refer to fitness for work or impairment assessment discuss the application of the various guides to assessing impairment in Australia and New Zealand recognise WHO international classification of functioning, disability and health describe the likely effect of levels of substance use on impairment. 		<ul style="list-style-type: none"> from clinical and occupational history-taking and careful physical examination, estimate the level of a person's impairment, the nature of a person's disability and which roles in life a person can perform initiate management on the basis of clinical findings. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by occupational and rehabilitation physicians peer discussion about successful, or otherwise, approaches to similar problems, including with trainees in Stage C textbooks such as <i>Fitness for work</i> or <i>American Medical Association guide to the evaluation of permanent impairment</i> presenting cases at trainee meetings authoritative websites reflective application of basic medical knowledge. 		<ul style="list-style-type: none"> Learning objective 11.1.2: Conduct an appropriate physical examination Sub-domain 12: Medical expertise Theme 12.6: Diseases affected by occupation and environment and their consequences 	
Scope of learning required			
<p>You should know about the approach that is used to score the level of a person's impairment, but your examination will not require you to undertake a numerical assessment of impairment. On the other hand, you would be expected to carefully and comprehensively prepare a certificate of capacity for work and could be asked in an examination what you would write on such a certificate.</p> <p>The terms <i>functional capacity</i> and <i>social participation</i> are now preferred to the older terms of disability and handicap. This change in terminology is preferred because it emphasises what a person can do rather than what he or she cannot do. It is found in the WHO publication entitled <i>International classification of functioning, disability and health</i>. The term disability still applies to compensation where monetary settlements are made on the basis of loss. The classification of functioning, disability and health is somewhat more sophisticated in concept than <i>impairment, disability and handicap</i>; the former employs a matrix which inevitably adds complexity.</p>			

DOMAIN 80		FITNESS AND RETURN TO WORK	
Theme 80.1		Assessment of Fitness for Work	STAGE B: Learning the ropes
Learning Objective 80.1.5		Prepare and implement a return to work or rehabilitation plan for an employee	
Knowledge		Skills	
<ul style="list-style-type: none"> • identify determinants of disability • discuss chronic pain management strategies • evaluate the ability of the workplace to provide specific rehabilitation duties for an ill or injured employee • evaluate the design of workstations, e.g. bench heights and tool design, to accommodate a worker's reduced abilities • discuss psychosocial and/or cultural factors that may influence the return to work of an injured employee and use appropriate resources to deal with these factors • describe the development of an evidence-based return to work plan. 		<ul style="list-style-type: none"> • advise a worker with injury about prognosis and employment-related issues • facilitate early referral to another specialist where necessary for diagnosis and management and monitor the progress • assess the degree of impairment and disability which may present in an injured or ill employee and determine capacity for work • apply the rehabilitation process to employees returning to work after an absence due to any illness or disability • manage and coordinate a return-to-work plan, including to negotiate graded increases in loads and hours with interested parties including, of course, the patient • manage interaction between health professionals in different disciplines. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> • academic coursework in vocational rehabilitation • guided instruction by occupational physicians and rehabilitation physicians • peer discussion about successful (or otherwise) approaches to similar problems • textbooks and journals • presenting at trainee meetings • authoritative websites • reflective application of basic medical knowledge • interaction with workers, unions, employers and insurers. 		<ul style="list-style-type: none"> • Learning objective 70.3.2: Prepare a medical report for the purposes of a legal process • Learning objective 80.2.1: Develop a rehabilitation policy at a workplace 	
Scope of learning required			
You should develop a high level of knowledge and skill here.			

DOMAIN 80		FITNESS AND RETURN TO WORK	
Theme 80.1	Assessment of Fitness for Work	STAGE B: Learning the ropes	
Learning Objective 80.1.6	Discuss with a patient the implications for employment of medication and convalescence from procedures		
Knowledge		Skills	
<ul style="list-style-type: none"> describe the consequences of therapeutic drug use on a worker's performance describe the consequences of surgical procedures on a worker's performance and the likely period of recovery for procedures affecting a worker's mobility or stamina. 		<ul style="list-style-type: none"> evaluate the likely effect of described work conditions on health, given a worker's individual circumstances where a worker has limited capacity for work, explain and negotiate a plan for his or her return to work. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> reflective application of basic medical knowledge, including pharmacodynamics and pharmacokinetics use of therapeutic guidelines textbook and journal reading authoritative websites presenting and discussing cases with colleagues. 		<ul style="list-style-type: none"> Theme 11.2: Patient care and therapeutics Theme 61.1: Physician-patient communication 	
Scope of learning required			
<p>You should know the pharmacology, including the side-effects, of broad classes of medically prescribed drugs and complementary therapies. In particular, you should be thoroughly prepared to discuss therapeutic agents that are known to produce a sustained or episodic alteration to a patient's level of consciousness, alertness, mood or stamina. You need to know the drugs that are widely prescribed by GPs and the classes to which those drugs belong.</p> <p>However, you are not expected to commit to memory the individual features of uncommonly prescribed drugs. If such details were required as part of an examination process, they would be provided.</p> <p>You need to have a broad concept of recovery periods from surgical procedures, whilst realising that these may need to be adjusted, sometimes quite widely, to allow for individual circumstances.</p>			

THEME 80.2: DEVELOPMENT AND IMPLEMENTATION OF A VOCATIONAL REHABILITATION POLICY AND PROGRAM

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
Nil
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
80.2.1 Develop a rehabilitation policy at a workplace
80.2.2 Implement and evaluate a rehabilitation plan for an employer

DOMAIN 80	FITNESS AND RETURN TO WORK	
Theme 80.2	Development and Implementation of a Vocational Rehabilitation Policy and Program	STAGE C: Approaching consultancy
Learning Objective 80.2.1	Develop a rehabilitation policy at a workplace	
Knowledge	Skills	
<ul style="list-style-type: none"> discuss the nature of the workplace and history of vocational rehabilitation activities run there determine the scope of the likely program that will be based on the policy, including links with external bodies such as employee assistance programs recognise legislative requirements of a rehabilitation policy assess perceived desire for this policy among senior management and production staff recognise relevant laws, standards, codes and guides. 	<ul style="list-style-type: none"> advise on procedures to implement rehabilitation. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous academic coursework in vocational rehabilitation guided instruction by an occupational physician or rehabilitation physician guided instruction by those with managerial, human resources and industrial relations background 	<ul style="list-style-type: none"> Learning objective 50.4.1: Identify the health and safety needs of an organisation 	

DOMAIN 80	FITNESS AND RETURN TO WORK	
Theme 80.2	Development and Implementation of a Vocational Rehabilitation Policy and Program	STAGE C: Approaching consultancy
Learning Objective 80.2.1	Develop a rehabilitation policy at a workplace	
	<ul style="list-style-type: none"> • peer discussion about successful (or otherwise) approaches to similar problems • presenting at trainee meetings • guiding trainees in Stages A and B • authoritative websites. 	
Scope of learning required		
You are encouraged to envisage what different situations could arise in a remote workplace, a small workplace, a mobile workplace (ship, bus company, or haulier) and a workplace with limited supervision.		

DOMAIN 80	FITNESS AND RETURN TO WORK	
Theme 80.2	Development and Implementation of a Vocational Rehabilitation Policy and Program	STAGE C: Approaching consultancy
Learning Objective 80.2.2	Implement and evaluate a rehabilitation program for an employer	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss legislative requirements concerning rehabilitation of ill or injured workers • locate information needed to monitor the implementation and effectiveness of the program • define the range and nature of the tasks in work areas where rehabilitation is required • explain how to manage difficult patients, employers and treating doctors. 		<ul style="list-style-type: none"> • assess potential alternative jobs for injured or ill employees • assess ability of injured or ill workers to continue to work in their current role or suggest potential alternative jobs • work with managers to return injured and ill workers to work • describe the benefits of returning injured and ill workers to the workplace to an employer • articulate legislative requirements in relation to return to work • ensure that adequate or necessary facilities are available to injured or ill employees • identify the industrial relations aspects of a return to work program and seek the assistance of appropriate personnel to resolve issues • assist the cost-effective operation of a vocational rehabilitation program.

DOMAIN 80	FITNESS AND RETURN TO WORK	
Theme 80.2	Development and Implementation of a Vocational Rehabilitation Policy and Program	STAGE C: Approaching consultancy
Learning Objective 80.2.2	Implement and evaluate a rehabilitation program for an employer	
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • previous academic coursework in vocational rehabilitation • guided instruction by an occupational physician • guided instruction by those with managerial, human resources and industrial relations background • peer discussion about successful (or otherwise) approaches to similar problems • presenting at trainee meetings • authoritative websites. 		<ul style="list-style-type: none"> • Learning objective 50.4.3: Operate or work in close liaison with a person that operates an occupational health service
Scope of learning required		
You are encouraged to envisage different situations that could arise in a remote workplace, a small workplace, a mobile workplace (ship, bus company, or haulier) and a workplace with limited supervision.		

DOMAIN 90: ENVIRONMENTAL RISKS AND INCIDENTS

The themes in Domain 90 are:

- 90.1: Scope of environmental issues
- 90.2: Planning for an environmental incident
- 90.3: Practical handling of an environmental incident
- 90.4: Remediation of a contaminated site

THEME 90.1: SCOPE OF ENVIRONMENTAL ISSUES

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics

Nil

Advanced Stage B: Learning the Ropes

- 90.1.1 Define *environment* and factors that influence occurrence of exposure and the susceptibility of individuals or groups
- 90.1.2 Describe how environmental risk is assessed and perceived
- 90.1.3 Describe the process of development of environmental standards for hazards arising from workplaces
- 90.1.4 Recognise and advise on health risks in the general environment arising from workplace activities
- 90.1.5 Recognise and advise on health risks in and around the domestic environment and in leisure activities
- 90.1.6 Describe the health risks of work in ambient environments of extreme temperature or pressure

Advanced Stage C: Approaching Consultancy

Nil

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1	Scope of Environmental Issues	STAGE B: Learning the ropes
Learning Objective 90.1.1	Define <i>environment</i> and factors that influence occurrence of exposure and the susceptibility of individuals or groups	
Knowledge	Skills	
<ul style="list-style-type: none"> recognise that environment means the physical factors of the surroundings of human beings, including the land, waters, atmosphere, climate, sound, odours, tastes, the biological factors of animals and plants and the social factor of aesthetics discuss the susceptibility of population sub-groups due to age (very young or aged), pregnancy, infirmity or social circumstances characterise fugitive substances that affect the way in which exposure occurs and the likely duration of exposure identify special issues of indigenous people living remotely discuss health needs in camps for refugees or internally-displaced people. 	<ul style="list-style-type: none"> discern what is reasonable and likely amid strident claims of doom demonstrate discipline to pronounce on what you know, to refrain from voicing speculative comments, and to strive hard to obtain data on important unknowns. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in environmental health risk assessment and management guided instruction by experts in environmental medicine, public health, environmental science and environmental health observation of those with backgrounds in environmental activism or community action groups peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites. 	<ul style="list-style-type: none"> Theme 20.1: Properties and mechanisms of harm of agents that can affect health Learning objective 69.2.1: Identify and define the determinants of health 	
Scope of learning required		
<p>This area is vast, so you are advised to use specific examples (related to much-publicised agents such as lead, asbestos, pesticides, long-lived chemicals, odorous substances, volatile organic compounds, electro-magnetic fields, effect of climate change on patterns of disease) to draw out the principles. You should realise that strong opinions, arising from fear and indignation, can run ahead of knowledge in some of these areas.</p>		

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1	Scope of Environmental Issues	STAGE B: Learning the ropes	
Learning Objective 90.1.2	Describe how environmental risk is assessed and perceived		
Knowledge		Skills	
<ul style="list-style-type: none"> describe health-based environmental risk assessment, i.e. hazard assessment, dose-response relationship, exposure assessment and risk characterisation define risk perception and acceptable risk identify ways to communicate risk discuss the purpose and methods of community consultation recognise the differing perceptions of other stakeholders on environmental health issues recognise the expertise of others' in the environmental health area, such as public health physicians, environmental scientists and environmental health officers recognise the subjective aspects of environmental risk assessments and, therefore, their limitations. 		<ul style="list-style-type: none"> function in a team that is managing environmental issues. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> assessment and management guided instruction by experts in environmental medicine, public health, environmental science and environmental health observation of those with backgrounds in environmental activism or community action groups peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites Australian/New Zealand Standard No. 4360. 		<ul style="list-style-type: none"> Learning objective 61.1.1: Apply communication skills to engage and reassure the patient in specific situations, including first encounters, history taking, counselling, and breaking bad news Theme 64.1: Cultural competency Learning objective 61.5.3: Address an occupational or environmental issue at a meeting of more than a dozen interested people 	
Scope of learning required			
You need to understand this well.			

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1	Scope of Environmental Issues	STAGE B: Learning the ropes	
Learning Objective 90.1.3	Describe the process of development of environmental standards for hazards arising from workplaces		
Knowledge		Skills	
<ul style="list-style-type: none"> describe the purpose of well-recognised special interest groups and their involvement with environmental issues groups differentiate between occupational and environmental standards and the different contexts in which they are applied discuss the strengths and limitations of environmental standards. 		<ul style="list-style-type: none"> contribute to community-based discussions, focus groups and public meetings. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in environmental health risk assessment and management guided instruction by experts in environmental medicine, public health, environmental science and environmental health observation of those with backgrounds in environmental activism or community action groups peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites. 		<ul style="list-style-type: none"> Learning objective 50.1.2: Outline the purpose of government regulators, trade unions and special interest groups Learning objective 61.5.3: Address an occupational or environmental issue at a meeting of more than a dozen interested people Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment 	
Scope of learning required			
You should have a broad understanding of the types of standards and the groups involved in making them.			

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1		Scope of Environmental Issues	STAGE B: Learning the ropes
Learning Objective 90.1.4		Recognise and advise on health risks in the general environment arising from workplace activities	
Knowledge		Skills	
<ul style="list-style-type: none"> identify common types of health-affecting environmental issues outline the principles of population health monitoring, including the use of biomarkers, assessment of sub-clinical effects and clusters of health events outline the content of a health impact assessment of industrial and other developments discuss methods of risk assessment of hazards to the environment arising from workplace activities. 		<ul style="list-style-type: none"> clinically assess and in some cases manage individuals exposed to environmental hazards arising from industry, the home, hobbies or other environmental sources assess and manage in accordance with any request from a referring clinician, and communicate any results or advice conduct investigations into actual or potential health effects from environmental hazards in populations, taking note of the important differences between investigations in an occupational group versus a community population. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in environmental health risk assessment and management guided instruction by experts in environmental medicine, public health, environmental science and environmental health observation of those with backgrounds in environmental activism or community action groups peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites. 		<ul style="list-style-type: none"> Learning objective 20.3.2: Describe the general principles of workplace assessment 	
Scope of learning required			
<p>The starting point for developing expertise here will be the sorts of issues upon which media stories are based. Even if you were not involved in a reported issue, it would assist you to observe how other experts handle the situation and to practise the skills as if you were involved.</p>			

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1	Scope of Environmental Issues	STAGE B: Learning the ropes	
Learning Objective 90.1.5	Recognise and advise on health risks in and around the domestic environment and in leisure activities		
Knowledge		Skills	
<ul style="list-style-type: none"> identify substance and noise exposures associated with home and hobbies discuss methods of risk assessment of hazards in the domestic environment and leisure activities. 		<ul style="list-style-type: none"> discern sub-optimal conduct of familiar activities. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in environmental health risk assessment and management guided instruction by experts in environmental medicine, public health, environmental science and environmental health observation of those with backgrounds in environmental activism or community action groups peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites. 		<ul style="list-style-type: none"> Theme 61.1: Physician-patient communication Theme 61.2: Communication with a third party, including the patient's employer or their family and/or carers Learning objective 63.3.1: Recognise the importance of health education and the role of the physician as a teacher to patients, other physicians and in the wider community, and develop the skills to undertake this role Learning objective 68.3.1: Demonstrate an understanding of the necessary steps required to effect change within organisations and the community 	
Scope of learning required			
<p>For examination purposes, these situations may be alternative sources of exposure-wrought diseases that cannot be adequately explained by occupation.</p> <p>From time to time, there are enquiries by government, sporting associations, universities or special interest groups into exposures that increase risk in leisure-time activities. Depending on your own interests, your contribution to such explorations may be offered or even sought.</p>			

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.1	Scope of Environmental Issues	STAGE B: Learning the ropes
Learning Objective 90.1.6	Describe the health risks of work in ambient environments of extreme temperature or pressure	
Knowledge	Skills	
<ul style="list-style-type: none"> identify the health risks associated with: <ul style="list-style-type: none"> diving freezing climates high altitude very hot climates It is beneficial to have had practical experience of these situations define broad principles of the physics of the atmosphere and ocean, e.g. changes in pressure and temperature with height and depth and the creation of currents. 	<ul style="list-style-type: none"> question a person about medical history and past adverse incidents in a way that can allow targeted and appropriately-emphasised (as distinct from rote) advice to be given to him or her. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> academic coursework in aviation medicine, diving medicine guided instruction by experts with practical medical expertise in these areas textbooks and journals authoritative websites. 	<ul style="list-style-type: none"> Learning objective 20.1.1: Describe the properties of physical agents that can affect health Learning objective 20.2.1: Describe the potential health effects of common and important physical hazards 	
Scope of learning required		
<p>You should gain a good understanding of the hazard types, but the standards to be applied would be looked-up as needs be. The exam would seek general principles and well-known practical advice, and would accept that you would need to check an external reference for detailed advice on issues such as clothing, ropes or air supply.</p>		

THEME 90.2: PLANNING FOR AN ENVIRONMENTAL INCIDENT

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
Nil
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
90.2.1 Assist planning for reduction of risks both in the prevention of an incident and the management of an incident should it occur
90.2.2 Contribute to the development of health policy relating to exposure to hazards arising from industry

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.2	Planning for an Environmental Incident	STAGE C: Approaching consultancy
Learning Objective 90.2.1	Assist planning for reduction of such risks both in the prevention of an incident and the management of an incident should it occur	
Knowledge	Skills	
<ul style="list-style-type: none"> recognise laws and standards related to transport and storage of hazardous substances, including those that are radioactive. 	<ul style="list-style-type: none"> use other professionals with environmental health expertise advise industry and the community on the prevention and management of hazardous exposures in the general environment. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous academic coursework in environmental medicine guided instruction by expert in environmental medicine guidance by those in public life or in the public service with relevant experience peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals journal clubs presenting at trainee meetings authoritative websites. 	<ul style="list-style-type: none"> Learning objective 50.1.1: Describe and distinguish the various forms of management within an organisation 	
Scope of learning required		
You should develop a broad understanding and an organised plan of approach. You should try to imagine different situations: a tank farm, a highway spill, an offshore platform, a fire, a flood.		

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.2	Planning for an Environmental Incident	STAGE C: Approaching consultancy
Learning Objective 90.2.2	Contribute to development of health policy relating to exposure to hazards arising from industry	
Knowledge	Skills	
<ul style="list-style-type: none"> • discuss exposure guidelines and monitoring • describe the key features of emergency action plans. 	<ul style="list-style-type: none"> • contribute to the development of health policy, such as exposure guidelines, monitoring and action plans, that relate to actual or potential environmental hazards • integrate plans for environmental incident management into an organisation's crisis management plan. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> • previous academic coursework in environmental medicine • guided instruction by expert in environmental medicine • guidance by those in public life or in the public service with relevant experience • peer discussion about successful (or otherwise) approaches to similar problems • textbooks and journals • presenting at trainee meetings • authoritative websites. 	<ul style="list-style-type: none"> • Theme 20.2: Description of health effects of occupational hazards • Theme 20.3: Assessment and control of work-related hazards 	
Scope of learning required		
This will be in part tested by your environment report for the communication portfolio.		

THEME 90.3: PRACTICAL HANDLING OF AN ENVIRONMENTAL INCIDENT

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics	
Nil	
Advanced Stage B: Learning the Ropes	
Nil	
Advanced Stage C: Approaching Consultancy	
90.3.1	Undertake the clinical appraisal and management of individuals exposed to environmental hazards arising from industry
90.3.2	Demonstrate an understanding of how environmental health risk and hazardous exposures are monitored
90.3.3	Develop strategies to address varying stakeholder issues

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.3		Practical Handling of an Environmental Incident	STAGE C: Approaching consultancy
Learning Objective 90.3.1		Undertake the clinical appraisal and management of individuals exposed to environmental hazards arising from industry	
Knowledge		Skills	
<ul style="list-style-type: none"> determine the nature of the hazard, duration of its fugitive presence, and extent of spread explain how to compose a history of similar episodes and how these have arisen classify the nature and severity of personal complaints, health effects and who has them identify ameliorative efforts already undertaken. 		<ul style="list-style-type: none"> define the nature and extent of the problem involve other relevant professionals. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous academic coursework in environmental medicine guided instruction by expert in environmental medicine guidance by those in public life or in the public service with relevant experience peer discussion about successful (or otherwise) approaches to similar problems reflective application of relevant medical knowledge 		<ul style="list-style-type: none"> Learning objective 11.1.2: Conduct an appropriate physical examination Learning objective 11.1.5: Take, record, and analyse an occupational and environmental history from an individual 	

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.3	Practical Handling of an Environmental Incident	STAGE C: Approaching consultancy
Learning Objective 90.3.1	Undertake the clinical appraisal and management of individuals exposed to environmental hazards arising from industry	
<ul style="list-style-type: none"> textbooks and journals presenting at trainee meetings guiding trainees in Stages A and B authoritative websites. 		
Scope of learning required		
This mostly requires keeping an open mind and avoiding comment on cause and blame until enough facts are clearly known. You should know a doctor's roles in the sort of plan used in situations like this.		

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.3	Practical Handling of an Environmental Incident	STAGE C: Approaching consultancy
Learning Objective 90.3.2	Demonstrate an understanding of how environmental health risk and hazardous exposures are monitored	
Knowledge	Skills	
<ul style="list-style-type: none"> identify and evaluate relevant technical reports discuss the method and periodicity of air and water monitoring and the interpretation of monitoring results. 	<ul style="list-style-type: none"> gather information for an environmental audit. 	
Suggested ways to learn	Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous academic coursework in environmental medicine guided instruction by expert in environmental medicine peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meetings guiding trainees in Stages A and B authoritative websites. 	<ul style="list-style-type: none"> Theme 20.3: Assessment and control of work-related hazards 	
Scope of learning required		
This requires understanding of the properties of different well-recognised hazards in air, water and soil, how their presence is discerned and sampled, and the terminology used.		

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.3		Practical Handling of an Environmental Incident	STAGE C: Approaching consultancy
Learning Objective 90.3.3		Develop strategies to address varying stakeholder issues	
Knowledge		Skills	
<ul style="list-style-type: none"> recognise that stakeholders in an environmental health issue may have differing perceptions and agendas recognise that the purpose of risk communication is to make things clear rather than to have as prime purpose treating the 'symptom' of outrage. Good communication is likely to reduce outrage but it may not; so the effectiveness of communication should not be judged solely on that criterion. 		<ul style="list-style-type: none"> function in a team solving or managing environmental problems. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous academic coursework in environmental medicine guided instruction by expert in environmental medicine guidance by those in public life or in the public service with relevant experience peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meetings authoritative websites. 		<ul style="list-style-type: none"> Learning objective 50.1.2: Outline the purpose of government regulators, trade unions and special interest groups Learning objective 61.5.3: Address an occupational or environmental issue at a meeting of more than a dozen interested people 	
Scope of learning required			
You should develop a high level of skill in this as in all the communication-related learning objectives.			

THEME 90.4: REMEDIATION OF A CONTAMINATED SITE

Within the three stages of the curriculum, the learning objectives within this theme are arranged as follows:

Basic Stage A: The Basics
Nil
Advanced Stage B: Learning the Ropes
Nil
Advanced Stage C: Approaching Consultancy
90.4.1 Assess degree of contamination and health risks of a contaminated site
90.4.2 Develop plan to remediate the site
90.4.3 Oversee implementation of the remediation process
90.4.4 Evaluate the effectiveness of the decontamination process

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.4	Remediation of a Contaminated Site	STAGE C: Approaching consultancy
Learning Objective 90.4.1	Assess the degree of contamination and health risks of a contaminated site	

Knowledge	Skills
<ul style="list-style-type: none"> determine the history of the site describe methods to identify the nature of hazard outline the basis of standard risk assessment and risk management procedures describe the particular precautions for special hazards, such as a site contaminated with a radioactive substance. 	<ul style="list-style-type: none"> involve other relevant professionals in a timely and appropriate way.

Suggested ways to learn	Links to other parts of the curriculum
<ul style="list-style-type: none"> previous academic coursework in environmental medicine guided instruction by expert in environmental medicine guidance by those in public life or in the public service with relevant experience peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meetings authoritative websites. 	<ul style="list-style-type: none"> Theme 20.1: Properties and mechanisms of harm of agents that can affect health Theme 20.2: Description of health effects of occupational hazards Learning objective 20.3.6: Involve other occupational health professionals

Scope of learning required
You should know the sorts of contaminants, how they are detected, the more common modes of remediation, the typical scale of such activity, and the laws that apply.

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.4		Remediation of a Contaminated Site	STAGE C: Approaching consultancy
Learning Objective 90.4.2		Develop a plan to remediate the site	
Knowledge		Skills	
<ul style="list-style-type: none"> recognise environment and planning laws and who is responsible for administering them describe typical approaches to this type of problem and their usual effect. 		<ul style="list-style-type: none"> involve other relevant professionals in a timely and appropriate way. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> previous academic coursework in environmental medicine guided instruction by expert in environmental medicine guidance by those in public life or in the public service with relevant experience peer discussion about successful (or otherwise) approaches to similar problems textbooks and journals presenting at trainee meetings authoritative websites. 		<ul style="list-style-type: none"> Learning objective 50.2.1: Define and describe the effects of organisational factors on health and safety performance Learning objective 70.1.1: Locate and interpret legislation applicable to specific hazards in workplaces and the environment 	
Scope of learning required			
<p>You should know the sorts of contaminants, how they are detected, the more common modes of remediation, the typical scale of such activity, and the laws that apply. The laws will vary in different jurisdictions.</p>			

DOMAIN 90		ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.4		Remediation of a Contaminated Site	STAGE C: Approaching consultancy
Learning Objective 90.4.3		Oversee implementation of the remediation process	
Knowledge		Skills	
<ul style="list-style-type: none"> describe the remediation process from beginning to end identify who is involved, when, what hours of day and the equipment to be used discuss strategies for the transport and disposal of spoil recognise the consequences of adverse weather or problems of access determine sensitive areas in close proximity. 		<ul style="list-style-type: none"> address relevant health and safety issues gain permit(s) to proceed get professional advice on content and wording of contracts arrange adequate supervision ensure timely reporting of any deviation from the planned procedure perceive misgivings of neighbours and address these with ongoing communication. 	
Suggested ways to learn		Links to other parts of the curriculum	
<ul style="list-style-type: none"> guided instruction by expert in environmental medicine guidance by those in public life or in the public service with relevant experience peer discussion about successful (or otherwise) approaches to similar problems authoritative websites simply doing it. 		<ul style="list-style-type: none"> Learning objective 50.4.3: Operate or work in close liaison with the person that operates the occupational health service 	
Scope of learning required			
<p>Other health professionals may take greater responsibility and set the pace in such remediation. However, the occupational and environmental physician should retain a place at the table, follow what is happening, take part in communicative activities (e.g. hot line or data gathering), and retain a keen interest in future, related, preventive activities. You need to get to know and understand a doctor's role in this team activity.</p>			

DOMAIN 90	ENVIRONMENTAL RISKS AND INCIDENTS	
Theme 90.4	Remediation of a Contaminated Site	STAGE C: Approaching consultancy
Learning Objective 90.4.4	Evaluate the effectiveness of the decontamination process	
Knowledge		Skills
<ul style="list-style-type: none"> • discuss measures of satisfactory decontamination • anticipate the likely appearance of the site once work is completed. 		<ul style="list-style-type: none"> • involve other relevant professionals in a timely and appropriate way • interpret monitoring results and prepare a report • recognise satisfactory completion of the job.
Suggested ways to learn		Links to other parts of the curriculum
<ul style="list-style-type: none"> • previous academic coursework in environmental medicine • guided instruction by expert in environmental medicine • peer discussion about successful (or otherwise) approaches to similar problems • textbooks and journals • authoritative websites. 		<ul style="list-style-type: none"> • Theme 20.2: Description of health effects of occupational hazards • Theme 20.3: Assessment and control of work-related hazards
Scope of learning required		
You should know the sorts of contaminants, how they are detected, the more common modes of remediation, the typical scale of such activity, and the laws that apply.		

USEFUL REFERENCES

Some of the books listed here have gone through several editions and will continue to do so. Therefore, the edition number has been left off.

BOOKS

On occupational medicine in general

- LaDou J ed. Current occupational and environmental medicine. McGraw-Hill.
- Rosenstock L, Cullen MR, Brodtkin CA, Redlich CA. Textbook of clinical occupational and environmental medicine. Elsevier.
- Agius R, Seaton A. Practical occupational medicine. Hodder Arnold.

On assessing musculoskeletal injuries

- Assessing musculoskeletal injuries. Adelaide: WorkCover Corporation of South Australia, 2009.

On occupational hygiene

- Tillman C ed. Principles of occupational health and hygiene. Sydney: Allen & Unwin, 2007.

Clinical examination

- Talley NJ, O'Connor S. Examination Medicine. Churchill Livingstone Elsevier.
This book has a useful DVD.

On standards of fitness

- Palmer KT, Cox RAF, Brown I eds. Fitness for work – the medical aspects. Oxford.
- Assessing fitness to drive – commercial and private vehicle drivers. Sydney: Austroads & National Road Transport Commission. It is also published on the web at www.austroads.com.au
- Code of practice for health assessment of rail safety workers, Vol 1 & 2. Melbourne: Department of Infrastructure, Victoria.
- ICF – International classification of functioning, disability and health. World Health Organisation.

Professionalism

- Thistlethwaite J, Spencer J. Professionalism in medicine. Oxford: Radcliffe Publishing Co, 2008

On writing style and referencing

- Strunk W Jr, White E. The elements of style. Allyn & Bacon.
- Kaplan B. Editing made easy. [self published]
- Style Manual for authors, editors and printers. AusInfo.

WEBSITES

These have not been classified under headings. For most, their content is self-evident.

American Conference of Governmental Industrial Hygienists (ACGIH)

www.acgih.org

American College of Occupational and Environmental Medicine (ACOEM)

www.acoem.org

Agency for Toxic Substances and Disease Registry (ATSDR)

www.atsdr.cdc.gov

Australian Immunisation Handbook

www.health.nsw.gov.au/PublicHealth/Infectious/immunhandbook.asp

Australian Safety and Compensation Council – now SafeWork Australia

www.safeworkaustralia.gov.au

Canadian Centre for Occupational Health and Safety (CCOHS)

www.ccohs.ca

Journal of Epidemiology and Community Health

www.jech.bmj.com

Epidemiology Supercourses freely available

www.pitt.edu/~super1/

Finnish Institute of Occupational Health

www.ttl.fi/en

International Labour Organization (ILO)

www.ilo.org

The National Institute for Occupational Safety and Health (NIOSH)

www.cdc.gov/NIOSH

NSW Workcover

www.workcover.nsw.gov.au

Occupational Dermatology Research and Education Centre

www.occderm.asn.au

Occupational Safety and Health Administration (US Department of Labor)

www.osha.gov

PubMed Home

www.ncbi.nlm.nih.gov/pubmed

Return to work knowledge base - ResWorks

www.resworks.org.au

US Navy and Marine Corps Public Health Centre

www.nmcphc.med.navy.mil

UK Health and Safety Executive (HSE)

www.hse.gov.uk

WHO Occupational Health

www.who.int/occupational_health/en

WorkSafe Western Australia

www.commerce.wa.gov.au/WorkSafe

INDEX OF CURRICULUM CONTENT

Learning objectives appear as numbers with a letter following that indicates the Stage of the curriculum, e.g. 20.1.3A, 12.1.4B. Themes are prefixed by 'Th', e.g. Th68.3. Domains and sub-domains are prefixed by 'Dom', e.g. Dom30, Dom61.

'OHS' stands for occupational health and safety.

'Occ or Env' stands for occupational or environmental.

Aboriginal and Torres Strait Islander culture 64.1.4B, 69.1.1B	227, 231, 257
Absolute risk reduction 30.2.3A	146
Activism at work and responses to it 70.2.1B	267
Acts, Regulations, Codes of Practice, Guidelines, Occ or Env 70.1.1B	265
Acute clinical Occ or Env problems, managing 12.1.4B	59
Acute medical problems, managing 12.1.2A.....	56
Adherence to OHS protective measures 30.6.1A.....	152
Adolescents, managing problems of 12.5.1A	95
Adverse events in care, recognise, report and manage 62.3.1A.....	212
Advocacy Dom68	249
Air crew, fitness for 80.1.3B	273
Alcohol ingestion, control of 11.2.3A.....	48
Alcohol screening 20.4.1B	135
Alternate duties at work 80.1.3B.....	273
AMA Guide to the evaluation of permanent impairment 80.1.4B.....	274
Anaphylaxis 12.1.2A, 12.3.5A.....	56, 71
Anticholinesterase agents, treatment for poisoning 12.1.2A.....	57
Asbestos-related diseases 12.6.3B	104
Asphyxiation 12.1.2A, 12.3.5A	56, 113
Assessing fitness for work 80.1.3B.....	273
Asthma, work-associated 12.6.3B	104
Atmospheric physics 90.1.6B	286
Bacteria 20.1.3A	118
Beliefs, biases and behaviours, personal reflection on 65.2.2B.....	239, 240
Bias in epidemiology 30.5.1A.....	151
Biological agents affecting health, properties 20.1.3A.....	118
Biological hazards in workplaces, health effects 20.2.3B.....	122
BiPAP (bi-level positive airway pressure) 11.3.2A.....	52
Blood (non-malignant, general) disorders, management 12.3.4A	70
Blood disorders, Occ or Env-affecting 12.6.9B	110
Building-related illness 12.2.2B	61
Burden of disease 69.1.1A	255
Business plan, components of 50.2.1B.....	163
Cancer, managing 12.4.1A	88
Carbon monoxide, excessive absorption of 12.6.12B.....	113
Cardiovascular disorders, general managing 12.3.1A.....	63
Cardiovascular disorders, Occ or Env-affecting 12.6.5B.....	106
Case-control studies 30.1.1A	142
Causation, casual attribution Th30.5.....	151
Causation, Occ or Env causal attribution 30.5.1A.....	151
Chairing committee 61.5.5C	202
Chemical hazards in workplaces, health effects 20.2.2B	120
Chemical sensitivity 12.2.2B	61
Chemicals affecting health, properties 20.1.2A	117
Chronic fatigue 12.2.2B.....	61

Clinical decision making Th30.2	143
Clinically assessing fitness for work 80.1.3B.....	273
Cluster investigation 20.5.1C.....	138
Cluster, recognition of 20.5.1C.....	138
Cohort studies 30.1.1A.....	142
Cold work 20.1.1A.....	116
Committee chairing 61.5.5C	202
Communicating patient rights 61.1.2A.....	176
Communication Dom61	171
Communication with carers in medical emergency 12.1.3A.....	58
Communication with colleagues Th61.3.....	180
Communication with community Th61.4	189
Communication with family and/or carers Th61.2	178
Communication with health administration 61.3.4A,C	187, 188
Communication with organisations 61.2.1B	179
Communication with patients Th61.1.....	171
Communication with referring doctors 61.3.2B	184
Communication with support groups and other community organisations 61.4.1C.....	190
Communication within multidisciplinary teams 61.3.1C	181
Complaints, management 62.3.4A,B	217, 218
Compliance, OHS law Th30.6.....	152
Confidence intervals 30.1.1A, 40.3.1B.....	156
Confidentiality 61.3.2A.....	183
Confidentiality in a non-medical workplace 61.4.4B	195
Confidentiality, ethical and legal constraints 61.4.3B	194
Confounding in epidemiology 30.5.1A.....	151
Contact dermatitis, work-related 12.6.4B.....	105
Contaminated site, remediation Th90.4.....	292
Continuing educational development 63.1.1A,B,C	219, 220, 221
Continuity of patient care 61.3.3A, 62.2.3A,B.....	185, 209, 210
Control of disease in populations 69.3.1A.....	260
Coroner, role of 65.3.2A	242
Courts and their procedures 70.3.1B	268
CPAP (continuous positive airway pressure) 11.3.2A	52
Crane driving, fitness for 80.1.3B.....	273
Critical appraisal Dom30.....	141
Critically ill patient, managing 12.1.1A	54
Cross-cultural partnerships, promoting 64.1.6A,B,C.....	233, 234
Cultural bias, identifying within health care services 64.1.5C	232
Cultural competency Th64.1	225
Culture, Aboriginal and Torres Strait Islander 64.1.4B	231
Culture, Māori and Pacific Islander 64.1.4B	231
Cyanide antidote 12.6.12B	113
DC cardioversion, performing 11.3.2A.....	52
Death certification 65.3.2A.....	242
Decision making, clinical Th30.2.....	143
Defibrillation 11.3.2A.....	52
Dermatological disorders, general, managing 12.3.11A.....	84
Dermatological disorders, Occ or Env-affecting 12.6.4B.....	105
Design hazards in workplaces, health effects 20.2.4B.....	124
Determinants of health Th69.2	258
Diagnostic reasoning 30.2.1A.....	144
Diagnostic tests Th30.3	148

Differential diagnosis, forming 11.1.3A.....	36
Dioxin 20.2.2B	120
Disability, effect on work ability 80.1.4B	274
Disease control Th69.3	260
Diversity workshops (cultural competency) Th64.1	225
Diving, physiological effects of 12.6.3B.....	104
Diving, risks from 20.2.1B, 90.1.6B.....	116, 120, 286
Doctor as teacher 63.3.1A,B,C.....	222, 223, 224
Domestic hazards, advice on 90.1.5B	285
Domestic violence services 68.1.1A.....	249
Driving and medical risk 65.3.2A	242
Driving, fitness for 80.1.3B	273
Drug and alcohol screening 20.4.1B.....	135
Dying patients, managing issues associated with 12.5.5A	100
Ear disorders, general, managing 12.3.13A.....	87
Ear disorders, Occ or Env-affecting 12.6.7B.....	108
Ecological studies 30.5.1A	151
Economics of health 69.5.1A,C.....	263, 264
Educating others Th63.3.....	222
Effect of medication on work and convalescence 80.1.6B	276
Electrical risks to self 20.2.1B, 62.3.3A	119, 216
Electrocution, management of 12.1.4B.....	59
End of life issues, managing 12.5.5A.....	100
Endocrine disorders, general, managing 12.3.2A.....	66
Endocrine disorders, Occ or Env-affecting 12.6.10B.....	111
English language fluency 63.3.1A	222
Engulfment in a silo 20.2.1B.....	119
Envenomation, treatment for 12.1.2A.....	57
Environment Dom90	280
Environment, extreme, risks from 90.1.6B	286
Environment, individual susceptibility 90.1.1B	281
Environment, risk advice on work-generated hazards 90.1.4B.....	284
Environment, special interest groups 90.1.3B.....	283
Environment, standards for work-generated hazards 90.1.3B.....	283
Environmental diseases Th12.6	101
Environmental health risk assessment 90.1.2B.....	282
Environmental health risk perception 90.1.2B.....	282
Environmental health risk reduction, planning for 90.2.1C.....	287
Environmental history taking 11.1.5B	39
Environmental incident, handling Th90.3	289
Environmental incident, planning Th90.2	287
Environmental issues Th90.1.....	280
Environmentally-persistent substances (e.g. PCBs, dioxins) 20.2.2B	120
Ergonomist, methods used by 20.3.2B	130
Error minimisation 62.2.1C.....	205, 206, 207
Errors in care, recognise, report and manage 62.3.1A,B.....	212, 213
Ethical conduct of research Th40.2	155
Ethical dilemmas 65.2.2A.....	239
Ethics Dom65	235
Ethics relating to medical law Th65.3.....	241
Ethics, personal Th65.2.....	237
Ethics, professional Th65.1	235
Euthanasia 65.2.2A.....	239

Evaluating health interventions Th30.4	149
Evidence, use for clinical decisions 30.2.4A	147
Evidence, use for quality improvement 62.1.1A	203
Evidence-based medicine, principles 30.1.1A.....	142
Expert evidence, given to a court 70.3.1B.....	268
Expert, evidence, giving to a government or judicial inquiry 61.5.4C.....	201
Extreme environments, risks from 90.1.6B	286
Eye disorders, general, managing 12.3.12A	86
Eye disorders, Occ or Env-affecting 12.6.6B	107
Fatigue, personal 62.3.3A	216
Finding information Th30.1	141
Fitness for work, clinically assessing 80.1.3B.....	273
Fitness for work, standards of 80.1.2B.....	272
Flammability and explosion 20.1.2A	117
Functioning, disability and health, international classification of 80.1.4B.....	274
Funding, societal, political and economic pressures on 69.5.1C	264
Fungi 20.1.3A.....	118
Gas laws 20.1.2A	117
Gastrointestinal disorders, general, managing 12.3.3A.....	68
Genetic disease, managing 12.4.2A.....	90
Genitourinary disorders, general, managing 12.3.9A, 12.5.2A	80, 96
Glasgow coma score 11.1.2A.....	35
Goals of an occupational health service 50.4.2B	167
Government enquiry, giving expert evidence 61.5.4C	201
Government regulators, purpose 50.1.2B	162
Haematological (non-malignant) disorders, general, managing 12.3.4A	70
Haematological disorders, Occ or Env-affecting 12.6.9B	110
Halogens and halogenated compounds 20.1.2A.....	117
Handicap, effect on work ability 80.1.4B.....	274
Handover and transfer of care 61.3.3A,B.....	185, 186
Handwashing 11.2.1A	42
Handwriting, legibility 61.3.3A	185
Hazards, domestic, advice on 90.1.5B.....	285
Hazards, leisure-related, advice on 90.1.5B	285
Hazards, occupational, assessment 20.3.2B, 20.3.4B.....	130, 132
Hazards, occupational, control 20.3.3B.....	131
Hazards, occupational, discernment of likely risk 20.2.6C	127
Hazards, occupational, health effects Th20.2	118
Hazards, occupational, persuasive recommendations 20.3.5C	133
Hazards, occupational, reporting 20.3.4B	132
Health and safety committee, presenting to 61.5.5C	202
Health economics Th69.5	263
Health inequalities 64.1.3A,B, 69.4.1A.....	229, 262
Health priorities, local and nationwide 69.1.1A,B.....	255, 257
Health promotion 11.2.3A.....	48
Health risk assessment, environmental 90.1.2	282
Health, determinants of Th69.2	258
Hearing disorders, general, managing 12.3.13A	87
Hearing disorders, Occ or Env, managing 12.6.7B	108
Heart disease, Occ or Env, managing 12.6.5B.....	106
Heavy metals, excessive absorption of 12.6.12B.....	113

History taking 11.1.1A.....	34
History taking, occupational and environmental 11.1.5B.....	39
HIV infection 12.3.5A, 12.4.3A.....	71, 93
Hot work 20.1.1A.....	116
Hydrofluoric acid, absorption of 12.6.12B.....	113
Hygiene, occupational Th20.3.....	128
Hyperthermia, treatment for 12.1.2A.....	56
Hypothermia, treatment for 12.1.2A.....	56
Illumination standards 20.2.4B.....	124
Immune disorders, general, managing 12.3.5A.....	71
Immune disorders, Occ or Env-affecting 12.6.9B.....	110
Impairment, effect on work ability 80.1.4B.....	274
Indigenous culture 64.1.4B.....	231
Indigenous health, problems of living remotely 90.1.1B.....	281
Industrial agreements, influence on OHS 70.2.1B.....	267
Infectious disease, general 12.4.3A.....	92
Influencing other people Th61.5.....	196
International classification of functioning, disability and health 80.1.4B.....	274
Interpreters, use of 64.1.2A.....	228
Interventions for health, appraise efficacy 30.4.1A.....	149
Interventions for health, economic evaluation 30.4.2A.....	150
Investigation of an outbreak Th20.5.....	137
Investigations for illness 11.1.4A.....	38, 39
Involvement of non-medical health professionals in hazard assessment 20.3.6C.....	134
Ionising radiation, harmful effects of 20.1.1A, 20.2.1B.....	116, 119
Issue, presenting at a public forum 61.5.3C.....	200
James Reason, ideas 62.1.1A.....	203
Judicial enquiry, giving expert evidence 61.5.4C.....	201
Kidney disorders, managing 12.3.9A.....	80
Kidney disorders, Occ or Env-affecting 12.6.8B.....	109
Law Dom70.....	265
Laws, OHS and environment Th70.1.....	265
Lead, excessive absorption 12.6.12B.....	113
Leadership Th67.2.....	247
Learning, ongoing Th63.1.....	219
Legal process Th70.3.....	268
Legislation Dom70.....	265
Leisure-related hazards, advice on 90.1.5B.....	285
Liability, professional 50.4.5C.....	170
Liaison officers, community 64.1.3A,B.....	229, 230
Life-threatening Occ or Env conditions, managing 12.1.4B.....	59
Likelihood ratio of a test 11.1.4A.....	38, 148
Literature searching 30.1.1A.....	142
Management of organisations Dom50.....	160
Management of organisations, forms of 50.1.1B.....	161
Management, presenting persuasively to 61.5.1C.....	198
Managing other people Th67.2.....	247
Managing patient care 11.1.3A.....	36
Māori and Pacific Islander culture 64.1.4B, 69.1.1B.....	231, 257

Marketing an occupational health service 50.4.4C.....	169
Marketing OHS Th50.4.....	165
Material safety data sheets 20.1.2A.....	117
Medical panels (to serve legal process) 70.3.1B.....	268
Medication errors 62.2.2A.....	208
Medication, effect on work and convalescence 80.1.6B.....	276
Medico-legal Dom70.....	265
Medico-legal communication 61.4.2A,B,C.....	191, 192, 193
Meeting procedure 61.5.5C.....	202
Menopause, manage problems associated with 12.5.3A.....	98
Mental health disorders, general, managing 12.3.2A.....	73
Mental health disorders, Occ or Env-affecting 12.6.2B.....	103
Metabolic disorders, general, managing 12.3.2A.....	66
Metals, excessive absorption of 12.6.12B.....	113
Mini mental state examination 11.1.2A.....	35
Multidisciplinary teams, communication within 61.3.1A,C.....	180, 181
Musculoskeletal disorders, general, managing 12.3.7A.....	75
Musculoskeletal disorders, Occ or Env-affecting 12.6.1B.....	102
Nanoparticles 20.1.2A.....	117
Near misses (near hits) 62.3.1B.....	212
Neoplastic disease, managing 12.4.1A.....	88
Neurological disorders, general, managing 12.3.8A.....	77
Neurological disorders, Occ or Env-affecting 12.6.1B.....	102
Non-ionising radiation, harmful effects of 20.2.1B.....	119
Normal values (of a test) 30.3.1A.....	148
Number needed to harm (NNH) 30.2.3A.....	146
Number needed to treat (NNT) 30.2.3A.....	146
Obesity 11.2.3A.....	48
Occupational diseases Th12.6.....	101
Occupational hazards Th20.2, Th20.3.....	118, 128
Occupational health service, marketing an 50.4.4C.....	169
Occupational health service, operating an 50.4.3C.....	168
Occupational history taking 11.1.5B.....	39
Ocean currents 90.1.6B.....	286
Odds ratio (OR) 30.1.1A.....	146
Odour threshold 20.1.2A.....	117
OHS performance, organisational influences on 50.2.1B.....	163
Older workers, manage problems of 12.5.4A.....	99
Ongoing care of patients 11.2.5A.....	50
Ongoing learning Th63.1.....	219
Organ system disorders Th12.3.....	63
Organisational factors in OHS Th50.1.....	163
Organisational management Dom50.....	160
Organisations, their nature Th50.1.....	160
Osteoporosis and osteopenia 12.3.7A, 12.5.3A.....	75
Outbreak investigation 20.5.1C.....	138
Outbreak prevention 20.5.3C.....	140
Outbreaks, human and political factors 20.5.2C.....	139
Oxidation and reduction 20.1.2A.....	117
Oxygen therapy 11.2.1A.....	42

Pain management 11.2.1A	42
Patient advocacy Th68.1.....	249
Patient care Th11.2.....	41
Patient rights, communicating 61.1.2A.....	176
Perception of health risk, environmental 90.1.2A.....	282
Peri-operative risks, prevention of 11.2.4A.....	49
Personal beliefs, biases and behaviours, reflecting on 65.2.2A,B.....	239, 240
Personal conduct, standard of 65.2.1A,B.....	237, 238
pH 20.1.2A.....	117
Pharmacotherapy 11.2.2A, 65.2.2A.....	44, 208
Photosensitive dermatitis 12.6.4B.....	105
Physical agents affecting health, properties 20.1.1A.....	116
Physical examination 11.1.2A.....	35
Physical hazards in workplaces, Health effects 20.2.1B.....	119
pKa 20.1.2A.....	117
Pneumoconioses 12.6.3B.....	104
Poisoning, Occ or Env, managing 12.6.12B.....	113
Post-operative (post-procedural) care 11.3.3A.....	53
Prediction of clinical risk 30.2.2A.....	145
Pregnancy, managing issues in 12.5.2A.....	96
Prescribing safely 62.2.2A.....	208
Presenting a 'toolbox talk' 61.5.2C.....	199
Presenting an issue at a public forum 61.5.3C.....	200
Presenting persuasively to a health and safety committee 61.5.1C.....	198
Presenting persuasively to management 61.5.1C.....	198
Pressure, extreme environment, risks from 20.1.1A, 90.1.6B.....	116, 286
Prevention following outbreaks or clusters 20.5.3C.....	140
Prevention of disease in populations 69.3.1A,B.....	260, 261
Prions 20.1.3A.....	118
Priority population groups, reducing inequity 69.4.1A.....	262
Procedural skills Th11.3.....	51
Procedures, preparing patients for 11.3.1A.....	51
Professional liability 50.4.5.....	170
Professional qualities Dom60.....	171
Protective measures, OHS, adherence to 30.6.1A.....	152
Protozoa 20.1.3A.....	118
Psychiatric disorders, general, managing 12.3.6A.....	73
Psychiatric disorders, Occ or Env-affecting 12.6.2B.....	103
Psychosocial hazards in workplaces, health effects 20.2.5B.....	126
P-values 40.3.1B.....	156
QALYs 30.4.2A.....	150
Quality assurance within organisations 50.3.1B.....	164
Quality improvement with patient care 62.1.1A.....	203
Radiation, harmful effects of 20.2.1B.....	119
Ramazzini presentation 40.4.2C, 61.5.1C.....	159, 198
Referral letters 61.3.2A,B.....	183, 184
Refugees, advocacy for 68.1.1A.....	249
Rehabilitation 11.2.5A, Dom80.....	270
Rehabilitation policy, develop 80.2.1C.....	277
Rehabilitation program, implement and evaluate 80.2.2C.....	278
Relative risk reduction (RRR) 30.2.3A.....	146
Remediation of contaminated site Th90.4.....	292
Renal disorders, managing 12.3.9A.....	80

Reproduction, general, managing issues of 12.5.2A.....	96
Reproduction, Occ or Env-affecting 12.6.11B	112
Research data, analysis, summary and depiction 40.3.1B.....	156
Research ethics 40.2.1B	155
Research presentation, oral 40.4.2C.....	159
Research presentation, written report 40.4.1C	158
Research procedure 40.1.1B	153
Research project Dom40.....	153
Respiratory disorders, general, managing 12.3.10A	82
Respiratory disorders, Occ or Env-affecting 12.6.3B	104
Return to work policy and program, implement and evaluate 80.2.2C	278
Return to work policy, develop 80.2.1C	277
Return to work, planning and implementing 80.1.5B	275
Returning traveler who is ill 12.4.3A	93
Risk advice on work-generated hazards affecting environment 90.1.4B.....	284
Risk assessment to health, environmental 90.1.2B.....	282
Risk management/minimisation procedures 62.3.2A,B.....	214, 215
Risk perception of health, environmental 90.1.2B	282
Risk, predict in clinical situation 30.2.2A	145
Risks from extreme environments 90.1.6B	286
Risks from one's own work activities, identify 62.3.3A.....	216
Safe practice of medicine Th62.2.....	204
Screening tests Th30.3	148
Screening tests, applied to work groups 20.4.1B.....	135
Self-management Th67.1	244
Sensitivity (of a test) 11.1.4A, 30.3.1A	148
Sexual assault services 68.1.1A.....	249
Skin disorders, managing 12.3.11A.....	84
Skin disorders, Occ or Env-affecting 12.6.4B.....	105
Sleep disorders, general, managing 12.3.10A.....	82
Sleep disorders, Occ or Env-affecting 12.6.3B.....	104
Smoking cessation 11.2.3A.....	48
Special interest groups, purpose of 50.1.2B	162
Specificity (of a test) 11.1.4A, 30.3.1A.....	38, 148
Standards for work-related hazards to the environment 90.1.3B	283
Standards of fitness for work 80.1.2B.....	272
Substance hazards in workplaces, health effects 20.2.2B.....	120
Support groups and other community organisations, communication with 61.4.1C.....	190
Surgical problems, management 11.2.4A	49
Susceptibility of individuals to the environment 90.1.1B.....	281
Task demands, assessing 80.1.1B.....	271
Teaching ability, developing 63.3.1A,B	222, 223
Teamwork 50.4.2B, 61.2.1B, 62.2.1B.....	167, 179, 206
Temperature, extreme environments, risks from 90.1.6B.....	286
Tests, diagnostic and screening, appraisal 30.3.1A.....	148
Therapeutics 11.2.2A, 30.2.3A.....	44, 146
Toolbox talk, presenting 61.5.2C	199
Toxidromes, Occ or Env, managing 12.6.12B	113
Trade unions, purpose of 50.1.2B	162
Transfer of care and handover 61.3.3A,B.....	185, 186

Ultraviolet, harmful effects of 20.2.1B	119
Undifferentiated Occ or Env presentations, managing 12.2.2B	61
Undifferentiated presentations, managing 12.2.1A	60
Unions, purpose of 50.1.2B	162
Unwell patient, managing general care 11.2.1A	42
Urinary disorders, general, managing 12.3.9A	80
Urinary disorders, Occ or Env-affecting 12.6.8B	109
Venom 20.1.3A.....	118
Venom, treatment for envenomation 12.1.2A.....	57
Ventilation of a patient 11.3.2A	52
Vibration, effects of 20.2.1B.....	119
Viruses, general properties of 20.1.3A.....	118
Visual disorders, general, managing 12.3.12A.....	86
Visual disorders, Occ or Env-affecting 12.6.6B	107
Vocational rehabilitation Dom80.....	270
Walkthrough survey of workplace 20.3.2B	130
War-related illness 12.2.2B.....	61
Wellness promotion in clinical practice 11.2.3A	48
Working with leaders Dom50	160
Workplace hazard assessment Dom20	115
Writing-up research 40.4.1C.....	158
Zoonoses 11.1.6B, 12.4.3A.....	40, 93

List of Acronyms and Initialisms

Acronym/Initialism	Meaning
ACE	Angiotensin-converting enzyme
ACLS	Advanced Cardiac Life Support
AFOEM	Australasian Faculty of Occupational and Environmental Medicine
AMA	American Medical Association
ARR	Absolute risk reduction
ASHM	Australian Society of HIV Medicine
BiPAP	Bi-level positive airway pressure
BMI	Body mass index
BMJ	British Medical Journal
BP	Blood pressure
CbD	Case-based Discussion
CEX	Clinical Evaluation Exercise
CPAP	Continuous positive airway pressure
CPD	Continuous professional development
CT	Computed tomography
CV	Cardiovascular
DC	Direct current
DNA	Deoxyribonucleic acid
DOFS	Direct Observation of Field Skills
DOPS	Direct Observation of Procedural Skills
DSM	Diagnostic and Statistical Manual of Mental Disorders
DVT	Deep venous thrombosis
EBA	Exhibit-based assessment
ECG	Electrocardiogram
EMQs	Extended-matching questions
EMST	Early Management of Severe Trauma
ERCP	Endoscopic retrograde cholangiopancreatography
ESR	Erythrocyte sedimentation rate
FRACGP	Fellow of the Royal Australian College of General Practitioners
HIV	Human immunodeficiency virus
ILCOR	International Liaison Committee on Resuscitation
LOs	Learning Objectives
MCQs	Multiple-choice questions
MPH	Master of Public Health

MR	Magnetic resonance
MRA	Magnetic resonance angiography
MRCP	Magnetic resonance cholangiopancreatography
MRI	Magnetic resonance imaging
MSDS	Material safety data sheet
MSF	Multi-Source Feedback
NHMRC	National Health and Medical Research Council
NHPA	National Health Priority Areas
NNH	Number needed to harm (term derives from clinical epidemiology)
NNT	Number needed to treat (term derives from clinical epidemiology)
NOHSC	National Occupational Health & Safety Commission (now known as Safe Work Australia)
NZMA	New Zealand Medical Association
ODREC	Occupational Dermatology Research and Education Centre
OHS	Occupational health and safety
OR	Odds ratio
OSCE	Objective Structured Clinical Examination
PCBs	Polychlorinated biphenyls
PCR	Polymerase chain reaction
PE	Pulmonary embolism
PGY	Post-graduate year
pKa	Measure of the strength of an acid, i.e. its ability to generate hydrogen ions. The further the numerical value is below 7, the stronger the acid.
PPE	Personal protective equipment
PQC	Professional Qualities Curriculum
PQR	Professional Qualities Reflection
PUO	Pyrexia of unknown origin
QALYs	Quality adjusted life years
RACP	Royal Australasian College of Physicians
RNA	Ribonucleic acid
RRR	Relative risk reduction (term derives from clinical epidemiology)
SARS	Severe acute respiratory syndrome
SWOT	Strengths, weaknesses, opportunities, and threats
TB	Tuberculosis
TCDD	2,3,7,8-tetrachlorodibenzo-p-dioxin (dioxin)
UV	Ultraviolet
V/Q	Ratio of pulmonary alveolar ventilation to pulmonary capillary perfusion.
WHR	Waist to hip ratio