Pediatric ID Fellowship Clinical GOALS AND OBJECTIVES (2021)

All objectives for a given year also apply to subsequent years. Objectives for the second and third year build upon objectives from previous years. For fellows completing all clinical time in one year, it is expected that they will progress through the second and third year objectives during that single clinical year.

PATIENT CARE

<u>Goals</u>: provide patient care that is compassionate, appropriate, and effective for the treatment of infectious diseases health problems and the promotion of health.

Objectives:

First Year:

- 1. Fellows will routinely gather epidemiological information relevant to an infectious diseases differential, including exposures to ill persons, immunizations, travel, animal exposures, and water sources.
- 2. Fellows will be able to plan initial work up and management of common pediatric infectious diseases.

Second Year:

- 1. Fellows will be able to synthesize information on complex patients with multi-organ system disease as it relates to infectious diseases.
- 2. Fellows will be able to develop a plan for diagnosis and treatment of patients with complex infectious disease problems.
- 3. Fellows will independently develop a plan for the diagnosis and management of common infectious diseases.

Third Year:

1. Fellows will be able to develop a plan independently for the diagnosis and management of infectious diseases in highly complex patients, including severely immunocompromised patients, as well as patients with unusual disorders.

MEDICAL KNOWLEDGE

<u>Goal</u>: Fellows will demonstrate knowledge about established and evolving biomedical, clinical, and epidemiological sciences and the application of this knowledge to patient care.

Objectives:

First year:

- 1. Fellows will describe the pathogenesis and natural history of patients with common pediatric infectious diseases.
- 2. Fellows describe new and evolving microbiological diagnostic techniques and apply this knowledge to use the microbiology laboratory optimally for patient care.
- 3. Fellows will describe the pharmacology, pharmacokinetics, and pharmacodynamics of antibiotics and their interaction with other drugs.
- 4. Fellows will describe the principles of infection control and hospital epidemiology.

Second Year:

- 1. Fellows will list the role of the infectious disease physician in infection control including identifying and reducing the rates of nosocomial infections and indentifying situations that require isolation of hospitalized patients.
- 2. Fellows will describe the pathogenesis and natural history of patients with infectious diseases occurring in specialized populations, including those with hematologic malignancies and solid organ transplants.
- 3. Fellows will list the basic functions of the immune system and apply this knowledge to describe immunological basis of infectious disease syndromes.
- 4. Fellows will apply principles of infection control and hospital epidemiology to a well defined clinical problem related to hospital based infection control.

Third Year:

- 1. Fellows will independently identify and manage issues related to hospital epidemiology and infection control.
- 2. Fellows will recognize the signs and symptoms and understand the pathogenesis and natural history of medically important but uncommon infectious diseases.

PRACTICE-BASED LEARNING AND IMPROVEMENT

<u>Goal</u>: Fellows will be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

Objectives:

First year:

1. Fellows will identify issues that can be answered using scientific evidence, and use a variety of sources, including textbooks and electronic resources, to identify the latest evidence.

Second Year:

- 1. Fellows will assess the quality of evidence upon which decisions are made, and use that evidence to make appropriate treatment decisions.
- 2. Fellows will describe how clinical trials are conducted, and scientifically critique the published articles.

Third Year:

- 1. Fellows will identify and implement projects, such as guidelines or educational interventions, which would improve the care of patients with particular diagnoses of interest.
- 2. Fellows will analyze medical errors and present this information in a forum such as a Morbidity and Mortality conference.

INTERPERSONAL AND COMMUNICATION SKILLS

<u>Goal</u>: Fellows will be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families and professional associates.

Objectives:

First Year:

- 1. Fellows will gather data on sensitive issues related to infectious diseases, such as sexual history, in an appropriate manner.
- 2. Fellows will teach effectively on rounds.
- 3. Fellows will communicate all recommendations verbally to each patient's primary team.
- 4. Fellows will incorporate and consider issues of equity and inclusion in all communications within the team and with primary teams.

Second Year:

- 1. Fellows will discuss treatment plans with families and patients using the principles of family-centered care.
- 2. Fellows will give effective didactic presentations.
- 3. Fellows will provide regular feedback to team members.
- 4. Fellows will provide the appropriate information to subspecialists and fostera collaborative atmosphere.

Third Year:

- 1. Fellows will use appropriate tools to resolve differences of opinion with families on the optimal plan of care for infectious diseases.
- 2. Fellows will use appropriate tools to resolve differences of opinion with other providers.

PROFESSIONALISM

<u>Goal</u>: Fellows will demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, sensitivity to a diverse patient population, and fostering an environment of equity and inclusion.

Objectives:

First Year:

- 1. Fellows will provide timely consultation services.
- 2. Fellows will respond to pages within an appropriate time frame.
- 3. Fellows will be aware of ethical issues as they pertain to a patient with an infectious disease.
- 4. Fellows will consistently use interpreters to communicate with patients and families who prefer languages other than English.
- 5. Fellows will identify and work to resolve differences (cultural, racial, gender, sexuality, language, etc.) that create barriers to communication and care.

Second Year:

- 1. Fellows will consistently identify and appropriately analyze ethical issues as they apply to patients with an infectious disease.
- 2. Fellows will collaboratively address differences (cultural, racial, gender, sexuality, language, etc.) that create barriers to communication and care.

Third Year:

- 1. Fellows will independently address ethical issues as they apply to patients with an infectious disease.
- 2. Fellows will independently address cultural barriers to communication and care.

SYSTEMS-BASED PRACTICE

<u>Goals</u>: Fellows will demonstrate an awareness of and responsiveness to the larger context and system of health care, including differences in patient populations and practice settings. They will develop the ability to call on system resources effectively to provide care that is of optimal value, including maximizing infection control practices by the system, appropriate antibiotic use,

and guidelines of care for infectious diseases.

Objectives:

First Year:

- 1. Fellows will effectively access infection control experts to maximize care of patients.
- 2. Fellows will appropriately approve or disapprove the use of antibiotics for which their approval is required, and if disapproved, provide appropriate guidance on alternatives.
- 3. Fellows will effectively use the microbiology laboratory to identify patients with blood stream infections, identify those patients who are on inappropriate antibiotic therapy, and provide appropriate guidance to the physicians caring for those patients.

Second Year:

- 1. Fellows will consistently identify infection control issues early in the hospital course.
- 2. Fellows will routinely determine the cost of different medications used in the treatment of infectious diseases and factor this information into their medical decision making.
- 3. Fellows will apply knowledge of resource limitations of practices in smaller communities and isolated rural areas when performing consultations.

Third Year:

- 1. Fellows will provide appropriate expertise to optimize hospital epidemiology and infection control practices at the Hospital.
- Fellows will compare and contrast the wide variety of different practice patterns of different subspecialty groups (e.g. Hematology-Oncology) when managing infectious disease problems.
- 3. Fellows will offer advice appropriately tailored to various practice settings, including smaller communities and isolated rural areas.
- 4. Fellows will be able to formulate and edit guidelines that standardize and maximize the effectiveness of care.