Rotation Name: Infectious Disease Consults

Rotation Site Leader:

Updated by: Will Woodhouse and Jamison Norwood

Date: 3.25.2022

Goal:

The purpose of this educational unit is to expose residents to a variety of infectious diseases in the inpatient setting and improve their knowledge regarding diagnosis and management of infectious diseases.

Objectives:

By the end of this educational block, learners in this rotation will be able to:

1. Patient Care

- a. Obtain an accurate and relevant history including a detailed social, travel, sexual, exposure and immunization history
- b. Perform an accurate and thorough physical exam
- c. Gather clinical information needed to perform a consult including microbiology and radiology data

2. Medical Knowledge

- a. Recommend guideline-based diagnostics and treatment options for common infectious diseases
- b. Interpret diagnostic test results and applies supporting literature
- c. Develop a differential diagnosis and provides supporting rationale
- d. Identify potential antimicrobial side effects and drug-drug interactions
- e. Identify appropriate selection, duration, and de-escalation for antimicrobials for common infectious disease syndromes and pathogens
- f. Be able to produce final ID recommendations for consulting teams

3. Interpersonal and Communication Skills

- a. Communicate clearly across the care continuum with appropriate documentation
- b. Communicate with other health care team members to ensure appropriate follow up
- c. Discuss diagnosis and treatment plans with patient and family and uses patient centered language

4. Professionalism

- a. Perform tasks and responsibilities in a timely manner
- b. Demonstrate professionalism throughout interactions with colleagues and other health care members

5. Systems based practice

- a. Advocate for effective transitions and coordination of care including follow up, lab monitoring and home health for patients discharged on intravenous antibiotics
- b. Advocate for populations and communities with health care inequities
- c. Take into consideration potential barriers to discharge

6. Practice-based learning and improvement

a. Actively seek performance data and is committed to personal growth

Educational Strategies:

Educational Strategy	Skills
Appropriate gather all relevant patient information	 Ability to obtain ID focused history and physical exam Understanding consultants' clinical question and formulating next appropriate diagnostic step (if necessary)
Attend bedside rounds with fellow and/or attending	 Overall clinical reasoning Presentation skills Demonstration of physical exam skills, particularly for syndromes such as infective endocarditis
Review and interpret microbiological data	 Clinical decision-making about appropriate antimicrobial use Communication with teams about anticipated timelines for microbiologic results
Practice appropriate communication with clinical teams	 Ability to relay meaningful information to team in timely manner on daily basis Construct accurate and meaningful final recommendations to assist both inpatient consulting team and outpatient ID team.
Understand both inpatient and outpatient barriers to care	 Understanding of basic mechanics of transition to OPAT care Anticipates appropriate laboratory, ID, surgical, and radiology follow-up needed upon discharge.

Required Reading:

OVIVA trial:

- Noninferiority RCT supporting use of oral antibiotics for bone and joint infections.
 - o Li et al, 2019

POET trial:

- RCT supporting earlier transition (6 weeks vs ~17days) from IV to oral antibiotics in patients with left-sided infective endocarditis.
 - o Iverson et al, 2019

MERINO trial:

- RCT supporting use of meropenem over piperacillin-tazobactam in ESBL E. Coli and K. Pneumoniae bacteremia.
 - o Harris et al, 2018

IDSA C diff guidelines:

• Describes new recommendations for initial, recurrent, and severe C. diff infection. (See table 1 for overview.

Suggested Reading and/or Resources:

All IDSA guidelines can be found here.

Particular IDSA guidelines of interest:

- o Ventriculitis guidelines
- Outpatient Parenteral Antimicrobial Therapy (OPAT) guidelines

AHA/IDSA guidelines for Infective Endocarditis, Baddour et al. 2015

Evaluation:

(Ideally, the evaluation items below resemble the learning objectives above)

Assessment Form:

- 1. Please identify 3 skills you observed the resident do well? (Text Box)
- 2. Please identify 3 skills the resident needs to improve or should do differently. How should they do it differently? (Text Box)

(Ideally, limit to 8-10 skills that you ask your faculty to assess)

For the remaining items, please rate 1-5 (or did not observe):

- 1 = cannot do this skill
- 2 = can do this skill only with direct supervision (some needs to be there to supervise)
- 3 = can do this skill with indirect supervision (an attending or fellow is close by or available by phone)
- 4 = can do this skill unsupervised (they are ready to graduate for this skill)
- 5 = has achieved mastery of this skill (They can teach others how to do this skill well)
- 3. Patient Care
 - a. Acquire an accurate and relevant history
 - b. Performs an accurate physical exam
 - c. Gathers appropriate clinical data
- 4. Medical Knowledge
 - a. Recommends guideline based diagnostics and treatment options
 - b. Develops appropriate differential diagnosis and recommends appropriate diagnostic tests
 - c. Identifies drug-drug interactions and antimicrobial side effects
 - d. Selects appropriate antimicrobials including dose, duration.
- 5. Interpersonal and Communication Skills
 - a. Communicates with the patient, family members and other members of the healthcare team
 - b. Documents in a clear and concise manner
- 6. Professionalism
 - a. Creates documentation that is timely
 - b. Demonstrates professionalism in interactions with colleagues and other members of the healthcare team.
- 7. Systems based practice

	a.	Ensures smooth transitions of care and coordinates care between the inpatient and outpatient providers
	b.	Advocates for populations and communities with health care inequities
8. Practice-based learning and improvement		
	a.	Actively seeks feedback and asks supervisors for help when appropriate

Created by Moutsios, S. Jan 2021. Adapted from Thomas P and Kern D. Curriculum Development for Medical Education: A Six Step Approach. Johns Hopkins Press. Baltimore, MD. January 29, 2016. 3rd Ed.