



Curtin University

**CURTIN MEDICAL SCHOOL**

**MEDICINE**

**SPECIFIC LEARNING  
OBJECTIVES**

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## SECTION 1: TOPICS AND SPECIFIC LEARNING OBJECTIVES

### HISTORY TAKING AND PHYSICAL EXAMINATION

#### A. **KNOWLEDGE:** Students should be able to:

1	Describe the physiologic mechanisms that explain key findings in the history taking and physical examination.	Theme 1: Scientific Foundations of Medicine	1.1
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#### B. **SKILLS:** Students should be able to:

1	Use language appropriate for each patient.	Theme 2: Patient & Doctor: Clinical Practice	2.1
2	Take potential physical and mental impairments of the patient into account (poor hearing, dysphasia, mental distraction, slow processing of questions, etc.). Time management to be appropriately adjusted.	Theme 2: Patient & Doctor: Clinical Practice	2.1
3	Use non-verbal techniques to facilitate communication and pursue relevant inquiry.	Theme 2: Patient & Doctor: Clinical Practice	2.1
4	Obtain a thorough, accurate, logical, organised patient history.	Theme 2: Patient & Doctor: Clinical Practice	2.2
5	Obtain, whenever necessary, supplemental historical information from collateral sources (e.g. significant others or previous physicians).	Theme 2: Patient & Doctor: Clinical Practice	2.2
6	Demonstrate proper hygiene practices whenever examining a patient.	Theme 2: Patient & Doctor: Clinical Practice	2.14
7	Obtain consent prior to and during the physical examination.	Theme 2: Patient & Doctor: Clinical Practice	2.3
8	Offer to have a chaperone present during the examination.	Theme 2: Patient & Doctor: Clinical Practice	2.3
9	Perform a comprehensive physical examination of each system in a logical, organised, respectful, and thorough manner.	Theme 2: Patient & Doctor: Clinical Practice	2.3
10	Appropriately adapt the scope and focus of the history taking and physical examination to the medical situation and the time available.	Theme 2: Patient & Doctor: Clinical Practice	2.3

#### C. **PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Establish a habit of updating historical information and repeating important parts of the physical examination during follow-up visits.	Theme 4: Professional & Personal Development	4.9
2	Demonstrate consideration for the patient's modesty, feelings, limitations, and sociocultural background whenever taking a history and performing a physical examination.	Theme 4: Professional & Personal Development	3.4
3	Recognise the importance of and demonstrate a commitment to the utilisation of other health care professions in history taking and physical examination (e.g. interpreter services, advanced practice nurses, etc.).	Theme 4: Professional & Personal Development	4.8

## PATIENT-CENTRED COMMUNICATION

### A. **KNOWLEDGE:** Students should be able to:

1	Explain how patients' and physicians' perceptions, preferences, and actions are affected by cultural and psychosocial factors and how these factors affect the doctor-patient relationship.	Theme 1: Scientific Foundations of Medicine	1.2
2	Describe patient, physician, and system barriers to successfully negotiate treatment plans and patient concordance; describe strategies that may be used to overcome these barriers.	Theme 1: Scientific Foundations of Medicine	1.2
3	Explain useful strategies when communicating with culturally and linguistically diverse patients via an interpreter.	Theme 1: Scientific Foundations of Medicine	1.2
4	Explain basic techniques for breaking bad news.	Theme 1: Scientific Foundations of Medicine	1.2
5	Describe basic tenets of genetic counselling.	Theme 1: Scientific Foundations of Medicine	1.2

### B. **SKILLS:** Students should be able to:

1	Demonstrate active listening skills, effective verbal and non-verbal techniques to communicate empathy and help educate the patient.	Theme 2: Patient & Doctor: Clinical Practice	2.1
2	Elicit the patient's point of view, concerns and expectations about his or her illness and respond appropriately.	Theme 2: Patient & Doctor: Clinical Practice	2.8
3	Demonstrate a patient centred approach throughout the consultation.	Theme 2: Patient & Doctor: Clinical Practice	2.8
4	Discuss how the health problem affects the patient's life.	Theme 2: Patient & Doctor: Clinical Practice	2.8
5	Determine the extent to which a patient wants to be involved in making decisions about his or her care.	Theme 2: Patient & Doctor: Clinical Practice	2.8
6	Provide basic information and an explanation of the diagnosis, prognosis, and treatment plan.	Theme 2: Patient & Doctor: Clinical Practice	2.9
7	Participate in breaking bad news to patients (with guidance and direct supervision).	Theme 2: Patient & Doctor: Clinical Practice	2.1
8	Participate in discussing basic issues regarding advance directives with patients and their families (with guidance and direct supervision).	Theme 2: Patient & Doctor: Clinical Practice	2.1
9	Participate in discussing basic end-of-life issues with patients and their families (with guidance and direct supervision).	Theme 2: Patient & Doctor: Clinical Practice	2.1
10	Assess patient commitment and concordance with a treatment plan taking into account personal and economic circumstances.	Theme 2: Patient & Doctor: Clinical Practice	2.8
11	Communicate with a variety of patients, including multi-problem patients, angry patients, somatising patients, and substance-abuse patients.	Theme 2: Patient & Doctor: Clinical Practice	2.1

12	Demonstrate basic strategies for conflict management and resolution.	Theme 4: Professional & Personal Development	4.2
13	Demonstrate basic techniques of communication with non-English speaking patients via an interpreter.	Theme 2: Patient & Doctor: Clinical Practice	2.1

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Attend to or advocate for the patient's interests and needs in a manner that is patient centred and appropriate to the student's role.	Theme 2: Patient & Doctor: Clinical Practice	2.7
2	Demonstrate caring and respect when interacting with patients and their families even when confronted with atypical or emotionally charged behaviours.	Theme 4 Professional & Personal Development	4.1

## DIAGNOSTIC DECISION MAKING

**A. KNOWLEDGE:** Students should be able to:

1	Discuss key history and physical examination findings pertinent to the differential diagnosis.	Theme 1: Scientific Foundations of Medicine	1.3
2	Describe in basic terms the potential role of genetic information in diagnostic decision making.	Theme 1: Scientific Foundations of Medicine	1.2

**B. SKILLS:** Students should be able to:

1	Identify which problems are of highest priority.	Theme 2: Patient & Doctor: Clinical Practice	2.12
2	Formulate a differential diagnosis based on patient problems and findings from the history and physical examination.	Theme 2: Patient & Doctor: Clinical Practice	2.4
3	Use probability-based thinking and pattern recognition to identify the most likely diagnoses.	Theme 2: Patient & Doctor: Clinical Practice	2.7
4	Use critical pathways or practice guidelines to guide risk-benefit, cost-benefit and evidence-based diagnostic testing.	Theme 2: Patient & Doctor: Clinical Practice	2.5
5	Use pre-test probabilities and scientific evidence about performance characteristics of tests (sensitivity, specificity, likelihood ratios) to determine post-test probabilities according to the predictive value paradigm.	Theme 2: Patient & Doctor: Clinical Practice	2.7
6	Manage the element of uncertainty in diagnostic testing, especially the occurrence and causes of false positive and false negative results.	Theme 2: Patient & Doctor: Clinical Practice	2.5
7	Explain the implications of false positive and false negative tests results to patients effectively.	Theme 2: Patient & Doctor: Clinical Practice	2.9

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Incorporate the patient's perspective and preferences into diagnostic decision making and diagnostic test selection.	Theme 2: Patient & Doctor: Clinical Practice	2.8
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2	Demonstrate commitment to using risk-benefit, cost-benefit, and evidence-based considerations in the selection of diagnostic tests, procedures and therapeutic interventions.	Theme 2: Patient & Doctor: Clinical Practice	2.5
3	Recognise the importance of and demonstrate a commitment to the utilisation of other health care professionals in diagnostic decision making.	Theme 4: Professional & Personal Development	2.7

## THERAPEUTIC DECISION MAKING

### A. **KNOWLEDGE:** Students should be able to:

1	Discuss key factors to consider in choosing among treatment options, including risk, cost, evidence about efficacy, and consistency with pathophysiologic reasoning.	Theme 1: Scientific Foundations of Medicine	1.2
2	For common medications: describe factors for selecting a medication, potential adverse effects, drug interactions and potential compliance issues.	Theme 1: Scientific Foundations of Medicine	1.2
3	Discuss evidence about clinical effectiveness of medications and the potential biases of using absolute or relative risk or number of patients needed to treat.	Theme 1: Scientific Foundations of Medicine	1.2
4	Explain the extent to which the therapeutic plan is based on pathophysiologic reasoning and scientific evidence of effectiveness.	Theme 1: Scientific Foundations of Medicine	1.2
5	Explain the basics of the potential role of genetic information in therapeutic decision making, and its practical/ethical limitations.	Theme 1: Scientific Foundations of Medicine	1.2
6	Discuss ways to improve medication compliance and tools available to the patients: pharmacy drop-offs, Webster packs, and different types of prescription in Australia (e.g. PBS, S-100, S-8, DVA scripts, special authority scripts.).	Theme 1: Scientific Foundations of Medicine	1.2
7	Describe the importance of close follow-up of patients under active care.	Theme 2: Patient & Doctor: Clinical Practice	2.10

### B. **SKILLS:** Students should be able to:

1	Formulate an initial therapeutic plan.	Theme 2: Patient & Doctor: Clinical Practice	2.7
2	Change the therapeutic plan when goals of care change (including a shift toward palliative care). (This to be undertaken with careful involvement of the patients and all those around the patient.)	Theme 2: Patient & Doctor: Clinical Practice	2.12
3	Access and utilise, when appropriate, information resources to help develop an appropriate and timely therapeutic plan.	Theme 2: Patient & Doctor: Clinical Practice	2.15
4	Begin to estimate the probability that a therapeutic plan will produce the desired outcome.	Theme 2: Patient & Doctor: Clinical Practice	2.7
5	Write prescriptions and inpatient orders safely and accurately.	Theme 2: Patient & Doctor: Clinical Practice	2.11
6	Counsel patients about how to take their medications and what to expect when doing so, including beneficial outcomes and potential adverse effects.	Theme 2: Patient & Doctor: Clinical Practice	2.9

7	Monitor response to therapy, recognise when to seek consultation for additional diagnostic and therapeutic recommendations.	Theme 2: Patient & Doctor: Clinical Practice	2.7
8	Recognise when to screen for certain conditions based on age and risk factors and what to do with the results of the screening tests.	Theme 2: Patient & Doctor: Clinical Practice	2.5
9	Apply critical pathways and clinical practice guidelines to help guide therapeutic decision making.	Theme 2: Patient & Doctor: Clinical Practice	2.7
10	Demonstrate shared decision making, explaining the risks and benefits of treatment.	Theme 2: Patient & Doctor: Clinical Practice	2.9

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Demonstrate commitment to using risk-benefit, cost-benefit, and evidence-based considerations in the selection of therapeutic interventions.	Theme 4: Professional & Personal Development	4.2
2	Respect patients' autonomy and informed choices, including the right to refuse treatment.	Theme 4: Professional & Personal Development	4.4
3	Recognise the importance of and demonstrate a commitment to the utilisation of other health care professionals in therapeutic decision making.	Theme 4: Professional & Personal Development	4.8

## CASE PRESENTATION

**A. KNOWLEDGE:** Students should be able to:

1	Describe the components of comprehensive and abbreviated case presentations (oral and written) and settings appropriate for each.	Theme 1: Scientific Foundations of Medicine	1.1
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**B. SKILLS:** Students should be able to:

1	Prepare legible, accurate, comprehensive, and focused new patient workups.	Theme 2: Patient & Doctor: Clinical Practice	2.15
2	Orally present a new inpatient's or outpatient's case as much from memory as possible in an accurate, succinct, logical, chronological order, summarising pertinent positives and negatives.	Theme 2: Patient & Doctor: Clinical Practice	2.14
3	Accurately present a follow-up inpatient's or outpatient's case as much from memory as possible, being focused, concise and problem based.	Theme 2: Patient & Doctor: Clinical Practice	2.14
4	Produce inpatient or outpatient progress notes that are accurate, succinct and include a prioritised problem list with a concise assessment plan for each.	Theme 2: Patient & Doctor: Clinical Practice	2.15
5	Select the mode of presentation that is most appropriate to the clinical situation (e.g. written vs. oral, long vs. short, etc.).	Theme 2: Patient & Doctor: Clinical Practice	2.14



**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Respond appropriately and productively to feedback regarding performance.	Theme 4: Professional & Personal Development	4.9
2	Maintain the patient's privacy when dealing with protected health information and follow Health Privacy Act Legislation requirements.	Theme 4: Professional & Personal Development	4.10

**COMMUNICATION WITH INTERPROFESSIONAL COLLEAGUES**

**A. KNOWLEDGE:** Students should be able to:

1	Explain the role and contribution of each team member to the care of the patient.	Theme 1: Scientific Foundations of Medicine	1.2
2	Describe the role of psychosocial factors in team interactions.	Theme 1: Scientific Foundations of Medicine	1.2
3	Outline patient, physician, and system barriers to successfully negotiated treatment plans and patient concordance; outline strategies that may be used to overcome these barriers.	Theme 1: Scientific Foundations of Medicine	1.2

**B. SKILLS:** Students should be able to:

1	Demonstrate active listening skills, effective verbal and non-verbal techniques to communicate with other team members.	Theme 2: Patient & Doctor: Clinical Practice	2.1
2	Receive actionable feedback appropriately.	Theme 4: Professional & Personal Development	4.9
3	Work as an effective member of the patient care team, incorporating skills in interprofessional communication and collaboration.	Theme 4: Professional & Personal Development	4.8
4	Demonstrate basic strategies for managing and resolving conflict as part of a health care team.	Theme 4: Professional & Personal Development	4.2

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Attend to or advocate for the patient's interests and needs in a manner that is patient centred and appropriate to the student's role.	Theme 2: Patient & Doctor: Clinical Practice	2.7
2	Demonstrate teamwork and respect toward all members of the health care team (manifested by reliability, responsibility, honesty, helpfulness, selflessness, and initiative in working with the team, etc.).	Theme 4: Professional & Personal Development	4.8

## INTERPRETING CLINICAL INFORMATION

### A. **KNOWLEDGE:** Students should be able to:

1	Interpret specific diagnostic tests and procedures that are ordered to evaluate patients who present with common symptoms and diagnoses encountered in the practice of general medicine. Taking into account: <ul style="list-style-type: none"> <li>i. Important differential diagnostic considerations, including potential diagnostic emergencies;</li> <li>ii. Pre-test and post-test likelihood of disease (probabilistic reasoning); and</li> <li>iii. Performance characteristics of individual tests (sensitivity, specificity, positive and negative predictive value, likelihood ratios).</li> </ul>	Theme 2: Patient & Doctor: Clinical Practice	2.4
2	Define and describe for the tests and procedures listed under Point 3 below and in the PROCEDURAL SKILLS section: <ul style="list-style-type: none"> <li>i. Indications for testing;</li> <li>ii. Range of normal variation;</li> <li>iii. Critical values that require immediate attention</li> <li>iv. Pathophysiologic implications of abnormal results; and</li> <li>v. Relative cost.</li> </ul>	Theme 1: Scientific Foundations of Medicine	1.1
3	Independently interpret the results of the following laboratory tests: <ul style="list-style-type: none"> <li>i. CBC with diff and blood smear;</li> <li>ii. Urinalysis;</li> <li>iii. Electrolytes, calcium and phosphate;</li> <li>iv. Urea/Creatinine;</li> <li>v. Hepatic function panel; Hepatitis serologies;</li> <li>vi. Cardiac biomarkers (e.g. myoglobin, CK-MB, and Troponin I/T);</li> <li>vii. Routine coagulation tests (e.g. PT/PTT and INR);</li> <li>viii. Thyroid function tests (e.g. T3, T4, and TSH);</li> <li>ix. ABG;</li> <li>x. Body fluid cell counts and chemistries;</li> <li>xi. Fasting glucose and HbA1c;</li> <li>xii. Serum lipids; and</li> <li>xiii. Inflammatory markers.</li> </ul>	Theme 2: Patient & Doctor: Clinical Practice	2.5
4	Independently interpret the results of the following diagnostic procedures: <ul style="list-style-type: none"> <li>i. 12-lead ECG;</li> <li>ii. Chest radiograph;</li> <li>iii. Simple interpretation of Chest and Abdominal CT scan;</li> <li>iv. Simple interpretation of ECHO heart (LVH, Ejection Fraction, valves and pulmonary hypertension);</li> <li>v. Plain abdominal films (e.g. obstructive series, KUB); and</li> <li>vi. Pulmonary function tests.</li> </ul>	Theme 2: Patient & Doctor: Clinical Practice	2.5

5	Independently interpret the results of the following screening procedures: i. Mammogram; ii. PSA test and explain its limitations; and iii. Bone densitometry.	Theme 2: Patient & Doctor: Clinical Practice	2.5
6	Describe the basic electrophysiologic events that produce the surface ECG.	Theme 1: Scientific Foundations of Medicine	1.1
7	Describe how errors in test interpretation can affect clinical outcomes and costs.	Theme 1: Scientific Foundations of Medicine	1.1
8	Describe the concept of a threshold as it relates to testing and treatment decisions.	Theme 1: Scientific Foundations of Medicine	1.1
9	Describe the basic principles of using genetic information in clinical decision making.	Theme 1: Scientific Foundations of Medicine	1.1

**B. SKILLS:** Students should be able to:

1	Interpret a blood smear, Gram stain, and UA.	Theme 2: Patient & Doctor: Clinical Practice	2.5
2	Approach ECG interpretation in a systematic and logical fashion analysing the following: rate, rhythm, P wave morphology, PR interval, QRS width, axis, voltage, QT interval, ST segment morphology, and T wave morphology. Show an understanding of normal variations (stability and trends), and relate findings to clinical presentation and lab results.	Theme 2: Patient & Doctor: Clinical Practice	2.6
3	Recognise the following on ECG: i. Sinus tachycardia, sinus bradycardia, sinus arrhythmia; ii. Premature atrial beats, ectopic atrial rhythm/tachycardia, narrow complex supraventricular tachycardia; iii. Multifocal atrial tachycardia, atrial flutter, atrial fibrillation; iv. Different types of heart blocks; v. Junctional rhythm; vi. Premature ventricular beats; vii. Typical ventricular tachycardia, ventricular fibrillation; viii. Left and right atrial enlargement; ix. Left ventricular hypertrophy; x. Left and right bundle branch block, left anterior and posterior fascicular block; xi. The characteristic features of a properly functioning ventricular or dual chamber pacemaker; xii. The delta wave in Wolf-Parkinson-White Syndrome; xiii. The classic features of myocardial ischemia and infarction and be able to localize the findings (i.e. inferior, anterior, lateral, posterior, right	Theme 2: Patient & Doctor: Clinical Practice	2.5

- ventricular) and identify the probable culprit vessel;
- xiv. The classic features of pulmonary embolism; and
- xv. The characteristic effects of hypo- and hyperkalemia.

4	Approach chest radiography interpretation in a systematic and logical fashion analysing the following: technique (e.g. view, rotation, exposure), visible abdomen, soft tissues and bones of the thorax, mediastinum/hila, and lungs.	Theme 2: Patient & Doctor: Clinical Practice	2.5
5	Recognise the following on chest radiograph: <ul style="list-style-type: none"> <li>i. Rib fracture;</li> <li>ii. Cardiomegaly;</li> <li>iii. Lobar pneumonia;</li> <li>iv. Pleural effusion;</li> <li>v. Pneumothorax;</li> <li>vi. Pulmonary nodule;</li> <li>vii. Pulmonary oedema/“congestive heart failure” (e.g. cardiomegaly, pulmonary vascular redistribution, Kerley’s B Lines, interstitial/alveolar oedema);</li> <li>viii. Hilar lymphadenopathy; and</li> <li>ix. Mediastinal widening.</li> </ul>	Theme 2: Patient & Doctor: Clinical Practice	2.5
6	Record the results of laboratory tests in an organised manner, using flow sheets when appropriate.	Theme 2: Patient & Doctor: Clinical Practice	2.15
7	Estimate the pre-test likelihood of a disease or condition.	Theme 2: Patient & Doctor: Clinical Practice	2.7
8	Estimate the post-test probability of disease and stating the clinical significance of the results of laboratory tests and diagnostic procedures.	Theme 2: Patient & Doctor: Clinical Practice	2.7

## PREVENTION

### A. **KNOWLEDGE:** Students should be able to:

1	Discuss primary, secondary, and tertiary prevention.	Theme 1: Scientific Foundations of Medicine	1.2
2	Discuss criteria for determining whether or not a screening test should be incorporated into the periodic health assessment of adults.	Theme 1: Scientific Foundations of Medicine	1.3
3	Discuss general types of preventive health care issues that should be addressed on a routine basis in adult patients (i.e. cancer screening; prevention of infectious diseases, coronary artery disease, osteoporosis, and injuries; and identification of substance abuse).	Theme 1: Scientific Foundations of Medicine	1.3
4	Discuss vaccines that have been recommended for routine use in at least some adults (i.e. influenza, pneumococcal, measles, mumps, rubella, tetanus-diphtheria, hepatitis).	Theme 1: Scientific Foundations of Medicine	1.3

5	Discuss indications for endocarditis prophylaxis.	Theme 1: Scientific Foundations of Medicine	1.3
6	Discuss influence of age and clinical status on approach to prevention.	Theme 1: Scientific Foundations of Medicine	1.3
7	Discuss general categories of high-risk patients in whom routine preventative health care must be modified or enhanced (e.g. family history, travel to an underdeveloped area, occupational exposures, etc.).	Theme 1: Scientific Foundations of Medicine	1.3
8	Discuss the major areas of controversy in screening.	Theme 1: Scientific Foundations of Medicine	1.3
9	Discuss the potential roles and limitations of genetic testing in disease prevention/early detection.	Theme 1: Scientific Foundations of Medicine	1.3

**B. SKILLS:** Students should be able to:

1	Identify patients at high risk for developing diabetes, dyslipidemia, coronary artery disease, cancer, osteoporosis, influenza, pneumonia, hepatitis, HIV infection, and tuberculosis by screening for major risk factors.	Theme 2: Patient & Doctor: Clinical Practice	2.4
2	Perform a breast examination under supervision.	Theme 2: Patient & Doctor: Clinical Practice	2.6
3	Instruct patients to perform breast self-examination.	Theme 2: Patient & Doctor: Clinical Practice	2.6
4	Perform a digital rectal examination under supervision.	Theme 2: Patient & Doctor: Clinical Practice	2.6
5	Perform a testicular examination.	Theme 2: Patient & Doctor: Clinical Practice	2.6
6	Apply the “stages of change” approach and demonstrate motivational interviewing techniques to counsel patients about safe-sex practices, smoking cessation, alcohol abuse, weight loss, healthy diet, exercise, and seat belt use.	Theme 2: Patient & Doctor: Clinical Practice	2.10
7	Place and interpret a tuberculin skin test/PPD.	Theme 2: Patient & Doctor: Clinical Practice	2.5/ 2.6
8	Locate recently published recommendations regarding measures that should be incorporated into the periodic health assessment of adults.	Theme 2: Patient & Doctor: Clinical Practice	2.15

# GERIATRIC CARE

## Year 4

Key conditions in the elderly (may have atypical presentations):

- Cardiovascular, cerebrovascular and peripheral vascular disease;
- Diabetes;
- Urinary tract infection;
- Pneumonia;
- Arthritis; and
- Constipation.

Common geriatric problems:

- Frailty and functional decline;
- Sequelae of prolonged immobility and deconditioning;
- Falls/gait and balance mobility problems;
- Osteoporosis and fragility fractures;
- Hearing and visual impairment; and
- Altered cognition especially delirium.

## Year 5

Key conditions in the elderly (may have atypical presentations):

- Substance abuse;
- Depression;
- Thyroid disease;
- Fluid and electrolyte disturbances; and
- Acute abdomen.

Common geriatric problems:

- Dizziness;
- Altered cognition especially dementia;
- Incontinence;
- Weight loss/failure to thrive/malnutrition;
- Sleep disturbance; and
- Pressure injury, venous insufficiency ulcers and foot ulcers.

## SPECIFIC LEARNING OBJECTIVES:

### A. KNOWLEDGE: Students should be able to:

## Year 4

1	Discuss functional implications of ageing (both chronological and biological age) on each major organ system.	Theme 1: Scientific Foundations of Medicine	1.3
2	Describe nutritional needs of the elderly and adaptations needed in the presence of chronic illness.	Theme 1: Scientific Foundations of Medicine	1.3
3	Describe the pharmacokinetic and pharmacodynamic changes with ageing and the increased risk for iatrogenic complications among elderly patients.	Theme 1: Scientific Foundations of Medicine	1.3

4	Discuss the factors that contribute to polypharmacy in the elderly.	Theme 1: Scientific Foundations of Medicine	1.3
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#### Year 5

5	Discuss early palliative care involvement.	Theme 2: Patient & Doctor: Clinical Practice	2.13
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### B. SKILLS: Students should be able to:

#### Year 4

1	Obtain historical information from collateral sources, whenever required.	Theme 2: Patient & Doctor: Clinical Practice	2.2
2	Appropriately adapt communication, history taking and physical examination for the elderly patient.	Theme 2: Patient & Doctor: Clinical Practice	2.3
3	Identify patients at high risk for falling.	Theme 2: Patient & Doctor: Clinical Practice	2.4

#### Year 5

4	Perform a mental status examination to evaluate confusion and/or memory loss in an elderly patient.	Theme 2: Patient & Doctor: Clinical Practice	2.3
5	Communicate and involve the patient's partner, carer or family in the diagnostic and management plan, when appropriate.	Theme 2: Patient & Doctor: Clinical Practice	2.9
6	Participate in discussing basic issues regarding advance directives with patients and their families (with guidance and direct supervision).	Theme 2: Patient & Doctor: Clinical Practice	2.9
7	Participate in discussing basic end-of-life issues with patients and their families (with guidance and direct supervision).	Theme 2: Patient & Doctor: Clinical Practice	2.13
8	Participate in an interdisciplinary approach to management and rehabilitation of elderly patients.	Theme 4: Professional & Personal Development	4.8

### C. PROFESSIONAL BEHAVIOURS: Students should be able to:

1	Demonstrate respect to older patients, particularly those with disabilities or who are cognitively impaired, by making efforts to preserve their dignity and modesty.	Theme 4: Professional & Personal Development	4.2
2	Demonstrate a commitment to the utilisation of other health care professionals in the diagnosis and treatment of geriatric patients.	Theme 4: Professional & Personal Development	4.8

# NUTRITION

## A. KNOWLEDGE: Each student should be able to:

### Year 4

1	Discuss the relationship between diet and disease.	Theme 1: Scientific Foundations of Medicine	1.1
2	Discuss common medical problems that can cause nutritional deficiencies.	Theme 1: Scientific Foundations of Medicine	1.1
3	Discuss the contribution of nutrition to medical problems such as obesity, dyslipidemia, diabetes, and hypertension.	Theme 1: Scientific Foundations of Medicine	1.1
4	Discuss daily caloric, fat, carbohydrate, protein, mineral, and vitamin requirements; adequacy of diets in providing such requirements; evidence of need for and potential risks of supplements (e.g. calcium, antioxidants).	Theme 1: Scientific Foundations of Medicine	1.1
5	Describe common dietary supplements and their known adverse and beneficial effects on health.	Theme 1: Scientific Foundations of Medicine	1.1

### Year 5

6	Discuss the consequences of poor nutrition on a critically ill patient, such as poor wound healing, increased risk of infection, and increased mortality.	Theme 1: Scientific Foundations of Medicine	1.1
7	Describe the indications for enteral and parenteral nutrition.	Theme 1: Scientific Foundations of Medicine	1.2
8	Discuss the diagnosis and management of obesity, eating disorders, and body image disorders.	Theme 1: Scientific Foundations of Medicine	1.1

## B. SKILLS: Student should be able to demonstrate specific skills, including:

### Year 4

1	Calculate a patient's body mass index (BMI) and measuring waist circumference, interpreting these in light of different ethnic populations.	Theme 2: Patient & Doctor: Clinical Practice	2.6
2	Order appropriate tests for evaluating a patient's nutritional status, including albumin, prealbumin, serum chemistries and coagulation profile.	Theme 2: Patient & Doctor: Clinical Practice	2.5

### Year 5

3	Obtain a comprehensive nutritional assessment for all patients.	Theme 2: Patient & Doctor: Clinical Practice	2.2
4	Perform basic nutritional counselling, incorporating motivational interviewing techniques, with patients with obesity, diabetes mellitus, hyperlipidemia, hypertension, heart failure, and coronary artery disease.	Theme 2: Patient & Doctor: Clinical Practice	2.9



**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

*Year 4*

None specified for this topic.

*Year 5*

1	Recognise the importance of patient preferences and cultural factors when providing nutritional counselling and motivational interviewing.	Theme 3: Health and Illness in Society	3.2
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## PROCEDURAL SKILLS

**A. KNOWLEDGE:** Students should be able to:

*Year 4*

1	Describe key indications, contraindications, risks to patients and health care providers, benefits, and techniques for each of the following basic procedures; or likely alternative procedures: <ul style="list-style-type: none"><li>i. Venepuncture;</li><li>ii. Blood culture;</li><li>iii. ECG;</li><li>iv. Spirometry;</li><li>v. Point of Care INR</li><li>vi. Nasogastric tube placement;</li><li>vii. Urinary catheterisation (male and female);</li><li>viii. Endocervical, urethral or anal swabs for STI testing;</li><li>ix. Throat culture;</li><li>x. Cervical screening test;</li><li>xi. Digital rectal examination;</li><li>xii. Urine dipstick;</li><li>xiii. Urine pregnancy test;</li><li>xiv. Stool occult blood testing;</li><li>xv. Subcutaneous injection;</li><li>xvi. Intramuscular injection;</li><li>xvii. Intravenous injection;</li><li>xviii. Wound culture;</li><li>xix. Dressing change;</li><li>xx. Administer oxygen;</li><li>xxi. Mantoux (Tuberculin skin test)/PPD placement;</li><li>xxii. Capillary (fingerprick) BGL; and</li><li>xxiii. Chest radiography.</li></ul>	Theme 1: Scientific Foundations of Medicine	1.1
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## Year 5

2	Describe key indications, contraindications, risks, benefits, and techniques of each of the following advanced procedures and of any potential alternatives: i. Arthrocentesis: a. Elbow (olecranon bursa); b. Wrist; c. Knee; and d. Ankle. ii. Central venous catheterization: a. Internal jugular vein; b. Subclavian vein; and c. Femoral vein. iii. Arterial line placement: a. Radial artery; and b. Femoral artery. iv. Lumbar puncture; v. Thoracentesis; vi. Paracentesis; and viii. Arterial blood gas (Acute Care only).	Theme 1: Scientific Foundations of Medicine	1.1
3	Discuss the indications for and efficacy of intra-articular corticosteroid injections.	Theme 1: Scientific Foundations of Medicine	1.1

**B. SKILLS:** Students should be able to perform the practical skills and procedures in the *CURTIN MEDICAL SCHOOL LIST OF REQUIRED PRACTICAL SKILLS AND PROCEDURES* document.

*In addition, by the end of Year 5:*

1	Participate in obtaining informed consent for advanced procedures, including the explanation of the purpose, possible complications, alternative approaches, and conditions necessary to make the procedure as comfortable, safe, and interpretable as possible.	Theme 2: Patient & Doctor: Clinical Practice	2.9
2	Help to position the patient and make them as comfortable as possible during the procedure.	Theme 2: Patient & Doctor: Clinical Practice	2.6
3	Assist ( <b>under supervision, when appropriate</b> ) in the performance of the procedure.	Theme 2: Patient & Doctor: Clinical Practice	2.6
4	Order and interpret appropriate diagnostic tests on fluids removed from the patient (e.g. synovial fluid, cerebrospinal fluid, pleural fluid, and ascitic fluid).	Theme 2: Patient & Doctor: Clinical Practice	2.11

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Recognise the fear and anxiety many patients have when any procedure is performed and provide them with appropriate support.	Theme 4: Professional & Personal Development	4.2
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2	Make efforts to maximise patient comfort during a procedure.	Theme 4: Professional & Personal Development	4.2
3	Recognise and respect the patient's right to refuse procedures.	Theme 4: Professional & Personal Development	4.4
4	Regularly seek feedback from healthcare team members regarding procedural skills and respond appropriately and productively.	Theme 4: Professional & Personal Development	4.9

## MEDICOLEGAL AND BIOETHICS OF CARE

**A. KNOWLEDGE:** Students should be able to define, describe and discuss:

### Year 4

1	Basic ethical principles (justice, autonomy, beneficence, non-maleficence, truth-telling, and confidentiality).	Theme 4: Professional & Personal Development	4.1
2	The competent patient's right to refuse treatment.	Theme 4: Professional & Personal Development	4.1
3	The unique nature of a fiduciary relationship.	Theme 4: Professional & Personal Development	4.1
4	Basic elements of informed consent.	Theme 4: Professional & Personal Development	4.1
5	Circumstances under which informed consent is necessary and unnecessary.	Theme 4: Professional & Personal Development	4.1
6	Basic concepts of treatment efficacy, quality of life, and societal demands.	Theme 4: Professional & Personal Development	4.1
7	Potential conflicts between individual patient preferences and societal demands.	Theme 4: Professional & Personal Development	4.1
8	The role of the physician in making decisions about the use of expensive or controversial tests and treatments.	Theme 4: Professional & Personal Development	4.1
9	Bioethical concerns regarding genetic information, privacy issues in particular.	Theme 4: Professional & Personal Development	4.1
10	Cases as a practitioner where there may be objections to treatments (e.g. abortion) (Referral to a colleague is the responsibility of the doctor from whom this service is asked. This is all within the legal framework in Australia.)	Theme 4: Professional & Personal Development	4.10
11	Professional mandatory reporting requirements.	Theme 4: Professional & Personal Development	4.1

### Year 5

12	The unique bioethical concerns regarding end-of-life care.	Theme 2: Patient & Doctor: Clinical Practice	2.13
13	Circumstances when withholding or withdrawing treatment is acceptable.	Theme 4: Professional & Personal Development	4.1
14	The role of federal and state legislation in governing health care.	Theme 4: Professional & Personal Development	4.10

15	Circumstances when it may be unavoidable or acceptable to breach the basic ethical principles.	Theme 4: Professional & Personal Development	4.4
16	Issues of individual autonomy, rights and responsibilities versus societal autonomy, rights and responsibilities.	Theme 4: Professional & Personal Development	4.4

**B. SKILLS:** Students should be able to:

*Year 4*

1	Determine decision-making capacity.	Theme 4: Professional & Personal Development	4.9
2	Identify substitute decision makers.	Theme 4: Professional & Personal Development	4.9
3	Participate in obtaining informed consent for a procedure and applying an incremental and developmental approach to determining mental competence between adults, young people and children.	Theme 2: Patient & Doctor: Clinical Practice	2.9
4	Participate in explaining and obtaining informed consent for genetic testing.	Theme 2: Patient & Doctor: Clinical Practice	2.9
5	Participate in a supervisor's discussion with a patient about a requested treatment that may not be considered appropriate (e.g. not cost-effective).	Theme 2: Patient & Doctor: Clinical Practice	2.7
6	Create comprehensive and accurate medical records that fulfil state legislation requirements and meet the Medical Board of Australia's Good Medical Practice guidelines.	Theme 2: Patient & Doctor: Clinical Practice	2.15

*Year 5*

7	Participate in a discussion about advance directives with a patient and goals of care with patients, significant other(s), family and other staff.	Theme 2: Patient & Doctor: Clinical Practice	2.9
8	Participate in family and interdisciplinary team conferences discussing end-of-life care and incorporating the patient's wishes in that discussion.	Theme 2: Patient & Doctor: Clinical Practice	2.13
9	Obtain additional help from ethics experts in conflict resolution.	Theme 4: Professional & Personal Development	4.9

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Recognise the importance of patient preferences, perspectives, and perceptions regarding health and illness.	Theme 4: Professional & Personal Development	4.1
2	Demonstrate a commitment to caring for all patients, regardless of the medical diagnosis, gender, race, socioeconomic status, intellect/level of education, religion, political affiliation, sexual orientation, ability to pay, or cultural background.	Theme 4: Professional & Personal Development	4.1
3	Recognise the importance of allowing terminally ill patients to die with comfort and dignity when that is consistent with the wishes of the patient, significant other(s) and/or the patient's family.	Theme 4: Professional & Personal Development	4.4

4	Recognise the potential conflicts between patient expectations and medically appropriate care.	Theme 4: Professional & Personal Development	4.4
5	Respond appropriately to patients who are non-concordant with treatment.	Theme 4: Professional & Personal Development	4.1
6	Demonstrate respect for the patient's privacy and confidentiality when dealing with protected health information and follow the Health Privacy Act.	Theme 4: Professional & Personal Development	4.10
7	Appreciate the psychological impact genetic information may have on patients and their families.	Theme 4: Professional & Personal Development	4.1
8	Demonstrate at all times professional behaviours and maintenance of professional boundaries that meet the Medical Board of Australia's Good Medical Practice guidelines.	Theme 4: Professional & Personal Development	4.1
9	Demonstrate collegiality and appreciate the positive nature of collegiality and the limits of collegiality.	Theme 4: Professional & Personal Development	4.1

## SELF-DIRECTED LEARNING

### A. KNOWLEDGE: Students should be able to:

1	Describe key sources for remaining up to date on issues relevant to the medical management of adult patients.	Theme 1: Scientific Foundations of Medicine	1.6
2	Describe systems for managing information from a variety of sources.	Theme 1: Scientific Foundations of Medicine	1.1
3	Describe the concept of the focused clinical question.	Theme 1: Scientific Foundations of Medicine	1.1
4	Describe key questions to ask when critically appraising articles on diagnostic tests and medical therapeutics.	Theme 1: Scientific Foundations of Medicine	1.4

### B. SKILLS: Students should be able to:

1	Perform a digital literature search to find articles relevant to a focused clinical question.	Theme 1: Scientific Foundations of Medicine	1.4
2	Demonstrate critical review skills.	Theme 1: Scientific Foundations of Medicine	1.4
4	Assess the limits of medical knowledge in relation to patient problems.	Theme 1: Scientific Foundations of Medicine	1.4
5	Use information from consultants, colleagues and other health professionals critically and be able to summarise and present this to a colleague.	Theme 2: Patient & Doctor: Clinical Practice	2.7
6	Recognise when additional information is needed to care for the patient.	Theme 2: Patient & Doctor: Clinical Practice	2.12

### C. PROFESSIONAL BEHAVIOURS: Students should be able to:

1	Demonstrate an ongoing commitment to self-directed learning across all aspects of medical care.	Theme 4: Professional & Personal Development	4.9
2	Recognise own limitations and ask for help when needed.	Theme 4: Professional & Personal Development	4.9
3	Seek feedback regularly across all aspects of medical care and respond appropriately and productively.	Theme 4: Professional & Personal Development	4.9
4	Recognise the value and limitations of other health care professionals when confronted with a knowledge gap.	Theme 4: Professional & Personal Development	4.9

5	Recognise the expectations of ongoing learning as set out by the professional bodies (e.g. the Royal Colleges) and maintenance of CPD credits.	Theme 4: Professional & Personal Development	4.9
6	Maintain medical indemnity as a student and as a doctor.	Theme 4: Professional & Personal Development	4.10
7	Engage in ongoing critical self-appraisal and reflection.	Theme 4: Professional & Personal Development	4.9

## SECTION 2: ADDITIONAL YEAR 5 TOPICS AND SPECIFIC LEARNING OBJECTIVES

(In addition to revisiting the Year 4 Specific Learning Objectives)

### OCCUPATIONAL HEALTH CARE

#### A. **KNOWLEDGE:** Students should be able to:

1	Describe common environmental diseases that are likely to be encountered by a physician and the principal aetiological agents associated with them.	Theme 1: Scientific Foundations of Medicine	1.1
2	Describe the pathogenesis of specific occupational diseases and the types of risks that may be encountered in the home or at the work site: <ul style="list-style-type: none"> <li>i. Musculoskeletal/ergonomic or “repetitive stress” disorders (e.g. low back pain, carpal tunnel syndrome, etc.);</li> <li>ii. Work related lung disorders (e.g. occupational asthma, particulate inhalation, etc.);</li> <li>iii. Noise related hearing loss;</li> <li>iv. Skin disorders (e.g. latex allergy and other forms of occupational dermatitis);</li> <li>v. Infectious disease exposure (e.g. hepatitis, HIV, TB, etc.); and</li> <li>vi. Psychological/stress related disorders.</li> </ul>	Theme 1: Scientific Foundations of Medicine	1.1
3	Discuss the information sources for determining the risk of specific environmental and occupational health hazards.	Theme 1: Scientific Foundations of Medicine	1.4
4	Discuss the purpose of Occupational Safety and Health Act regulations and the function of WorkSafe WA/Safe Work Australia.	Theme 4: Professional & Personal Development	4.10
5	Explain general aspects of return to work programs e.g. reduced hours, graded approach, modified duties, supervision, regular performance reviews etc.	Theme 1: Scientific Foundations of Medicine	1.1
6	Discuss the reporting obligations relating to public safety (e.g. assessing fitness to drive).	Theme 1: Scientific Foundations of Medicine	1.1

#### B. **SKILLS:** Students should be able to:

1	Obtain an appropriate occupational history on all patients and identifying those patients whose health may have been adversely affected by their living conditions or work environment.	Theme 2: Patient & Doctor: Clinical Practice	2.2
2	Consider the possibility that the patient’s illness may be related to their home or work environment.	Theme 2: Patient & Doctor: Clinical Practice	2.4

3	Provide patients with sound advice on the prevention of occupational and environmental-related diseases.	Theme 2: Patient & Doctor: Clinical Practice	2.9
4	Accurately diagnose and develop a cost-effective basic management plan for common occupational health problems (e.g. carpal tunnel syndrome, asthma, asbestosis).	Theme 2: Patient & Doctor: Clinical Practice	2.4
5	Determine when to obtain consultation from an environmental and occupational medicine specialist.	Theme 4: Professional & Personal Development	4.9
6	Access and utilise appropriate information systems and resources to help delineate issues related to occupational health problems.	Theme 2: Patient & Doctor: Clinical Practice	2.15

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Demonstrate an understanding that physicians have a duty and professional responsibility to follow-up on conditions that are suspected of causing occupational or environmental-related illnesses.	Theme 4: Professional & Personal Development	4.1
2	Appreciate the impact occupational health problems have on a patient's quality of life, well-being, ability to work, and their family.	Theme 4: Professional & Personal Development	4.1

## COORDINATION OF CARE

**A. KNOWLEDGE:** Students should be able to:

1	Explain the role of consultants and their limits in the care of a patient.	Theme 4: Professional & Personal Development	4.8
2	Outline the key personnel and programs in and out of the hospital that may be able to contribute to the ongoing care of an individual patient for whom the student has responsibility (e.g. home health providers, social workers, case coordinators/managers, community health organisations, etc.).	Theme 4: Professional & Personal Development	4.8
3	Explain the role of the general practitioner in coordinating the comprehensive and longitudinal patient care plan, including communicating with the patient and family (face-to-face, telephone, or email) and evaluating patient well-being through home health and other care providers.	Theme 4: Professional & Personal Development	4.8
4	Discuss the role of the general practitioner in the coordination of care during key transitions (e.g. outpatient to inpatient, inpatient to skilled nursing facility, inpatient to hospice, etc.).	Theme 4: Professional & Personal Development	4.8
5	Discuss the role of clinical nurse specialists, nurse practitioners, and other allied health professionals in co-managing patients in the outpatient and inpatient settings.	Theme 4: Professional & Personal Development	4.8



6	Explain the importance of reconciliation of medications at all transition points of patient care.	Theme 2: Patient & Doctor: Clinical Practice	2.14
7	Explain the rationale for a standardized approach to all handover communications.	Theme 2: Patient & Doctor: Clinical Practice	2.14

**B. SKILLS:** Students should be able to:

1	Discuss with the patient and their family ongoing health care needs; using appropriate language, avoiding jargon, and medical terminology.	Theme 2: Patient & Doctor: Clinical Practice	2.9
2	Participate in developing a coordinated, ongoing care plan in the community.	Theme 3: Health & Illness in Society	3.1
3	Obtain a social history that identifies potential limitations in the home setting which may require an alteration in the medical care plan to protect the patient's welfare.	Theme 2: Patient & Doctor: Clinical Practice	2.2
4	Reconcile patient medications at key transition points in care.	Theme 2: Patient & Doctor: Clinical Practice	2.14
5	Convey accurately vital patient information at all care handover points.	Theme 2: Patient & Doctor: Clinical Practice	2.14

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Demonstrate responsibility for patients' overall welfare.	Theme 4: Professional & Personal Development	4.2
2	Participate, whenever possible, in coordination of care and in the provision of continuity.	Theme 4: Professional & Personal Development	4.8
3	Take the responsibility for, and have the ability to, write high quality discharge summaries in a timely manner to all those relevant in the care of the patient. For outpatient clinics this means writing letters in a timely manner, as set out by the organisations to all those involved. Where required, faster methods of information transfer are used, like fax, email, or telephone.	Theme 2: Patient & Doctor: Clinical Practice	2.14

## PALLIATIVE CARE

Students must complete the Embedded Modules on the Palliative Care Curriculum for Undergraduates (PCC4U) funded by the Australian Government Department of Health on the website <http://www.pcc4u.org/>  
(See the EMBEDDED MODULES document on the Year 4 Unit Blackboard site for further information about completion.)

**A. KNOWLEDGE:** Students should be able to:

1	Describe basic end-of-life issues from patients' and their families' perspectives.	Theme 1: Scientific Foundations of Medicine	1.2
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2	Explain the limits of medicine in prolonging life and recognise when efforts to prolong life may not benefit patients.	Theme 1: Scientific Foundations of Medicine	1.1
3	Describe common symptom managements in end-of-life patients including implementation of a syringe driver for symptom control in a dying patient.	Theme 1: Scientific Foundations of Medicine	1.3

**B. SKILLS:** Students should be able to:

1	Participate in discussing basic end-of-life issues with patients and their families (with guidance and direct supervision).	Theme 2: Patient & Doctor: Clinical Practice	2.1
2	Initiate a conversation around goals of care and use shared decision making in communicating about quality of life and end-of-life choices.	Theme 2: Patient & Doctor: Clinical Practice	2.1
3	Communicate bad news (such as new cancer diagnosis or progression) to patient and families in a truthful, compassionate and appropriate way.	Theme 2: Patient & Doctor: Clinical Practice	2.1
4	Assess a patient at end-of-life for pain and other forms of distress and identify reversible causes of distress (such as urinary retention, drug and alcohol withdrawal) at the end-of-life.	Theme 2: Patient & Doctor: Clinical Practice	2.13
5	Diagnose dying or risk of dying.	Theme 2: Patient & Doctor: Clinical Practice	2.13
6	Recognize own limitations and when referral to specialised palliative care service is appropriate.	Theme 4: Professional & Personal Development	4.9

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Recognise the different responses and emotions of people living with life-limiting illnesses and their families.	Theme 4: Professional & Personal Development	4.2
2	Recognise how own values and beliefs about death and dying affect own personal responses and interactions with people with life-limiting illnesses and their families.	Theme 4: Professional & Personal Development	4.5
3	Demonstrate empathy and compassion, with respect for a person's sense of control and personal resources.	Theme 4: Professional & Personal Development	4.2
4	Demonstrate a commitment to an interdisciplinary approach to care for people with life-limiting illnesses.	Theme 4: Professional & Personal Development	4.8

## COMMUNITY HEALTH CARE

**A. KNOWLEDGE:** Students should be able to:

1	Discuss the concepts of rate, incidence, and prevalence to characterise the health of a population.	Theme 3: Health and Illness in Society	3.2
2	Discuss how to gather health information about a population.	Theme 3: Health and Illness in Society	3.2

3	Distinguish disease epidemiology in a community from that experienced in an office or hospital practice.	Theme 3: Health and Illness in Society	3.2
4	Describe how health care financing and health care delivery systems affect individual physicians, patients, and communities.	Theme 3: Health and Illness in Society	3.7
5	Discuss how community and individual responses to health problems may be affected by both individual and community socio-cultural characteristics.	Theme 3: Health and Illness in Society	3.2
6	Describe local government, social service, or community organisations that provide links between the underserved members of the community (including vulnerable members of the community such as those with a disability) and the medical care systems.	Theme 3: Health and Illness in Society	3.7
7	Discuss barriers faced by patients in the community setting.	Theme 3: Health and Illness in Society	3.2

**B. SKILLS:** Students should be able to:

1	Define and describe a population, its demography, culture, socioeconomic makeup, and health status.	Theme 1: Scientific Foundations of Medicine	1.1
2	Identify the unique characteristics of a population that affect the health of the population and individuals within that population.	Theme 3: Health and Illness in Society	3.1
3	Consider how the socio-cultural characteristics of a particular community may affect that population's attitudes toward health care.	Theme 3: Health and Illness in Society	3.2
4	Demonstrate, in daily patient care, an understanding of the community and socio-cultural context that may affect an individual patient's health care decisions and health-related behaviours.	Theme 3: Health and Illness in Society	3.2
5	Identify patients whose illnesses may put the community at risk.	Theme 2: Patient & Doctor: Clinical Practice	2.4
6	Incorporate a population-based perspective in analysing clinical problems.	Theme 3: Health and Illness in Society	3.1
7	Critically read clinical studies and apply the findings to health care decisions involving real patients and populations of patients.	Theme 1: Scientific Foundations of Medicine	1.4
8	Incorporate principles of disease prevention and behavioural change appropriate for specific populations of patients within a community.	Theme 3: Health and Illness in Society	3.5
9	Attempt to develop solutions for barriers to health care delivery (e.g. socio-cultural, financial, and system-based) that affect individual patients.	Theme 3: Health and Illness in Society	3.6
11	Use, when appropriate, local government, social service, and community organisations to improve the health of individuals and populations.	Theme 3: Health and Illness in Society	3.6

12	Access and utilise appropriate information systems and resources to help delineate issues related to population health.	Theme 1: Scientific Foundations of Medicine	1.4
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**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Demonstrate respect for and sensitivity towards cultural needs and socioeconomic diversity, including those of Indigenous and culturally and linguistically diverse populations.	Theme 3: Health and Illness in Society	3.2
2	Show willingness to accept at least partial responsibility for the health of populations.	Theme 3: Health and Illness in Society	3.1
3	Respond nonjudgmentally to an individual whose socio-cultural and community-based background result in seemingly counterproductive health care decisions and health-related behaviours.	Theme 3: Health and Illness in Society	3.4
4	Value the unique contributions of all members of the health care team.	Theme 4: Professional & Personal Development	4.8

## CONTINUOUS IMPROVEMENT IN SYSTEMS OF MEDICAL PRACTICE

**A. KNOWLEDGE:** Students should be able to:

1	Explain the concept of systems-based practice.	Theme 1: Scientific Foundations of Medicine	1.1
2	Explain how patient care is affected by other professionals, organisations, and society.	Theme 1: Scientific Foundations of Medicine	1.1
3	Discuss the principles of clinical quality improvement, including the notion of variation in practice as a quality issue and the concept of medical care as a process which can be studied and improved.	Theme 3: Health and Illness in Society	3.6
4	Describe the analysis and improvement of systems to address common quality problems (e.g. treatment delays, medication errors, failure to use evidence-based diagnostics/treatments, failure to provide preventive care, etc.).	Theme 3: Health and Illness in Society	3.6
5	Discuss the principles of medical record organisation in both inpatient and ambulatory settings.	Theme 1: Scientific Foundations of Medicine	1.1
6	Describe the importance of complete, timely and honest medical documentation in the context of measuring quality of care, avoiding redundancy, preventing medical errors, and improving patient safety and facilitating continuity of patient care.	Theme 3: Health and Illness in Society	3.6
7	Describe the multidimensional approach to the assessment of quality, including the patient's perspective of quality.	Theme 3: Health and Illness in Society	3.6

8	Discuss the relationship of quality and cost in health care from the standpoint of the individual, health care systems, and society.	Theme 3: Health and Illness in Society	3.6
9	Describe major health care safety concerns (e.g. medication errors, wrong-site procedures, patient misidentification, miscommunication among health care givers, nosocomial infections, falls, use of restraints, etc.).	Theme 3: Health and Illness in Society	3.6
10	Describe and discuss the potential benefits and pitfalls of critical pathways/practice guidelines intended to improve the quality of care.	Theme 3: Health and Illness in Society	3.6
11	Describe the basic organisational structures and financing streams of the Australian health care system.	Theme 3: Health and Illness in Society	3.7
12	Describe and discuss the fundamentals of the various type of health insurance (e.g. fee-for-service, preferred provider organisation, health maintenance organisation, point-of- service).	Theme 3: Health and Illness in Society	3.7
13	Describe and discuss the fundamentals of Medicare, PBS and NDIS.	Theme 3: Health and Illness in Society	3.7

**B. SKILLS:** Students should be able to:

1	Use hospital-based support systems to assist in making clinical decisions (e.g. antibiotic control program, critical pathways/practice guidelines, etc.).	Theme 2: Patient & Doctor: Clinical Practice	2.15
2	Recognise system flaws in the delivery of care (e.g. inability to arrange a post-discharge appointment within a needed time frame, delays in obtaining test results, inaccessibility of medical records, etc.).	Theme 3: Health and Illness in Society	3.7
3	Use patient education materials to facilitate patients' participation in their own care.	Theme 2: Patient & Doctor: Clinical Practice	2.9
4	Use the medical records' system efficiently to produce medical notes that communicate information clearly.	Theme 2: Patient & Doctor: Clinical Practice	2.15
5	Maintain accurate documentation of preventive health measures.	Theme 2: Patient & Doctor: Clinical Practice	2.15
6	Assess the patients' needs from the standpoint of the individual, family, and community.	Theme 2: Patient & Doctor: Clinical Practice	2.9
7	Identify resources available to patients within the health care system.	Theme 1: Scientific Foundations of Medicine	1.4
8	Report patient safety concerns and medical errors to the appropriate individuals, and lodging with monitoring systems.	Theme 2: Patient & Doctor: Clinical Practice	2.14
9	Use resources, appropriate information systems, and the tenets of evidence-based medicine to assess systems-based practice issues.	Theme 1: Scientific Foundations of Medicine	1.6

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Recognise the importance of systems, particularly inter-professional collaboration, in delivering high quality patient care.	Theme 4: Professional & Personal Development	4.8
2	Strive to improve the timeliness diagnostic and therapeutic decision making in order to improve quality of care, increase patient satisfaction, and reduce health care costs.	Theme 4: Professional & Personal Development	4.2
3	View the patient as the centre of the health care delivery system.	Theme 4: Professional & Personal Development	4.2
4	Advocate for patients in the health care system.	Theme 3: Health and Illness in Society	3.3
5	Appreciate that medical error prevention and patient safety are the responsibility of all health care providers and systems and accept the appropriate degree of responsibility at the medical student level.	Theme 3: Health and Illness in Society	3.6
6	Appreciate the importance teamwork in delivering high quality care.	Theme 4: Professional & Personal Development	4.8
7	Respect other health care professionals as colleagues on a patient-centred health delivery team and as mutual contributors to high quality patient care.	Theme 4: Professional & Personal Development	4.8

## RESOURCE STEWARDSHIP

**A. KNOWLEDGE:** Students should be able to:

1	Explain the concept of value in health care.	Theme 3: Health and Illness in Society	3.7
2	Explain basic concepts of health economics (supply and demand, efficiency, opportunity costs).	Theme 3: Health and Illness in Society	3.7
3	Describe the contributing components of waste in health care.	Theme 3: Health and Illness in Society	3.7
4	Explain the benefits, harms and relative costs of interventions, tests and prescribing.	Theme 3: Health and Illness in Society	3.7
5	Provide examples of low value treatments.	Theme 3: Health and Illness in Society	3.7
6	Describe system level factors that can combine to improve patient outcomes and reduce waste.	Theme 3: Health and Illness in Society	3.7
7	Explain patient reported outcome measures.	Theme 3: Health and Illness in Society	3.7
8	Explain the concept of resource stewardship and its importance to sustainable effective high quality health care.	Theme 3: Health and Illness in Society	3.7

9	Describe the role of the physician in resource stewardship.	Theme 3: Health and Illness in Society	3.7
10	Describe the role of the physician in supporting the patient to make informed choices around their treatment and the cost and benefit of low value treatments.	Theme 3: Health and Illness in Society	3.7

**B. SKILLS:** Students should be able to:

1	Participate in a shared decision-making discussion with a patient that allows the patient to understand what alternative treatments are available, and what the risks and costs are of the various options.	Theme 2: Patient & Doctor: Clinical Practice	2.9
2	Customise a patient care plan that incorporates patient values and concerns.	Theme 2: Patient & Doctor: Clinical Practice	2.7
3	Identify tests, investigations and procedures that have little or no benefit and/or may be harmful.	Theme 2: Patient & Doctor: Clinical Practice	2.5

**C. PROFESSIONAL BEHAVIOURS:** Students should be able to:

1	Respond appropriately to patients' questions relating to treatment options.	Theme 2: Patient & Doctor: Clinical Practice	2.1
2	Demonstrate respect for the patient perspective.	Theme 2: Patient & Doctor: Clinical Practice	2.8
3	Demonstrate integrity in their decision-making processes.	Theme 4: Professional & Personal Development	4.2

## SECTION 3: COMMON AND/OR IMPORTANT PRESENTATIONS - SYMPTOM, SIGN, OR ABNORMAL LABORATORY RESULTS

The following common and/or important presentations are important for students to develop knowledge and skills in relation to differential diagnosis, investigation, treatment and management.

Please note, many of these are also listed in the GP, Surgery and Psychiatry Specific Learning Objectives documents.

1. Abdominal pain
2. Altered mental state – including delirium and causes of dementia\*
3. Anaemia\*
4. Chest pain/discomfort
5. Cough
6. Dyspnoea
7. Dysuria and/or haematuria
8. Fever\*
9. Fluid, electrolyte and acid-base balance\*
10. Joint pain\*
11. Common skin rashes and skin tumours\*
12. GI bleeding
13. Altered bowel habit
14. Pain\*

\*Please note there are additional SLOs for these highlighted presentations.

### SPECIFIC LEARNING OBJECTIVES

For each symptom, sign or abnormal laboratory test, the student should be able to integrate the previously described topics and Specific Learning Objectives of:

- History taking and physical examination
- Diagnostic decision making
- Interpretation of clinical information
- Therapeutic decision making
- Prevention and
- Procedural skills

in order to:

1	Take an appropriate history and conduct a physical examination relevant to the symptom, sign or abnormal test.	Theme 2: Patient & Doctor: Clinical Practice	2.7
2	Discuss the differential diagnoses of the symptom, sign or abnormal test using probability-based thinking.	Theme 2: Patient & Doctor: Clinical Practice	2.4
3	Demonstrate appropriate diagnostic decision making.	Theme 2: Patient & Doctor: Clinical Practice	2.4
4	Interpret the clinical diagnostic tests and procedures relevant to the symptom, sign or abnormal test (see specific list in the INTERPRETATION OF CLINICAL INFORMATION section).	Theme 2: Patient & Doctor: Clinical Practice	2.4



5	Perform appropriate procedural skills relevant to the symptom, sign or abnormal test (see specific list in procedural skills).	Theme 2: Patient & Doctor: Clinical Practice	2.6
6	Formulate initial and longer term therapeutic plans.	Theme 2: Patient & Doctor: Clinical Practice	2.7/ 2.10

## ADDITIONAL SYMPTOM, SIGN, ABNORMAL LABORATORY TESTS SPECIFIC LEARNING OBJECTIVES

### ALTERED MENTAL STATE

#### A. KNOWLEDGE: Students should be able to:

##### Year 4

1	Describe the elements of the Glasgow Coma Scale (GCS)	Theme 1: Scientific Foundations of Medicine	1.3
2	Discuss the differential diagnoses of impaired conscious state	Theme 1: Scientific Foundations of Medicine	1.3
3	Discuss the differential diagnoses of delirium	Theme 1: Scientific Foundations of Medicine	1.3
4	Discuss the predictors and prevention of delirium	Theme 1: Scientific Foundations of Medicine	1.3
5	Describe the clinical features that differentiate between delirium, depression and dementia (especially in the elderly)	Theme 1: Scientific Foundations of Medicine	1.3

##### Year 5 (in addition to Year 4)

6	Explain other culturally appropriate cognitive screening tools e.g. Kimberley Indigenous Cognitive Assessment (KICA) for Aboriginal and Torres Strait Islander people and Rowland Universal Dementia Assessment Scale (RUDAS) as the mental state examination test for CALD.	Theme 1: Scientific Foundations of Medicine	1.3
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#### B. SKILLS: Students should be able to:

##### Year 4

1	Document level of consciousness in terms of the GCS.	Theme 2: Patient & Doctor: Clinical Practice	2.6
2	Perform a cognitive screening assessment using a validated tool e.g. Abbreviated Mental test Score (AMTS), Mini Mental State Examination (MMSE) or Confusion Assessment Method (CAM).	Theme 2: Patient & Doctor: Clinical Practice	2.6

Year 5 (in addition to Year 4)

3	Perform a culturally appropriate cognitive assessment	Theme 2: Patient & Doctor: Clinical Practice	2.6
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## ANAEMIA

**A. KNOWLEDGE:** Students should be able to diagnose, investigate and manage:

*Year 4*

1. Iron, Vitamin B 12 or folate deficiency anaemias.
2. Anaemia of chronic disease.
3. The Thalassaemias.
4. Haemolytic anaemias.

*Year 5 (in addition to Year 4)*

5. Sideroblastic anaemia.
6. Aplastic anaemia and leukaemias and other myeloproliferative neoplasms.

ADDITIONAL PRESENTATION-SPECIFIC LEARNING OBJECTIVES: Students should be able to:

*Year 4*

1	Describe the classification of anaemias by red blood cell pathophysiology and red blood cell volume (MCV).	Theme 1: Scientific Foundations of Medicine	1.3
2	Describe the clinical presentations of anaemia.	Theme 1: Scientific Foundations of Medicine	1.3
3	Describe the treatment of anaemias.	Theme 1: Scientific Foundations of Medicine	1.3

*Year 5 (in addition to Year 4)*

4	Recognise populations at risk of developing anaemia including gender, nutrition, race and ethnic groups with increased prevalence of genetic factors associated with certain anaemias.	Theme 1: Scientific Foundations of Medicine	1.3
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**B. SKILLS**

None specified for this topic.

## FEVER

**A. KNOWLEDGE:** Students should be able to diagnose, investigate and manage:

### *Year 4*

1. Common causes of fever including viral and bacterial upper and lower respiratory syndromes.
2. Meningitis.
3. Septicaemia and septic shock.
4. Acute rheumatic fever.

### *Year 5 (in addition to Year 4)*

5. Infections acquired through overseas travel e.g. malaria, dengue or occupational acquisition e.g. Q fever.
6. Febrile neutropenia
7. Fever with certain medications including neuroleptic malignant fever.
8. Connective tissue diseases.
9. Malignancy.

ADDITIONAL PRESENTATION-SPECIFIC LEARNING OBJECTIVES; (*See also sections of INTERPRETATION OF CLINICAL INFORMATION and PROCEDURAL SKILLS in this document.*)

Students should be able to:

### *Year 5*

1	Describe the diagnostic approach for fever of unknown origin – history, examination, investigations.	Theme 1: Scientific Foundations of Medicine	1.2
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**B. SKILLS**

None specified for this topic.

## FLUID, ELECTROLYTE AND ACID-BASE DISORDERS

**A. KNOWLEDGE:** Students should be able to diagnose, investigate and manage:

### *Year 4*

1. Metabolic acidosis or alkalosis, or respiratory acidosis or alkalosis as the primary diagnosis.
2. The patient with shock.

### *Year 5*

3. Hyper and hyponatraemia.

ADDITIONAL PRESENTATION-SPECIFIC LEARNING OBJECTIVES; (*See also sections of INTERPRETATION OF CLINICAL INFORMATION and PROCEDURAL SKILLS in this document.*)

Students should be able to:

#### *Year 4*

1	Describe the pathophysiology and classification of shock.	Theme 1: Scientific Foundations of Medicine	1.3
2	Describe the pathophysiology of electrolyte and acid-base disorders.	Theme 1: Scientific Foundations of Medicine	1.3
3	Construct a differential diagnosis for each primary acid-base disorder.	Theme 1: Scientific Foundations of Medicine	1.3

#### *Year 5 (in addition to Year 4)*

4	Describe and calculate replacement and maintenance fluid therapy in adults.	Theme 1: Scientific Foundations of Medicine	1.3
5	Discuss the differential diagnoses for hypo and hypernatraemia.	Theme 1: Scientific Foundations of Medicine	1.3

### **B. SKILLS**

None specified for this topic.

## **JOINT PAIN**

### **A. KNOWLEDGE:** Students should be able to diagnose, investigate and manage:

#### *Year 4*

1. Common causes of acute joint pain including gout, injuries, reactive arthritis.
2. Osteoarthritis.
3. Rheumatoid arthritis.
4. Other autoimmune arthritis e.g. SLE, Scleroderma, psoriatic arthritis.
5. Acute rheumatic fever (see also fever).

#### *Year 5 (in addition to Year 4)*

5. Pseudogout.
6. Septic arthritis – gonococcal and non-gonococcal.
7. Osteomyelitis.

### **B. SKILLS**

None specified for this topic.

## **SKIN RASHES AND SKIN TUMOURS**

### **A. KNOWLEDGE:** Students should be able to diagnose, investigate and manage:

#### *Year 4*

1. Acne and rosacea.
2. Common skin rashes including atopic, contact and seborrheic dermatitis.
3. Bacterial, viral and fungal rashes, and skin infestations.

4. Psoriasis.
5. Melanoma, Basal cell carcinoma (BCC), Squamous cell carcinoma (SCC) and other skin tumours.
6. Urticaria and Angioedema.

*Year 5 (in addition to Year 4)*

7. Vasculitis and Systemic Lupus Erythematosus.
8. Pigmentation disorders.
9. Bullous pemphigoid and other autoimmune blistering disorders.
10. Drug eruptions, Steven-Johnson syndrome and toxic epidermal necrolysis.
11. Skin diseases in Aboriginal and Torres Strait Islander people.

ADDITIONAL PRESENTATION-SPECIFIC LEARNING OBJECTIVES: (*See also sections of INTERPRETATION OF CLINICAL INFORMATION and PROCEDURAL SKILLS in this document.*)

Students should be able to:

*Year 5*

2	Discuss presentation of skin rashes that are associated with systemic illness.	Theme 1: Scientific Foundations of Medicine	1.3
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## B. SKILLS

None specified for this topic.

## PAIN

### A. KNOWLEDGE (Treatment and Management)

**PRESENTATION-SPECIFIC LEARNING OBJECTIVES:** Students should be able to:

*Year 4*

1	Describe the classification of pain – acute versus chronic, cancer versus non-cancer, nociceptive (superficial, deep, visceral) versus neuropathic.	Theme 1: Scientific Foundations of Medicine	1.3
2	Describe factors influencing the perception of pain.	Theme 1: Scientific Foundations of Medicine	1.3
3	Discuss the pathophysiology of pain.	Theme 1: Scientific Foundations of Medicine	1.3
4	Discuss the non-pharmacological and pharmacological treatments for pain.	Theme 1: Scientific Foundations of Medicine	1.3
5	Describe the mechanisms of action of common pharmacological medications – simple analgesics, opioids, other analgesics e.g. antidepressants, anticonvulsants, ketamine, local anaesthetics.	Theme 1: Scientific Foundations of Medicine	1.3
6	Discuss the analgesic “ladder”/stepwise approach to acute pain management.	Theme 1: Scientific Foundations of Medicine	1.3

*Year 5 (in addition to Year 4)*

7	Discuss the different analgesic medications effectiveness for different types of pain.	Theme 1: Scientific Foundations of Medicine	1.3
8	Discuss opioid equivalences.	Theme 1: Scientific Foundations of Medicine	1.3
9	Discuss the multidisciplinary approach to managing chronic pain.	Theme 1: Scientific Foundations of Medicine	1.3

**B. SKILLS** (May be encountered in another clinical placement):

*Year 4*

1	Perform a pain assessment (history and examination) including assessment of severity and type of pain	Theme 2: Patient & Doctor: Clinical Practice	2.2/ 2.3
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*Year 5 (in addition to Year 4)*

2	Be involved in guiding a patient with chronic pain in setting goals for pain control and function	Theme 2: Patient & Doctor: Clinical Practice	2.10
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## SECTION 4: COMMON AND/OR IMPORTANT CONDITIONS

The following common and/or important conditions are important for students to develop knowledge and skills in relation to diagnosis, investigation, treatment and management.

1. Acute myocardial infarction
2. Pericarditis and pericardial effusion
3. Cardiac valve disease including infective endocarditis
4. Acute kidney failure and chronic kidney disease
5. Common / important cancers
 

<b>Year 4</b> Lung cancer Colorectal cancer Prostate cancer Breast cancer Melanoma Pancreas Kidney and urinary tract cancer Metastatic cancer	<b>Year 5</b> Haematological malignancies including aplastic anaemia, leukaemia and other myeloproliferative neoplasms, multiple myeloma Lymphoma Thyroid Brain malignancies
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6. Cancer treatment related toxicities and oncological emergencies **Year 5**
7. Lung conditions
 

<b>Year 4</b> COPD Asthma Obstructive sleep apnoea Pneumonia Interstitial lung diseases Pneumothorax	<b>Year 5</b> Sarcoidosis Tuberculosis Bronchiectasis Cystic fibrosis Occupational and environmental
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8. Gastrointestinal conditions
 

<b>Year 4</b> GORD Peptic ulcer disease and <i>H. Pylori</i> Irritable Bowel Syndrome Inflammatory Bowel Disease Coeliac Disease Pancreatitis	
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9. Endocrine and metabolic disorders
 

<b>Year 4</b> Diabetes mellitus Type 1&2 PCOS Hypothalamic- pituitary axis disorders Secondary hypertension Metabolic syndrome Gout	<b>Year 5</b> Addison's disease Diabetes insipidus Parathyroidism Pseudogout Haemachromatosis
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10. Dyslipidaemias
11. Heart failure
12. HIV **Year 5**
13. Hypertension **Year 4** and pulmonary hypertension **Year 5**
14. Liver diseases
 

<b>Year 4</b>	<b>Year 5</b>
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- |                                   |  |
|-----------------------------------|--|
| Viral hepatitis                   | Genetic liver diseases                 |
| Alcoholic liver disease           | Drug-induced liver disease             |
| Non-alcoholic fatty liver disease | Immune, autoimmune liver diseases      |
| Cholestatic syndrome              | Liver involvement in systemic diseases |
15. Major depression
  16. Nosocomial infections (Health care associated infections) *Year 5*
  17. Obesity *Year 5*
  18. Rheumatological problems (see common symptoms/signs – joint pain)
 

<i>Year 4</i>	<i>Year 5</i>
Spondyloarthritides	Vasculitis
Polymyalgia rheumatic and giant cell arteritis	Fibromyalgia
	Myopathies such as dermatomyositis
  19. Substance use & smoking cessation
 

<i>Year 4</i>
Smoking
Alcohol
Cannabis
Other Illicit drugs
  20. Coagulation and thromboembolic disorders
  21. Neurological disorders
 

<i>Year 4</i>	<i>Year 5</i>
Stroke	Other CNS infections
Parkinson disease	Movement disorders
Multiple sclerosis	Epilepsy
Peripheral neuropathies	Motor neuron disease
Nerve root and cauda equina compressions	Other cranial nerve disorders
Trigeminal neuralgia, Bell's palsy	Guillain-Barre Syndrome and chronic inflammatory demyelinating polyneuropathy
Migraines and headache disorders	
Meningitis	
  22. Blood transfusion reactions *Year 5*
  23. Genetic conditions – Down Syndrome

## SPECIFIC LEARNING OBJECTIVES

For each condition the student should be able to:

1	Describe the underlying pathophysiology of the condition.	Theme 1: Scientific Foundations of Medicine	1.1
2	Take an appropriate history and conduct a physical examination.	Theme 2: Patient & Doctor: Clinical Practice	2.2/ 2.3
3	Find and apply preventive strategies (see also Prevention).	Theme 1: Scientific Foundations of Medicine	1.3
4	Demonstrate appropriate diagnostic decision making especially regarding investigations and management.	Theme 1: Scientific Foundations of Medicine	1.2
5	Interpret the relevant clinical diagnostic tests and procedures (see also Interpretation of Clinical Information).	Theme 2: Patient & Doctor: Clinical Practice	2.4



6	Perform appropriate procedural skills relevant to the conditions (see specific list in PROCEDURAL SKILLS section).	Theme 2: Patient & Doctor: Clinical Practice	2.6
7	Assess improvement or progression of the condition.	Theme 2: Patient & Doctor: Clinical Practice	2.2
8	Formulate initial and longer term therapeutic plans that are evidence based and include non-pharmacological and pharmacological treatments.	Theme 2: Patient & Doctor: Clinical Practice	2.7/ 2.10
9	Educate the patient about aspects of his/her disease respectfully, using language the patient understands.	Theme 2: Patient & Doctor: Clinical Practice	2.9

### ADDITIONAL DISEASE-SPECIFIC LEARNING OBJECTIVES

(Please note there are further details for some conditions in the preceding sections.)

#### ACUTE MYOCARDIAL INFARCTION

**A. KNOWLEDGE:** Students should be able to:

*Year 5*

1	Describe the protocol for thrombolysis	Theme 1: Scientific Foundations of Medicine	1.3
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**B. SKILLS:** Students should be able to:

*Year 5*

1	Perform ALS (especially if on rural placement)	Theme 2: Patient & Doctor: Clinical Practice	2.6
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#### ACUTE KIDNEY INJURY (AKI) AND CHRONIC KIDNEY DISEASE (CKD)

**A. KNOWLEDGE:** Students should be able to:

*Year 4*

1	Describe the classification of AKI - prerenal, post renal and intrinsic renal – and discuss the differential diagnoses including: i. Acute tubular necrosis. ii. Acute glomerulonephritis. iii. Acute interstitial nephritis.	Theme 1: Scientific Foundations of Medicine	1.3
2	Discuss glomerular diseases and recognise the spectrum of nephritic and nephrotic syndrome presentations.	Theme 1: Scientific Foundations of Medicine	1.3
3	Discuss polycystic diseases of the kidney.	Theme 1: Scientific Foundations of Medicine	1.3
4	Identify risk factors and be able to stage CKD.	Theme 1: Scientific Foundations of Medicine	1.3

*Year 5 (in addition to Year 4)*

5	Discuss end stage renal disease, dialysis and transplantation in the treatment of renal disease	Theme 1: Scientific Foundations of Medicine	1.3
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## B. SKILLS

None specified for this topic.

## DIABETES MELLITUS

### A. KNOWLEDGE: Students should be able to:

*Year 4*

1	Recognise the signs and symptoms associated with hypoglycaemia or hyperglycaemia.	Theme 1: Scientific Foundations of Medicine	1.3
2	Describe the different types of diabetes including gestational diabetes.	Theme 1: Scientific Foundations of Medicine	1.3
3	Recognise the acute complications of diabetes: hypoglycaemia, diabetic ketoacidosis / hyperosmolar hyperglycaemic state.	Theme 1: Scientific Foundations of Medicine	1.3
4	Discuss the long term complications of diabetes: macrovascular and microvascular complications and diabetic foot.	Theme 1: Scientific Foundations of Medicine	1.3

### B. SKILLS: Students should be able to:

*Year 4*

1	Undertake a complete diabetic foot examination	Theme 2: Patient & Doctor: Clinical Practice	2.6
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*Year 5 (in addition to Year 4)*

2	Explain the implementation and be involved in the development of a comprehensive and multidisciplinary diabetic management plan.	Theme 2: Patient & Doctor: Clinical Practice	2.7
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## HEART FAILURE

### A. KNOWLEDGE: Students should be able to:

*Year 4*

1	Describe multidisciplinary HF management models of care and the evidence of their impact on patient outcomes.	Theme 1: Scientific Foundations of Medicine	1.1
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## B. SKILLS

None specified for this topic.

### HIV INFECTION

#### A. KNOWLEDGE: Students should be able to:

*Year 5*

1	Describe the various clinical manifestations of HIV infection across the different organ systems especially those due to opportunistic infections.	Theme 1: Scientific Foundations of Medicine	1.3
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## B. SKILLS

None specified for this topic.

### MAJOR DEPRESSION

#### A. KNOWLEDGE: Students should be able to:

*Year 4*

1	Differentiate major depression from other depressive conditions and psychiatric disorders.	Theme 1: Scientific Foundations of Medicine	1.3
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*Year 5 (in addition to Year 4)*

2	Recognise the differing presentations and barriers to communicating the diagnosis in Aboriginal and Torres Strait Islander people and people from culturally and linguistically diverse cultures (CALD).	Theme 3: Health & Illness in Society	3.4
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#### B. SKILLS: Students should be able to:

*Year 4*

1	Perform depression screening tests using validated screening tools such as K10 and Geriatric depression scale (GDS).	Theme 2: Patient & Doctor: Clinical Practice	2.4
2	Perform an assessment for the presence of suicidal ideation.	Theme 2: Patient & Doctor: Clinical Practice	2.4

*Year 5 (in addition to Year 4)*

3	Perform assessments with culturally appropriate tools e.g. Kimberley Indigenous Cognitive assessment – depression scale (KICA-Dep)	Theme 3: Health & Illness in Society	3.4
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## ENDOCRINE DISORDERS

### A. KNOWLEDGE: Students should be able to:

#### *Year 4*

1	Recognise the symptoms and signs of hyperthyroidism and hypothyroidism.	Theme 1: Scientific Foundations of Medicine	1.2
2	Recognise the symptoms and signs of hypercalcaemia and hypocalcaemia.	Theme 1: Scientific Foundations of Medicine	1.2
3	Discuss the differential diagnosis for hypercalcaemia.	Theme 1: Scientific Foundations of Medicine	1.2
4	Recognise symptoms and signs of Addison's disease.	Theme 1: Scientific Foundations of Medicine	1.2
5	Outline endocrine conditions affecting the Hypothalamic-Pituitary Axis (Cushing's, acromegaly, panhypopituitarism, prolactinoma).	Theme 1: Scientific Foundations of Medicine	1.2

#### *Year 5 (in addition to Year 4)*

6	Discuss the causes and treatment of hyperthyroidism and hypothyroidism.	Theme 1: Scientific Foundations of Medicine	1.2
7	Discuss treatment of Addison's disease and Addisonian crisis (diagnosis, treatment, prevention).	Theme 1: Scientific Foundations of Medicine	1.2
8	Discuss obesity: causes and consequences, prevention and treatment options: medical, surgical, societal.	Theme 1: Scientific Foundations of Medicine	1.2

### A. SKILLS

None specified for this topic.

## BIBLIOGRAPHY

### Books

Silverman J, Kurtz S, Draper J. Skills for Communicating with Patients. 3rd ed. London: Radcliffe Medical Press; 2013.

Epstein O, Perkin GD, Cookson J, de Bono D. Clinical Examination. 4th ed. Edinburgh; New York: Mosby; 2008.

Talley NJ, O'Connor S. Clinical Examination: A Systematic Guide to Physical Diagnosis Volume 1 & 2. 8th ed. Churchill Livingstone: Elsevier; 2018.

Thomas J, Monaghan T, editors. Oxford Handbook of Clinical Examination and Practical Skills. 2nd ed. Oxford: Oxford University Press; 2014.

Ralston SH, Penman I, Strachan MWJ, Hobson R, editors Davidson's Principles and Practice of Medicine. 23rd ed. Edinburgh; New York: Churchill Livingstone Elsevier; 2018.

Kumar P, Clark ML. Kumar and Clark's Clinical Medicine. 9th ed. Edinburgh, New York: Elsevier; (2017).

Hampton, JR, Hampton J. The ECG Made Easy. 9th ed. Edinburgh: Churchill Livingstone Elsevier; 2019.

Gunderman RB. Essential Radiology: Clinical Presentation, Pathophysiology, Imaging. 3rd ed. New York: Thieme; 2014.

Ropper AH, Samuels MA, Klein JP. Adams and Victor's Principles of Neurology. 11th ed. New York: McGraw-Hill; 2019.

Kellerman G. Abnormal laboratory results. 3rd ed. North Ryde, NSW: McGraw-Hill; 2011.

Fillit HM, Rockwood K, Young J, editors. Brocklehurst's Textbook of Geriatric Medicine and Gerontology. 8th ed. Philadelphia, Pennsylvania: Elsevier; 2016.

Cherny NI, Fallon MT, Kaasa S, Portenoy RK, Currow DC, editors. Oxford Textbook of Palliative medicine. 5th ed. Oxford, England: Oxford University Press; 2015.

## Websites

UpToDate Inc, c2019. Available from:

<https://www.uptodate.com/home>

Clinical decision support resource. Management has a US perspective. Access via Curtin University library.

Therapeutic Guidelines Australia Pty Ltd, c2019. Available from:

<https://www.tg.org.au/>

Also available online as eTG. Access via Curtin University library.

- Analgesic
- Antibiotic
- Bone and Metabolism
- Cardiovascular
- Dermatology
- Diabetes
- Gastrointestinal
- Neurology
- Oral and dental
- Palliative care
- Psychotropic
- Respiratory
- Rheumatology
- Sexual and reproductive health
- Toxicology and Wilderness
- Ulcer and Wound Management
- Management Guidelines: Development Disability

Government of Western Australia. Diagnostic Imaging Pathways c2020. Available from:

<http://www.imagingpathways.health.wa.gov.au/>

Australian Government. National Health and Medical Research Council. Australian Clinical Practice Guidelines, c2019. Available from:

<https://www.clinicalguidelines.gov.au/>

Government of Western Australia. Department of Health. Silver Book – STI/BBV Guidelines, c2015. Available from:

<http://ww2.health.wa.gov.au/Silver-book>

NPS MedicineWise. Choosing Wisely Australia, c2019. Available from:

<http://www.choosingwisely.org.au/recommendations>

Recommendations on tests, treatments and procedures for healthcare providers and consumers to question.

NPS MedicineWise. Making Australia more medicinewise through digital health and data insights, health professional education and reliable health information for consumers, c2019. Available from:

<https://www.nps.org.au/>

Publications: Australian Prescriber, RADAR, MedicineInsight.

Australian Doctor Group. AusDocPLUS, c2019. Available from:

<http://www.australiandoctor.com.au>

How to Treat section.

Palliative Care Curriculum for Undergraduates (PCC4U) funded by the Australian Government Department of Health, c2019. Available from:

<http://www.pcc4u.org/>

CareSearch. Palliative care knowledge network, c2019. Available from:

[www.caresearch.com.au](http://www.caresearch.com.au)

CareSearch. End-of-Life Essentials funded by the Australian Government Department of Health, c2019. Available from:

<https://www.caresearch.com.au/caresearch/tabid/3866/Default.aspx>

## **POPULATIONS**

### **Aboriginal and Torres Strait Islander Australians**

Kimberley Aboriginal Medical Services Ltd. Kimberley Aboriginal Health Planning Forum. Clinical protocols and guidelines, c2018. Available from:

<http://kahpf.org.au/clinical-protocols>

Edith Cowan University. Australian Indigenous HealthInfoNet. Available from:

<https://healthinfo.net.ecu.edu.au/>

### **CALD**

Government of Western Australia. Department of Health. Multicultural resources for health professionals, c2019. Available from:

[http://ww2.health.wa.gov.au/Articles/J\\_M/Multicultural-resources-for-health-professionals](http://ww2.health.wa.gov.au/Articles/J_M/Multicultural-resources-for-health-professionals)

Mental Health Australia, Federation of Ethnic Communities' Council of Australia (FECCA) and the National Ethnic Disability Alliance (NEDA) partnership funded by the Australian Government Department of Health. Embrace multicultural mental health, c2019. Available from:

<https://embracementalhealth.org.au/>

Mental Health In Multicultural Australia (MHIMA). Cultural Awareness Tool. Understanding cultural diversity in mental health, c2002. Available from:

[http://www.mhima.org.au/literature\\_73860/CAT](http://www.mhima.org.au/literature_73860/CAT)

## **Disability**

Therapeutic Guidelines Ltd. 2012. Management guidelines: developmental disability [Internet]. Version 3. Melbourne: Therapeutic Guidelines Limited; 2012. Available from:

[https://tgldcdp.tg.org.au/fulltext/quicklinks/management\\_guideline.pdf](https://tgldcdp.tg.org.au/fulltext/quicklinks/management_guideline.pdf)

## **Sexuality and gender diversity**

American Medical Association. Creating an LGBTQ-friendly practice; c2019. Available from:

<https://www.ama-assn.org/delivering-care/physician-resources-lgbtq-inclusive-practice>