

**Training Programme (essential elements)**  
**Clinical Practical Year (CPY)**  
**at Medical University of Vienna, Austria**

CPY-Tertial C

**Dermatology and Venereology**

Valid from academic year 2015/16

Responsible for the content

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This training programme applies to the subject of "Dermatology and Venereology" within CPY tertial C "Electives". The training programmes for the elective subjects in CPY tertial C are each designed for a duration of 8 weeks. If the subject in CPY tertial C is being completed over a period of 16 weeks, the specified content shall be treated in greater depth.

### 3. Learning objectives (competences)

The following skills must be acquired or deepened in the subject of Dermatology and Venereology during the CPY.

#### 3.1 Competences to be achieved (mandatory)

##### A) History taking

1. Treating patients with respect
2. Taking a medical history, including taking history from third parties to assess psychosocial, economic and hygiene situation, including risk factors for fall
3. Lifestyle history
4. Family history
5. Medication history, taking into account side effects and interactions with other medications
6. Identifying hazardous behaviour and dangerous lifestyles

##### B) Performance of examination techniques

7. Explaining to patients the need to get undressed in order to assess skin status
8. Assessing and documenting in writing the skin status (i.e. identifying and naming primary and secondary efflorescences, identifying and naming standard variations on the skin)
9. Identifying and classifying various pigment lesions on the skin
10. Assessing and documenting in writing the mucous membranes near the skin
11. Assessing vein status
12. Clinical examination and documentation of the status of the integumentary appendages
13. Photographic documentation of suspicious skin lesions

##### C) Performance of routine skills and procedures

14. Blood pressure measurement
15. Venepuncture/drawing blood
16. Positioning a permanent peripheral venous cannula
17. Administration of subcutaneous, intramuscular and intravenous injections
18. Urinary catheterisation
19. Taking blood cultures
20. Interpretation of blood chemistry findings
21. Interpretation of bacterial and fungal culture findings
22. Interpretation of antibiograms
23. Interpretation of urine culture findings
24. Issuing prescriptions (including prescriptions for addictive drugs)
25. Performance and interpretation of dermatoscopic investigations of the skin
26. Taking material from skin/mucous membrane lesions for bacterial/fungal cultures
27. Taking material from skin/mucous membrane lesions for microscopic examination for bacteria/fungi

- 28. Reading and interpreting an epicutaneous test
- 29. Reading and interpreting a prick test
- D) Therapeutic measures
  - 30. Application of dressings to acute and chronic skin wounds
  - 31. Cleaning and wound care for skin ulcerations
  - 32. Application of dressings for the treatment of inflammatory skin conditions
  - 33. Checking drug therapy for drug interactions
  - 34. Identification of drug side effects and their management
  - 35. Treatment of psoriasis
- E) Communication with patient/team
  - 36. Providing information to patients and relatives in an ethically correct and professional manner in compliance with legal requirements and ensuring that the patient has understood the information
  - 37. Discussing diagnoses/prognoses with patients
  - 38. Participating in meetings with relatives
  - 39. Checking patient compliance
  - 40. Telephoning patients and third parties in an ethically correct and professional manner (in accordance with legal requirements)
  - 41. Explaining issues to patients in relation to obtaining informed consent
  - 42. Case presentation to team: summarising of history of the condition, diagnostics, treatment plan and current problems/issues
  - 43. Clarifying with nursing staff measures and calling criteria concerning patients
  - 44. Identifying and formulating ethically problematic situations
  - 45. Management and communication with patients in difficult situations (contradictory findings, contradictory therapeutic statements, extending/shortening stay in hospital)
  - 46. Involvement in discharge management
- F) Documentation
  - 47. Requesting information in hospital information system
  - 48. Documentation in patient files/report of distinct medical parameters
  - 49. Diagnostic coding
  - 50. Writing letters for transfer or discharge of patient
  - 51. Filling in a death certificate and/or preparing an autopsy request (simulated situation)
  - 52. Compliance with legal requirements (Austrian Physicians' Act, Hospitals Act, Insurance Act, reporting of notifiable diseases)
  - 53. Working with local/national and international guidelines and protocols

### 3.2 Optional competences

In addition to the competences that are mandatory to achieve, further competences from the following list may also be acquired.

1. Performance and interpretation of microscopic investigations of skin material for bacteria/fungi
2. Performance and interpretation of gram staining of material from mucous membrane swabs
3. Performance of diagnostic skin punches and shave biopsies
4. Removal of seborrheic warts with a sharp spoon
5. Treatment of standard warts with liquid nitrogen
6. Application of pressure dressings and elastic bandages
7. Performing a PRICK allergy test

## 4. Information on verification of performance, on-going assessments

### 4.1 The following aspects can be assessed in the Mini-CEX:

(Mini-Clinical Evaluation Exercise - a 10-20 minute direct observation assessment or "snapshot" of a trainee-patient interaction)

1. Taking a medical history
2. Assessing the skin and mucous membrane status
3. Naming the skin and mucous membrane efflorescences
4. Planning the diagnostic process
5. Planning the therapeutic process
6. Clarification of diagnostic and therapeutic measures
7. Case presentation based on the medical files

This list can be expanded accordingly.

### 4.2 The following skills can be assessed in the DOPS (Direct Observation of Procedural Skills):

1. Blood pressure measurement
2. Venepuncture/drawing blood
3. Positioning a peripheral permanent venous cannula
4. Administration of subcutaneous, intramuscular and intravenous injections
5. Urinary catheterisation
6. Taking blood cultures
7. Interpretation of blood chemistry findings
8. Interpretation of bacterial and fungal culture findings
9. Interpretation of antibiograms
10. Interpretation of urine culture findings
11. Issuing prescriptions (including prescriptions for addictive drugs)

12. Writing letters for transfer or discharge of patient
13. Diagnostic coding

This list can be expanded accordingly.