

National Curriculum (addendum in revision) – Family Medicine (FCFP) - 2023
(As of 24 July 2023)

Addendum (link to be inserted)

From EPA 4 – Children with undifferentiated and more specific problems

Probably needs a bigger list of conditions here. (See PHC STG and IMCI books)

- Breathing difficulties
- Febrile illness
- Cough
- Gastroenteritis
- Abdominal pain
- Seizure
- Rash
- Discharging ear
- Hearing loss
- Perforated ear drum
- Sleep apnoea
- Upper respiratory tract infection
- Lower respiratory tract infection
- Cerebral Palsy
- Refractory errors
- Discharging eye
- Red eye
- Lid disease (blepharitis, chalazion, stye, ectropion)
- Common skin conditions: eczema, seborrhoeic dermatitis, nappy rash, tinea, Scabies, Impetigo, Viral exanthem, Roseola, chickenpox rash, Shingles, Pityriasis rosea, Pityriasis versicolor, Purpuric rash etc.
- Behavioural and (ADHD, ASD, ODD, CD, OCD, Generalized anxiety disorder)
- Learning disorders in children, (Dyslexia Dyscalculia, Dysgraphia) Congenital disorders (Club foot, Flat foot, In toe walking, Developmental Dysplasia of the Hip in babies and older children, heart disease, neural tube defect, Down syndrome)
- Nutritional disorders (Malnutrition, Obesity, vitamins and minerals deficiency)
- Developmental disorders

From EPA 6 – Anaesthesia in a district hospital

Knowledge and Skills:

- Basic sciences, physics and clinical measurement (SI units, humidification, oximetry, measurement of volumes flows pressures, capnography, electrical safety, temperature, fire and explosions)
- Pharmacology of anaesthetic agents
- Monitoring equipment and clinical measurement
- Equipment and apparatus
 - Airway devices (laryngoscopes, endotracheal tubes, tracheostomy tubes, face masks, airways)
 - Gas supply in bulk and cylinders
 - Anaesthesia delivery system, including pressure valves and regulators
 - Vaporisers, breathing systems
- Monitoring
 - Anaesthesia record keeping
 - Additional monitoring when appropriate (including blood loss, blood sugar, temperature, blood gas, coagulation, CVP)

- Minimum monitoring standards
- Clinical Management
 - Day surgery and operating theatre suite environment
 - Professional practice
 - Preoperative assessment – including airway and ASA health status classification
 - Conducting anaesthesia
 - Postoperative care
- Principles of Obstetrics
 - Relevant anatomy and physiological changes in pregnancy
 - Pharmacology and uterotonic drugs
 - Antenatal care relevant to anaesthesia
 - Maternal monitoring
 - Caesarian section indications and levels of urgency
- Recognition of high-risk obstetric patients, immediate management, and referral
 - ASA classification
 - Morbid obesity, difficult airway, thromboembolic disease, bleeding or coagulation disorders, hypertension, sepsis, respiratory disease, diabetes, thyroid disease, renal disease, neuromuscular disease and intracranial pathology.
 - Preeclampsia and its complications
 - Obstetric haemorrhage
 - Septic miscarriage
 - Molar pregnancy
- Neonatal considerations and resuscitation

- Provide safe anaesthesia care and pain management for uncomplicated patients undergoing non-major surgery
- ECG recording and interpretation
- Arterial blood gas collection and interpretation
- Venous access
- Administer oxygen
- Maintenance of an adequate airway (control airway with BVM)
- Rapid sequence induction
- Inhalation induction
- Intravenous induction
- Ketamine anaesthesia
- Intubation
- Ventilation
- Set airflows (Magill, Circle, T-piece)
- Reverse muscle relaxation (mix drugs)
- Advanced Cardiac Life Support
- Lumbar puncture
- Aseptic techniques
- Central venous cannulation
- Sterilise equipment

Be familiar with clinical protocols (drills) in the delivery of safe anaesthesia care, and be able to respond accordingly for crisis management, including:

- Airway assessment
- Checking the anaesthesia delivery system (Boyle's machine)
- Pre-operative equipment check (general theatre equipment e.g. table, suction; resuscitation equipment; intubation equipment)
- Pre-operative essential drugs preparation
- Pre-operative patient preparation
- Monitor a patient during anaesthesia
- Monitor and manage a patient in the recovery room

- Identification and management of the following problems, which are commonly acute and may be life-threatening:
 - Inadequate airway; failed intubation, obstructed airway, oesophageal intubation, endobronchial intubation, and
 - unplanned extubation
 - Emergency management of a pneumothorax
 - Laryngospasm
 - Bronchospasm
 - Hypertension
 - Hypotension
 - Arrhythmias
 - Myocardial ischaemia
 - Hypoxia
 - Hypocarbica
 - Hypercarbia
 - Hypoventilation
 - Hyperventilation
 - Hypothermia
 - Hyperthermia
 - Malignant hyperthermia
 - Anaphylaxis
 - Residual neuromuscular blockade
 - Inadequate neuraxial blockade
 - Seizures
 - Gas embolism
 - High ventilator peak inspiratory pressures
 - Pulmonary aspiration

Managing the obstetric patient and neonate peri-operatively

- Resuscitation in obstetric haemorrhage
- Resuscitation in obstetric patient with preeclampsia
- Advanced cardiac life support in the obstetric patient
- Resuscitation of neonate and meconium or pulmonary aspiration

From EPA 7 – Anaesthesia for minor procedures

Knowledge and Skills: (See details in addendum to curriculum)

- Basic sciences
- Monitoring equipment and clinical measurement
- Physics and clinical measurement (SI units, humidification, oximetry, measurement of volumes flows pressures, capnography, electrical safety, temperature, fire and explosions)
- Pharmacology: Local anaesthetics pharmacology, properties, mechanism and determinants of action, additives, dosage, potential side-effects and local & systemic toxicity. Understanding the use of vasoconstrictors, adjuvants and other adjunct medications in local anaesthesia
- Anatomy: Knowledge of targeted area for the procedure and anatomical orientation of nerves, blood vessels and other structures in the region
- Utilizing ultrasound (POCUS) and nerve stimulators for selected blocks
- Techniques and approaches:
 - Various local anaesthetic techniques, including infiltration anaesthesia, nerve blocks, and other regional anaesthesia approaches.
 - Understanding the indications, contraindications, and specific considerations for each technique.
 - Knowledge of the different needle types, lengths, and gauges used for specific procedures
 - Infection control and sterile technique
- Equipment and apparatus
 - Airway devices (laryngoscopes, endotracheal tubes, tracheostomy tubes, face masks, laryngeal masks, airways)

- Gas supply in bulk and cylinders
- Anaesthesia delivery system, including pressure valves and regulators
- Vaporisers, breathing systems
- Monitoring
 - Anaesthesia record keeping
 - Additional monitoring when appropriate (including blood loss, blood sugar, temperature, blood gas, coagulation, CVP)
 - Minimum monitoring standards
- Clinical Management
 - General practice (OPD procedural area), ward, day surgery or emergency center setting
 - Preoperative Assessment: ASA health status classification, patient evaluation and selection for suitability for conscious sedation, local anaesthesia or regional blocks
 - Conducting Anaesthesia
 - Postprocedural care
 - Professional practice
- Management of complications
 - Knowledge of potential complications and adverse events associated with anaesthetic procedure
 - Understanding the signs, symptoms and appropriate management of complications (systemic toxicity, nerve injury, haematoma, infection or allergic reactions)
- Pain management
 - Understanding of pain assessment and management principles
 - Knowledge of the different analgesic options and their appropriate use in conjunction with local anaesthesia or regional blocks
- Principles of Obstetrics
 - Relevant anatomy and physiological changes in pregnancy
 - Pharmacology and uterotonic drugs
 - Antenatal care relevant to anaesthesia
 - Maternal monitoring
 - Caesarian section indications and levels of urgency
 - Regional techniques for the obstetric patient
- Recognition of high-risk obstetric patients, immediate management, and referral
 - ASA classification
 - Morbid obesity, difficult airway, thromboembolic disease, bleeding or coagulation disorders, hypertension, sepsis, respiratory disease, diabetes, thyroid disease, renal disease, neuromuscular disease and intracranial pathology
 - Preeclampsia and its complications
 - Obstetric haemorrhage
 - Septic miscarriage
 - Molar pregnancy
- Neonatal considerations and resuscitation

Skills:

- Provide safe anaesthesia care and pain management for uncomplicated patients undergoing minor procedures
- POCUS or nerve stimulator guided technique
- ECG recording and interpretation
- Arterial blood gas collection and interpretation
- Venous access
- Administer oxygen
- Maintenance of an adequate airway (control airway with BVM)
- Rapid sequence induction
- Inhalation induction
- Intravenous induction
- Ketamine anaesthesia
- Intubation

- Ventilation
- Set airflows (Magill, Circle, T-piece)
- Reverse muscle relaxation (mix drugs)
- Advanced Cardiac Life Support
- Lumbar puncture
- Aseptic techniques
- Central venous cannulation
- Sterilise equipment

Be familiar with clinical protocols (drills) in the delivery of safe conscious sedation, and be able to respond accordingly for crisis management, including:

- Airway assessment
- Checking the anaesthesia delivery systems
- Pre-procedural equipment check (general theatre equipment e.g. table, suction; resuscitation equipment; intubation equipment)
- Pre-procedural essential drugs preparation
- Pre-operative patient preparation
- Monitor a patient during sedation
- Monitor and manage a patient post procedure
- Identification and management of the following problems, which are commonly acute and may be life-threatening:
 - Inadequate and loss of airway; failed intubation, obstructed airway, oesophageal intubation, endobronchial intubation, and Emergency management of a pneumothorax
 - Laryngospasm, bronchospasm
 - Hypertension / Hypotension
 - Arrhythmias
 - Myocardial ischaemia
 - Hypoxia
 - Hypocarbia / Hypercarbia
 - Hypoventilation / Hyperventilation
 - Hypothermia / Hyperthermia
 - Malignant hyperthermia
 - Anaphylaxis
 - Inadequate neuraxial blockade
 - Seizures
 - Gas embolism
 - High ventilator peak inspiratory pressures
 - Pulmonary aspiration

Managing the obstetric patient and neonate peri-operatively

- Resuscitation in obstetric haemorrhage
- Resuscitation in obstetric patient with preeclampsia
- Advanced cardiac life support in the obstetric patient

Resuscitation of neonate and meconium or pulmonary aspiration

From EPA 8 – Adults with chronic conditions

Chronic liver disease

Chronic renal disease

Thyroid disease- hyper, hypo

Anaemia

Asthma

Occupational lung disease

Chronic obstructive pulmonary disease (COPD)

Autoimmune conditions- SLE, Scleroderma
Arthritis – rheumatoid, osteoarthritis, crystal-related, auto-immune arthritis
Fibromyalgia
Cardiac failure
Diabetes Mellitus
Dyslipidaemia
Hypertension
Ischaemic heart disease
Obesity
Cerebrovascular accidents and intracranial bleeds
Dementia and delirium
Epilepsy
Headaches – migraine, tension, cluster, analgesic rebound headaches
Parkinson’s disease
Common cancers – lung cancer, gastric, colon, thyroid, leukaemia, lymphoma
Common male and female sexual disorders
Inflammatory bowel disease- Ulcerative colitis and Crohn's disease
Irritable bowel syndrome
Peptic ulcer disease
Chronic surgical conditions, e.g. pancreatitis, venous stasis ulcers, peripheral vascular ischaemia

From EPA 9 – Undifferentiated problems

Abdominal pain
Abnormal sputum
Abnormal vaginal bleeding
Amenorrhoea
Arm pain or symptom
Back pain
Dyspnoea
Chest pain
Constipation
Cough
Diarrhoea
Dysuria
Ear discharge
Ear pain
Eye discharge
Eye pain
Fever
Foot and toe pain or symptoms
Generalised aches or pains
Generalised rash
Genital/pelvic pain
Hand and finger pain or symptom
Headache
Heartburn
Insomnia
Knee pain or symptom
Leg or thigh pain or symptom
Localised rash
Localised lump(s) or swelling(s)
Loss of appetite

Menstrual pain
Mouth, tongue, lip complaints
Nausea
Neck pain
Penile symptom/complaint
Pruritus
Red eye
Shoulder pain or symptom
Skin rashes
Shoulder pain or symptom
Nasal complaints
Sore throat
Swallowing problem
Sweating
Oedema
Teeth or gum complaint
Urethral discharge
Vaginal discharge
Vaginal symptoms
Vertigo/dizziness
Visual disturbance
Vomiting
Vulval symptom/complaint
Weakness/general tiredness
Weight loss
Wheezing/tight chest

From EPA 10 – Infectious diseases

Common Category 1 and 2 notifiable conditions:

Pre and post exposure prophylaxis of: Cholera, Enteric Fever, Malaria, Meningococcal disease, Rabies, Respiratory disease caused by novel pathogen, Bilharzia, Brucellosis, Hepatitis A-E, TB.

Diagnosis, management and counselling for: Acute Rheumatic Fever, Cholera, Congenital syphilis, congenital rubella syndrome, Enteric Fever, Malaria, Measles, Meningococcal disease, Rabies, Infectious respiratory diseases other than TB, Bilharzia, Brucellosis, Hepatitis A-E, Tick Bite Fever, sexually transmitted infections, soil transmitted helminths

From EPA 11 – Adults with Surgical conditions

For addendum in curriculum:

- Assess, stabilise and refer patients who present with an acute abdomen.
- Manage abdominal conditions like, appendicitis, gallstones, gastrointestinal bleeding like hematemesis, melena and haematochezia, bowel obstruction and perforation, incarcerated hernias, diverticulitis or mesenteric thrombosis
- Manage patients with symptoms of intracranial space occupying lesions pending neurosurgical intervention.
- Manage patients with acute urological obstruction and symptoms of renal colic before a surgical procedure.
- Manage patients with facial symptoms in need of urgent surgical intervention.
- Manage patients presenting with radiculopathy
- Manage a patient with an acute ischaemic limb.
- Manage a patient with a compartment syndrome.

Procedural or log-book skills:

- How to stabilise a patient who presents acutely with a surgical condition that needs referral to the next level of care
- How to arrange referral for a patient who needs an immediate surgical intervention.
- How to insert urinary catheter.
- How to stabilise a patient with increased intracranial pressure, pre-operatively.
- How to insert a nasogastric tube for free drainage in a patient with the acute abdomen.
- How to interpret abdominal and chest X-rays in a patient presenting acutely with a condition that will need surgery.
- Use of point of care ultrasound (POCUS) confirming the diagnosis of conditions requiring urgent surgical treatment.
- How to drain a peritonsillar abscess.
- How to debride and clean an open fracture in theatre

Communicative knowledge

- How to obtain consent from a patient presenting with an acute condition that needs surgery.
- How to involve the family in the management of the acute surgical patient.

Knowledge application

- Able to manage the patient who has generalised abdominal pain and identify the acute abdomen in PHC to district level hospitals.
- Able to manage the patient presenting with epigastric and right hypochondrium pain.
- Able to manage the patient who has difficulty in swallowing.
- Managing patients with constipation and anal symptoms.
- Able to assess and appropriately manage a patient with signs of obstructive jaundice.
- Managing the patient with common upper gastrointestinal symptoms like constipation, nausea, vomiting, heartburn with and without the presence of red flags.
- Managing the patient presenting with a non-fluctuating, cold lump or swelling according to anatomic region.
- Managing patients with a neck lump that might need a surgical intervention.
- Managing the patient presenting with symptoms both venous and arterial insufficiency, timeously
- Able to distinguish and manage patients with urological symptoms not needing surgery from those who need it.
- Able to assess and manage the patient with a swollen limb.
- Managing patients presenting with an abscess in any anatomical region of the body.
- Manage patient presenting with localised joint pain and tendonitis.
- Able to take care of patients complaining of a painful throat or an oral condition in need of a surgical procedure.
- Able to assist patients presenting with ear and nose pain and other symptoms that will require a surgical procedure.
- Managing the patient with facial pain and other conditions of the head that will require a surgical procedure.
- Managing the patient with a red eye.
- How to incise and drain an abscess in the outpatient department of the district hospital, CHC or any other primary health care facility.
- Wide-needle aspiration biopsy lymph node
- How to do a fine needle aspiration of a mass as office procedure
- How to do liver biopsy
- How to do a pleural biopsy
- **Special investigations:**
 - How to interpret an intravenous pyelogram.
 - How to interpret CT-Scan of the brain when a mass lesion is expected.
 - How to interpret Barium swallows
- **Urology**
 - How to insert a suprapubic catheter
 - How to do a male medical circumcision.
 - How to reduce a paraphimosis.
 - How to drain a hydrocele or do a hydrocelectomy.

- Able to do a vasectomy where indicated.
- How to do a penile block
- **Gastrointestinal**
- Incision and drainage of perianal haematoma.
- How to manage haemorrhoids by injection of rubber banding.
- *How to do a proctoscopy*
- How to do sigmoidoscopy
- How to do a gastroscopy
- How to test for Helicobacter pylori infection
- **Ophthalmology**
- How to do a fundoscopy with and without dilatation.
- How to do a slit-lamp examination
- How to measure intraocular pressure with a Schiottz tonometer screening for glaucoma.
- How to instil eye drops to allow fundoscopy or tonometry
- How to assess for visual acuity
- How to test for a squint
- How to drain a chalazion
- **Ear nose and throat**
- How to take a throat swab
- How to dry swab an ear
- How to syringe an ear
- How to assess for hearing loss
- How to do an indirect laryngoscopy
- **Musculoskeletal**
- How to measure shortening of the legs
- How to aspirate and inject the knee joint
- How to inject a carpal tunnel
- How to inject a shoulder and subacromial bursa
- How to inject a trochanteric bursitis
- How to inject De Quervain's tenosynovitis
- How to inject golfers or tennis elbow
- How to excise a ganglion
- How to do a phenol ablation of a great toenail
- How to do subcapsular orchidectomy, anchoring of a torsion of testis
- How to do a cystoscopy
- How to do a prostate biopsy

Dermatological skills

- How to excise a sebaceous cyst and other lumps and bumps
- How to do a skin biopsy
- How to inject keloids
- How to apply a pressure dressing to a lower leg ulcer
- Skin biopsy (punch and shave) or skin scrapes
- How to do cryotherapy or cauterisation

Other

- How to do peritoneal dialysis

Communicative knowledge

- Obtaining informed consent from the patient for elective surgical, urological, ear nose and throat, ophthalmological, dermatological, or orthopaedic procedures
- Obtaining informed consent for surgery in an emergency.

- Communicating a management plan to patients with conditions needing surgery or a theatre procedure.
- In case of a planned surgical procedure, how to communicate it correctly to the receiving consultant surgeon, per telephone and in writing.

Managing adults in the operating theatre undergoing surgery, urology, gynaecology and orthopaedic procedures at district level and CHC's.

- How to incise and drain a breast abscess, perianal abscess, hand abscess or any soft tissue abscess that needs drainage under anaesthesia.
- How to do a lymph node biopsy or excision
- How to do a tonsillectomy or adenoidectomy
- How to do a finger amputation.
- How to do an appendectomy
- How to repair a hernia
- How to do a D&C for miscarriage
- How to do a laparotomy for ectopic pregnancy
- How to do a mini-laparotomy for sterilization

From EPA 13 – Managing patients with Emergencies

Trauma, injury or accidents

- Triaging
- Burns
- Bites and stings including animal bites & human bites; insect bite, scorpion stings and spider bites and snakebites
- Exposure to poisonous substances including overdose of medicines, ingestion of caustic substances, alcohols, pesticides, rodenticides, anticoagulants, carbon monoxide poisoning, heavy metal etc.
- Chemical substance abuse emergencies such as alcohol and illicit drugs
- Eye injuries including chemical burns eyes & blunt/ penetrating foreign bodies.
- Post exposure prophylaxis to occupational and inadvertent (non-occupational)
- Sexual assault including provision of PEP
- Soft tissue injuries including the management of wounds and lacerations, the use of tetanus prophylaxis and the management of sprains and strains.
- Severely ill child
- Polytrauma including the primary and secondary survey
- Trauma related hypovolaemic shock
- Suspected choking / foreign body aspiration in children
- Severe epistaxis
- Fractures
- Penetrating wounds to the chest, abdomen or head
- Thermoregulatory, near drowning, & diving emergencies

Medical emergencies

- Cardiac arrest including post cardiac arrest care.
- Cardiac emergencies
 - Cardiac dysrhythmias in the emergency setting including bradycardia and tachydysrhythmias
 - Acute chest pain, including acute coronary syndromes.
 - Hypertensive emergencies including hypertension in pregnancy in the emergency setting.
 - Acute heart failure and pulmonary oedema
- Respiratory emergencies

- Acute SOB, including asthma and status asthmaticus
- Managing Acute pulmonary embolism
- Angioedema and anaphylaxis
- Severely ill, undifferentiated patient in the emergency room
 - Delirium
 - Coma of unknown origin
 - Management of SEPSIS and SIRS (Systemic Inflammatory Response Syndrome)
- Endocrine emergencies
 - Hypoglycaemia, diabetic ketoacidosis (DKA) and hyperosmolar hyperglycaemic state (HHS)
 - Thyroid emergencies including thyrotoxic crisis / storm & myxoedema coma
- Non-traumatic shock including hypovolaemic, distributive, cardiogenic and obstructive shock
- Renal & electrolyte emergencies including acute kidney injury, & electrolyte abnormalities.
- Haematological disorders in the emergency setting.
- Gastro-intestinal emergencies including Upper gastro-intestinal bleeding, acute abdomen
- Neurological emergencies including status epilepticus and the management of acute stroke
- Infectious emergencies including severe malaria, meningococcal disease, cryptococcal meningitis, pneumocystis pneumonia, septic arthritis and the prevention of rabies

From EPA 18 – Community-based services

The clinician is able to:

- Make a community diagnosis
 - Map geospatial boundaries of a community including their position in relation to health catchment, district and municipal ward areas
 - Carry out a local institutional assessment
 - Conduct a local health status assessment
 - Explore the data (what the community feels, thinks and does about its health needs)
 - Use health indicators to assess the health needs of the community
 - Compare the main health related problems in the area/community/practice you work in with the rest of South Africa
 - Analyse and prioritise the data to determine the health needs of the community
- Develop adaptive action plans to address identified health priorities of the community
 - Identify local resources (potential partner organizations, institutions and individuals).
 - Plan activities to address the most important health related community problems
 - Constitute team(s) appropriate to the priority issue(s) (in consultation with the district management team or interest groups)
 - Facilitate and work with teams
 - Practice coordinated care
 - Incorporate health promotion, disease prevention, treatment support, and health surveillance into primary healthcare interactions with patients, families and communities.
- Create a monitoring framework for COPC activities and plans.
 - Use a capability approach to learning (Evaluate, review, reflect, reprioritize, replan and react).
 - Monitor and respond to team and partner practices and needs
 - Monitor changes of the experiences of individual patients
- Train and develop capacity
 - Build primary health care providers, clinicians and other professionals' health and social knowledge, attitudes and practices in community-based person/family centered primary health
 - Build primary health care teams' knowledge of priority health issues
 - Develop healthcare professionals understanding' of individual, family and community actions, choices and constraints
- Apply the principles and approach of COPC practice
 - Conduct home visits and sufficiently describe family, household and social contexts in which health is maintained, illness develops and is managed

- Facilitate and support the work of ward-based primary health care outreach teams
- Actively develop competencies of healthcare professionals, workers, families and patients through a capability approach to learning.
- Advocate and actively participate in system wide quality improvement activities
- Facilitate and actively participate in care coordination multi-disciplinary team (MDT) ward rounds or meetings
- Ensure cultural competence in community-oriented practice, including. accessing interpretive or culturally focused services

From EPA 19 – Health promotion and Disease prevention

Providing primary preventative services (increase a person's ability to remain free of disease), which includes lifestyle modification and immunisations.

- Implementing and overseeing a childhood immunisation program, including catch up immunisations and HPV vaccine roll out in schools
- Able to identify relevant individuals for vaccinations including Hepatitis B, Influenza and Pneumonia vaccines, COVID 19 vaccines.
- Sexual health – STI & HIV prevention
 - Medical male circumcision
 - Pre-exposure prophylaxis
 - Barrier methods
- Health promotion interventions across key target audiences across the lifecycle including
 - Children <5 years: promoting better health
 - Women of child bearing age: creating awareness of services available
 - Men: promoting a change in gender norms and values by encouraging broader involvement in health issues
 - Youth: addressing risky behaviours and promoting lifestyle practices
 - Older people: focus on community-based programs and support groups to promote regular health and self-management of chronic health conditions – big 5
 - Marginalised populations – focus on specific health needs and improving access by providing sensitive targeted health care
 - Sex workers
 - Transgender and Gender Diverse people
 - Drug users

Providing secondary prevention (early detection of disease or precursors to disease) including cancer screening and increasing access to care

- Evaluation of screening and case finding – understanding how to interpret the use of a screening test / procedure
- Screening and appropriate referral for prostate cancer
- Screening and appropriate referral for cervical cancer
- Screening and appropriate referral for breast cancer
- Screening and appropriate referral for skin cancer
- Screening and appropriate referral for testicular cancer
- Identifying who is eligible for screening and appropriate referral for colorectal cancer
- Identifying healthy patients that may have an increased cardiovascular risk including diagnosing metabolic syndrome and using cardiovascular risk calculators.
- Screening for non-communicable disease such as hypertension and diabetes
- Health promotion including weight management, reduction of salt and increase in exercise.

Providing linkages to rehabilitation of those with established disease (Quaternary prevention)

- Understanding the roles of rehabilitation clinicians including physical therapists, occupational therapists, speech therapists
- Identifying patients with rehabilitation needs for early referral

From EPA 20 – Training and Continuous professional development

- Develop the ability to design and plan educational opportunities for health care professionals focussing on their learning needs, goals and the context of the learning environment.
- Contribute to the development and/or implementation of educational curricula or programs for junior staff, ensuring alignment with educational objectives and competency requirements.
- Deliver teaching sessions, including didactic lectures, case-based discussions, workshops, and bedside teaching to enhance the knowledge and skills of junior healthcare workers.
- Constructive feedback and assessment to junior colleagues, facilitating their professional development and identifying areas for improvement.
- Utilising various assessment methods, such as direct observations, case presentations or written evaluations.
- Professional behaviour, ethical conduct and communication skills as a positive role model for junior colleagues
- Supervision and guidance to junior colleagues ensuring patient safety.
- Facilitate progressive independence in clinical decision-making and patient care.
- Reflective practice to continually evaluate and improve teaching strategies, feedback techniques and mentorship skills.
- Facilitate journal clubs and participate in evidence-based discussions where current research literature is reviewed and critically appraised to help understand the latest evidence and its application to clinical practice.
- Attend educational courses, workshops, conferences or webinars to remain updated on advances, guidelines and emerging trends
- Engage in quality improvement initiatives, collaborating with interdisciplinary teams to identify areas for improvement and implement changes that will enhance patient care and safety.
- Academic rounds with refined communication skills to share knowledge and contribute to the professional community.
- Participate in simulation-based training and skills workshops to refine technical skills, enhance decision-making abilities and practice complex procedures in a controlled environment
- Manage a learner in difficulty