



# Recommended Competencies for HIVMA Clinical Fellows

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This resource is intended to serve as a guide for applicants of the HIVMA Clinical Fellowship in developing their training curricula. This guide may also serve as a reference for institutions developing their own HIV clinical training programs.

## **Primary Goals and Competences:**

**Clinical Expertise:** Fellow should achieve clinical competency in the diagnosis, management and treatment of HIV and its complications, HIV transmission and STD prevention for those living with HIV, and provision of PrEP for those at risk for HIV. Recommended clinical areas of focus to establish a core knowledge base in HIV medicine include:

- a. Understanding of the epidemiology and pathophysiology of HIV.
- b. Identification and evaluation of potential new diagnoses of HIV, including acute HIV infection, and the complications of untreated HIV infection in inpatient/outpatient settings.
- c. Selection of antiretroviral regimens for treatment-naïve and treatment-experienced individuals.
- d. Understanding effective monitoring of treatment, including relevant pharmacologic principles.
- e. Management of pre-exposure and post-exposure prophylaxis.
- f. Longitudinal management of chronic HIV infection and delivery of primary care to patients with a focus on management of long-term complications. These include managing common primary care issues in HIV such as cardiovascular and cancer risk reduction; management of hypertension, diabetes and other metabolic complications; screening, evaluation and management of cognitive impairment.
- g. Diagnosis and basic management or appropriate referrals for common co-occurring conditions among patients with HIV, including hepatitis B and C, substance use/addiction medicine and mental health disorders. (If available, experiences in these specialty clinics is encouraged.)

**Inpatient and Outpatient Care:** Fellow should be capable of working in a diversity of inpatient and outpatient clinical care settings:

- a. **Outpatient Clinical Training:** Fellows should have a longitudinal experience with continuity patients in an outpatient setting that are scheduled for specific days or half-days per week. Fellows may benefit from clinical training in more than one clinic, including community-based clinics, in order to have the opportunity to work with

different patient populations and varying levels of support services. With approval, fellows may elect to spend a portion of their Fellowship at another approved institution, clinic or practice to supplement their clinical experience.

- b. Inpatient Clinical Training: The fellow should rotate with the inpatient infectious diseases or HIV service to gain experience with opportunistic infections or any other disease entities that are common during the advanced stages of HIV infection. This experience can be achieved either by scheduling blocks of time on an inpatient service or by specified days on an inpatient service but should be constructed so that the fellow has enough continuity with patients to see the presentation and management of specific disease processes.

Because resources and opportunities are different for each fellow applicant, there is flexibility to develop weekly or quarterly schedules to best accommodate the training location, but a clear indication of experiences, time allotted and continuity when appropriate is necessary in the curricular plan.

### Sample Weekly Schedule

Monday	Tuesday	Wednesday	Thursday	Friday
HIV/Primary Care Continuity Clinic at Family Medicine Center	HIV Clinic/ Inpatient Consults	HIV Clinic/ Inpatient Consults	Family Medicine Grand Rounds/ HIV Clinic	HIV Clinic at Hospital Outpatient Clinic

### Sample Quarterly Block Schedule

July 2017-October 2017	November 2017-February 2018	March 2018-June 2018
Palliative Care, Anoscopy or other related clinical experience (clinic or rotation) IDWEEK Conference (October)	Viral Hepatitis clinic ID/HIV Inpatient Team (consults or dedicated ward)	AIDS Center at other institution (with approval) ID/HIV Inpatient Team (consults or dedicated ward)

**Professional Development:** Fellows should have opportunities for professional development, education and networking through regular participation in didactic sessions such as local and regional ID and HIV Grand Rounds in addition to regional and national conferences. HIVMA clinical fellows are expected to attend IDWeek. Other conferences that fellows have attended and found informative are highlighted below.

- [CROI](#) (Conference on Retroviruses and Opportunistic Infections)
- [ACTHIV](#) (The American Conference for the Treatment of HIV)

- [International Antiviral Society USA CME Course](#)
- Regional courses like [The New York Course](#) that offer clinical updates on HIV and related conditions
- Local HIV update conferences and symposia
- Weekly Webcast of the HOPE ([HIV Online Provider Education](#))

Suggested online educational resources and learning tools are [listed on our website](#).

**Elective Competencies:** In addition to gaining clinical expertise in the longitudinal care and treatment of patients with HIV, successful fellowship training incorporates a mentored teaching and/or clinical research component to provide fellows with the opportunity to gain experience in different aspects of medicine that contribute to improving prevention and care and that will be important skills to develop to advance their careers in HIV medicine.

- Teaching Experience:** If interested, fellows should have opportunities to educate medical students, residents, advanced practice providers, nurses and other health professionals on HIV prevention, care and treatment. Community education is also encouraged. Examples include a monthly HIV lecture for medical students/residents, presentation of cases for HIV providers in the region, or a lecture series on HIV topics.
- Quality Improvement/Clinical Research:** Fellows should have the opportunity to independently pursue a quality improvement or clinical research projects. Examples from past fellows include:
  - Initiatives to implement routine HIV screening or to improve screening of other STDs in patients with HIV
  - Vaccination delivery/improvement programs in the inpatient and outpatient settings
  - Improving the coordination between pediatric and obstetrical services in the delivery of prenatal care for women infected with HIV