

## Geriatrics and GIM – ST6/PYA ARCP Requirements for Outcome 1

Geriatric Medicine		
1. A satisfactory separate ES report for Geriatrics		
2. Valid ALS		
3. At least 1 audit assessment or QIPAT per training year (at least 4 by now)		
4. Satisfactory no. of consultant SLEs - 1 ACAT, 6 CbD, 6 mini-CEX		
5. At least 4 separate MCRs for Geriatric Medicine (ES not allowed)		
6. Need a valid MSF in either ST5 or ST6		
7. To have attended a research methodology and a teaching course		
8. SCE to have been at least attempted		
9. To have completed a patient survey		
10. At least 1 Teaching Observation		
11. Satisfactory record of teaching attendance		
<b>12. Curriculum coverage</b>		
Common competencies	Confirmation by ES of satisfactory progress	
Core Geriatric Medicine	27-31	Confirmation by ES that evidenced and achieved
	32-39	Confirmation by ES of satisfactory progress
	40-47	Confirmation of ES of satisfactory progress
<b>13. To be aware of the following</b>		
Need a management/leadership course in final 2 years		
"27-31" = CGA to "Planning Transfers of Care, Including Discharge"		
"32-39" - "Delirium" to "Homeostasis", "40-47" – movement disorders to stroke		

General Internal Medicine ST5 + ST6 = GIM Stage 2		
1. A satisfactory separate ES report for each GIM year		
2. Valid ALS		
3. Satisfactory number of WBPA/SLEs – 10 by Stage 2 (minimum 6 ACATs)		
4. At least 4 separate MCRs for GIM in Stage 2 (ES not allowed)		
5. Need a valid MSF in Stage 2		
<b>6. Curriculum coverage – ES ratings at the group level</b>		
Common competencies	Confirmation by ES that at least 8 achieved by Stage 2	
Emergency presentations	ES confirmation that "GIM level" achieved by Stage 1	
Top presentations	ES confirmation that all achieved by Stage 2	
Other important presentations	ES confirmation that "Stage 2 level complete" by Stage 2	
<b>7. Procedures</b>		
DC cardioversion	Need 1 summative DOPS "fully competent"	
Knee aspiration	Need 1 summative DOPS "fully competent"	
Abdo paracentesis	2 summative DOPS, 2 different assessors	
CVC	Skills lab or any DOPS	
IC drain - PTX	Skills lab or any DOPS	
IC drain - effusion	Skills lab or any DOPS	
<b>8. To be aware of the following</b>		
Need to keep a record of patient numbers seen on Acute Take – 1000 by CCT		
Need to keep a record of clinic numbers attended – 186 before CCT		
Need to have led 1 audit or QIP in GIM by CCT – AA or QIPAT completed		
Need at least 1 Teaching Observation before CCT		
Need at least 100 hours of External GIM before CCT (includes regional days, grand rounds, any hospital teaching outside of your specialty)		