

NIRF - INDIA RANKINGS 2019: 72 among Universities in India

### FELLOWSHIP IN HOSPITAL INFECTION CONTROL

Department of Microbiology

**SYLLABUS & REGULATIONS** 



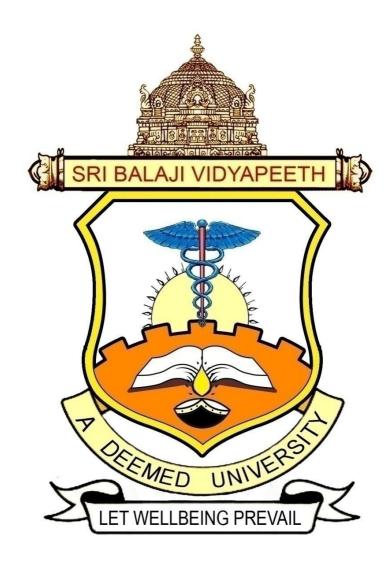
2019-2020 ONWARDS

(As Approved in the Academic Council at the Meeting held on 22.05.2019)

### Sri Balaji Vidyapeeth University Mahatma Gandhi Medical College & Research Institute

DEPARTMENT OF MICROBIOLOGY

# FELLOWSHIP IN HOSPITAL INFECTION CONTROL 2019-2020



DEPARTMENT OF MICROBIOLOGY

#### FELLOWSHIP IN HOSPITAL INFECTION CONTROL

2019-2020 Onwards

#### Sri Balaji Vidyapeeth Mahatma Gandhi Medical College & Research Institute

## SYLLABUS FOR FELLOWSHIP IN HOSPITAL INFECTION CONTROL (FHIC)

S no	Specific Learning Objectives At the end of the courses, the candidates will be able to:
1	To ensure and monitor strict Infection Control practices in all needed areas without compromise.
2	To be an effective Antimicrobial Steward.
3	To investigate, to formulate and to monitor the protocols during any Healthcare Associated outbreaks/incidences.
4	To play a vital role in segregation and management of Biomedical wastes.
5	To ensure continuing medical education to all Healthcare workers (HCWs) on all aspects of infection control and prevention strategies.

S no	Theory / Practical / Clinical Syllabus Post- Doctoral Fellowship in Hospital Infection Control – Course Timeframe	TL strategy	Number of hours	Credits
1	First two months  Course Orientatio n  Surveillance and Reporting of Healthcare Associated Infection  Surveillance and Reporting of Notifiable diseases	Details of Direct contact sessions:  1. Didactic lectures 2. Topic Seminar 3. Journal club 4. Tutorials 5. Group discussions 6. Case discussion 7. Clinical rounds (Ward rounds) 8. Guest lecture  Details of Self-directed learning activities: 1. Assignments	Towards fi Module Di Day 1 Day 2 Day 3 Day 4 Day 5 Day 6 Total 6 Days	etails for 2 weeks rect contact sessions  x 2 = 4 Hours x 2 = 6 Hours x 2 = 6 Hours x 2 = 8 Hours x 2 = 4 Hours x 3 = 4 Hours x 4 = 4 Hours x 4 = 4 Hours x 5 = 4 Hours x 5 = 4 Hours x 6 = 4 Hours x 7 = 4 Hours x 7 = 4 Hours x 8 = 4 Hours x 8 = 4 Hours x 9 = 4 Hours x 9 = 4 Hours x 1 = 4 Hours x 2 = 4 Hours x 3 = 4 Hours x 4 = 4 Hours x 4 = 4 Hours x 4 = 4 Hours x 5 = 4 Hours x 6 = 4 Hours x 6 = 4 Hours x 7 = 4 Hours x 7 = 4 Hours x 8 = 4 Hours x 8 = 4 Hours x 8 = 4 Hours x 9 = 4 Hours x 9 = 4 Hours x 1 = 4 Hours x 1 = 4 Hours x 2 = 4 Hours x 2 = 4 Hours x 2 = 4 Hours x 3 = 4 Hours x 4 = 4 Hours x 4 = 4 Hours x 4 = 4 Hours x 5 = 4 Hours x 6 = 4 Hours x 6 = 4 Hours x 7 = 4 Hours x 7 = 4 Hours x 8 = 4 Hours x 9 = 4 Hours x 1 + 4 Hours x 1 + 4 Hours x 2 + 4 Hours x 3 + 4 Hours x 4 + 4 Hours x 4 + 4 Hours x 5 + 4 Hours x 6 + 4 Hours x 7 + 4 Hours x 7 + 4 Hours x 7 + 4 Hours x 8 + 4 Hours x

<ul><li>Monitoring</li><li>components</li><li>2. Self-study</li><li>3. E-learning</li></ul>	For first 6 months (768 hours) = 36 cre
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of	4. Clinical Audits	
Universal	National /International	
Precaution	Conference	
<ul> <li>Educating</li> </ul>		
various		
groups of		
HCW's on		
Universal		
Precautio		
n.		
<ul> <li>Monitoring</li> </ul>		
and		
reporting		
Sharps/		
body fluid		
exposure		
and follow		
ups		
<ul> <li>Monitoring</li> </ul>		
all the		
patients in		
high		
dependent		
intensive		
care		
areas.		

2	Third month  • Care of	
	Access	
	systems,	
	indwelling	
	devices and	
	Wounds	
	(Vascular	
	care,	
	Respiratory	
	care, Urinary	
	catheter and	
	wound care)	
	<ul> <li>Isolation</li> </ul>	
	policy and	

procedures
Disinfectio
n and
Sterilizatio
n
Hospital
waste
Manageme
nt
Housekeepin
g
Laundry
Dietary
and
hospital
kitchen
• CSSD
• Common
areas of
patient care
(Laboratorie
s, Blood
bank,
Pharmacy,
FNAC and
Histopatholo
g y room.
• Autopsy
and
Mortuary.
Animal house
Education
al
programs
to HCWs.
Special
pathoge
n
Operatio

n			
	neatres		
	invironmenta		
'	and water		

surveillanc	
e activities	
Antimicrobia	
stewardship	
programme.	
(Monitoring	
Surgical	
antimicrobia	
prophylaxis	
and High-	
end	
antibiotic	
usage)	
Antibioti	
c policy	
making/	
updating	
<ul> <li>Multidrug</li> </ul>	
resistant	
pathogen	
S	
Immunizatio	
n to HCWs.	
Outpatien	
t and In-	
patients	
areas.	
Health	
camps, Rural	
and Urban	
centers.	
Laboratory	
manageme	
nt system.	
Outbreak	
management	

3	Fourth and			
	Seventh month			
	Minimum 2			
	clinical			
	audits needs			
	to be			
	completed		Credit hou	ur details for next 21 weeks
4	Twelfth month		Iviodule	Direct contact sessions
	• Minimum 2			
	clinical audits needs		Day 1	
	to be		Day 2	32 Hours = 2 Credit
5	completed Twelfth month		Day 3	
	<ul> <li>University</li> </ul>		Day 4	
	exam (Summative		Day 5	
	exam)		Day 6	
	(Theory and Viva		Total	
	Voice)		6	
			Days	
				2 credit for 21 weeks (32 hours
			For last 2	1 weeks 6 credit hours
6	Exam pattern:			
	<ul> <li>Portfolio</li> </ul>			
	<ul> <li>Project</li> </ul>			
	Theory exam			
	• VIVA			

S no	Assignments/ Projects/ Self-Study	Number of	Credits
		hours	
1	Candidates will complete a minimum 2 clinical audits during this one year of fellowship, this is mandatory for the certification. The candidate is expected to maintain a log book containing all the details of the course.		
2	The academic activities of the program in the		
	hospital would include :-		
	<ul> <li>Regular academic sessions (seminar, journal club, clinical case discussion, portfolio)</li> <li>Bedside practical training</li> <li>Onsite Surveillance Activity</li> </ul>		
	<ul> <li>Daily surveillance activities and reporting</li> </ul>		

>	Involvement in continuous education programs to HCWs.	
>	Creating infection control policies, implementation, monitoring.	
>	Self-directed learning activities E-learning	

S no	Assessment method (FORMATIVE)	Eligibility requirement
1	Regularity	<ol> <li>Minimum 80%         attendance required.</li> <li>Score minimum 50% of         marks in theory and Viva</li> <li>Complete Minimum two         Clinical audits during the one         year of fellowship</li> <li>E-Portfolio</li> </ol>
2	Conduct	
3	Punctuality	
4	Discipline	
5	Interpersonal Relationship	
6	Working ability	
7	Awareness and practice of Medical Ethics	
8	Diagnostic Competence Research Aptitude	
9	Teaching Ability	
10	Knowledge	
11	Academic performance	
12	Communication skills	
13	Language proficiency	
14	Attire and Cleanliness	
15	Positive Impact on the Department	
16	360 degree feedback.	
17	Portfolio	

S no		Assessment (SUMMA		Maximum marks	Eligibility requirement	
	Formative Evaluation		Summative Evaluation		300 marks	Eligibility to appear University Exam
1	Component	Weight (Example)	Compone nt	Weight		and Number of
	Assignment	20	Paper I &	200		attempts – as per
						SBVU norms

Portfolio	20	Internal Assessme nt	50	
Clinical audit	30	VIVA	50	
Written Test	Two tests for 50 marks (4 <sup>th</sup> & 7 <sup>th</sup> ) In 11 <sup>th</sup> month Model exam as per Universit y pattern)			
		Total	300	

S no	Reference Books/ Journals			
1	Hospital Infection Control – Setting up A cost-effective programme by ShaheenMehtar			
	(OXFORD)			
2	Manual of Infection Prevention and Control by NizamDamani (OXFORD)			
3	WHO Infection control guidelines and update			
4	IDSA updates			
5	National and International guidelines on Infection Control			
6	Journal of Hospital Infection			
7	Hospital Infection Control			
8	American Journal of Infection Control			
9	Indian Journal of Hospital Infection			
10	Journal of Infection Prevention			
11	Hospital Infection Control and Prevention			
12	Infection			
13	Emerging Infectious Diseases			
14	American Journal of Infection Control			
15	Journal of Patient Safety and Infection Control			