

August 8, 2017 AHD Objectives

Neutropenic Fever

1. Recall the definition of chemotherapy-induced neutropenic fever and identify the typical microbiologic etiology and pathogenesis.
2. Know the appropriate initial and ongoing diagnostic evaluation in chemotherapy-induced neutropenic fever with attention to well-known clinical syndromes such as invasive aspergillus, ecthyma gangrenosum, and typhlitis.
3. Identify the patient who should have gram positive coverage given in the initial “up-front” empiric coverage by IDSA guidelines, and know why gram positive coverage should not be given initially in every patient with neutropenic fever.
4. Identify the appropriate antimicrobial regimens for initial neutropenic fever and persistent neutropenic fever. Understand the concept of de-escalation.

HIV

1. Describe the advantages for opt-out HIV screening according to the USPSTF and the CDC, and the recommendations according to these agencies for screening. Describe the benefits to fourth-generation testing over third-generation testing and its potential downside.
2. Describe the indication for Pre-exposure Prophylaxis and its effectiveness.
3. Describe the indications for combination antiretroviral therapy (CART).
4. Define IRIS syndrome.
5. Describe the recommendations for prophylaxis of certain opportunistic infections in patients with low CD4 counts/ clinical AIDS diagnoses.

CAP

1. Define community acquired pneumonia and list the most common pathogens responsible for these infections. Understand the percentage of patients in whom a pathogen is identified through commonly used diagnostic methods.
2. Understand the proper use of scoring systems to determine severity of pneumonia and its initial empiric treatment. (PSI score, CURB-65, and SMART-COP).
3. Describe the use of the procalcitonin biomarker for the diagnosis and management of severe CAP.
4. Describe several risk factors for specific pathogens (Table 1).
5. Describe the appropriate management of patients who should be evaluated for treatment failure or complications from infection.