

Sub-speciality training in Adolescent Medicine

The Objective of the Fellowship training program in Adolescent Medicine is to produce specialists trained in this field to acquire the knowledge and special skills needed in the comprehensive management of Adolescents in a wide variety of medical and psychosocial problems in the Hospital and community setting.

A formal training program is needed to ensure proper care is provided by competent personnel.

1. Entry Criteria

- i) A recognized post graduate degree in Paediatrics. Ministry of Health candidates need to be gazetted as a paediatrician before application can be approved. Recognized post graduate qualification of M.Med (Paeds), MRCP, MRCPCH, MRCPI, FRACP or any other equivalent paediatric postgraduate degree recognized in Malaysia.
- ii) Interest in Adolescent Medicine as shown by involvement in CME, research activities, presentation, publications as well as involvement in outreach programmes for Adolescents.
- iii) Submission of application form for training
- iv) Approval of the sub speciality training committee.

In the event that there are more applicants than training posts, additional criteria for selection will be:

- i) Research output, publications and presentations at scientific meetings.
- ii) Seniority in service
- iii) Having served in districts.
- iv) Participation in professional bodies related to the subspeciality.

2. Duration of Training programme

Duration of training is 3 years, with at least 6 months to one year of training overseas in a recognized Adolescent Medicine Centre. It is recommended that the first 2 years are done locally under the supervision of a gazetted Adolescent Specialist (currently only 1 available as of 2008). The local training also includes a minimum of 6 months training in the Child & Adolescent Psychiatric Unit under a gazetted child & Adolescent psychiatrist.

3. Training Programme

3.1 Evidence of satisfactory training supported by:

- a) Log book
- b) Portfolio
- c) Satisfactory supervisors' report

3.2 Important Topics to be covered :

- Familiarization with the normal developmental stages of an Adolescent which includes:
 - i) Interviewing techniques using the HEADDSS examination
 - ii) Understanding the physical & Emotional changes at puberty
 - iii) The clinical approach to an Adolescent
 - iv) The common medical and psychosocial challenges in Adolescence
- Special Adolescent Issues and management :
 - i) General Behavioural Issues like School refusal, bullying, gangsterism, substance abuse, smoking and violence
 - ii) Sexual and reproductive Issues like sexual development and the abnormalities, sexual abuse, gender identity, Teenage pregnancy, Contraception, Pelvic Inflammatory Disease, Delayed puberty, precocious puberty, PCOS, ammenorrhoea etc
 - iii) General medical conditions like chronic illness eg Diabetes, hypertension, Thallasemias, Asthma etc
 - iv) Psychological Issues like suicidality, depression, Conduct disorders, Self harming tendencies, psychopharmacology.
 - v) Eating Disorders-Anorexia Nervosa, Bullimia, EDNOS etc
 - vi) Weight Management /obesity
 - vii) Addiction medicine

These topics are just some of the basic areas to be covered during the training and by no means is exhaustive.

3.3 Methods of training

Training will be done in the form of service provision (including clinics and on call duties) CME, seminars, journal sessions and case discussions.

3.4 Skills to be acquired

The training will enable the candidate to acquire basic skills such as:

- i) Mastering basic changes in physical and psychosocial development
- ii) Enhancing their skills in engaging the young person
- iii) Developing strategies to engage the families using sound parental methods
- iv) Identifying risk factors and resilience of the young person
- v) Developing good practice of confidentiality to each patient.

3.5 Performance of procedures / Activities

The field of Adolescent Medicine does not have many specialized procedure. However a trainee is expected to have carried out some important procedures like:

- i) Conducting a PAP smear examination, High and low vaginal swab including proper preparation of slides
- ii) Preparation of slides from Urethral discharge and STI management
- iii) Administration of Depo Provera IM and the proper usage of contraception
- iv) Administration of Emergency contraception
- v) Advise on usage of condoms/diaphragm
- vi) Management of crisis in the OSCC
- vii) Attendance in court for medicolegal cases
- viii) Management of Post Exposure prophylaxis.

3.6 Attendance and Presentation at professional meetings/courses

This includes conferences related to the field, journal reads and family therapy sessions.

3.7 Review and Evaluation process

The learning experience of the trainee will be recorded in the log book which will include the information regarding cases seen and managed, special procedures done, outreach programmes involved, CMEs and presentations recorded. This also includes:

- i) Assessment of logbook periodically
- ii) Assessment of trainee's attitude and commitment as stated in supervisors report at least 6 monthly

4. Training Centres and Trainers

The approved criteria for a training centre will follow the basic requirement set by the the subspeciality committee. Some of this criteria include:

- i) Adequate number of patients for training, with both outpatient and inpatient services. There should at least be 100 new cases and at least 200 follow up cases per year seen by the Unit. Centres with less the stipulated number may be considered on a case by case basis as decided by the sub speciality Committ.ee.
- ii) Training in the Psychiatry Unit should be under a gazzetted Adolescent & Child Psychiatrist
- iii) The supervisor in Adolescent Medicine should be gazzetted and accredited as well as appointed by the sub speciality committee.
- iv) The ratio of trainer to trainee should not be more than 2 at any point of time.However this is also determined by the workload of the unit.
- v) Overseas training should be for a minimum of at least 6 months. The overseas centre should be also an accredited one with gazzetted trainers.

5. Outreach Programmes

The training in Adolescent Medicine should include at least 1 outreach programme. This can include sessions at the Family Planning Unit (LPPKN), Half way homes for Adolescents, Juvenile Centres etc. for a period of time locally or overseas.

6. Criteria for Accreditation of Adolescent Medicine Specialist in Malaysia

- A) Any doctor can request to be registered if he/she fulfils **ALL** the following requirements:
- i) A basic medical degree recognized by the Malaysian Medical Council
 - ii) A recognized post graduate qualification recognized by the Malaysian Paediatric Speciality Board ie {M.Med (Paed), MRCP,MRCPCH,MRCPI,FRACP or any other degrees equivalent}.
- B) Completed postgraduate Adolescent Medicine training in recognized centres
- i) A minimum of 3 years of local and overseas training under the supervision of a clinical Adolescent Specialist
 - ii) The candidate must furnish evidence of satisfactory clinical attachment in the training centre such as:
 - Portfolio with supporting documents, certificate of completion, certificate of attendance to courses etc
 - Log book of patients seen
 - Satisfactory supervisors report
- C) Grandmother clause
- i) Senior paediatricians may be credentialed if they had at least 1 year attachment at a credentialed Adolescent Medicine Unit overseas and have been working with Adolescents specifically in the field of Adolescent Medicine for at least 2 years.
 - ii) Candidates/ Paediatricians who have recognized qualification from Adolescent Medicine Unit overseas with reports from these centers.

Checklist and criteria for Accreditation of centre for Adolescent Medicine

Name of Candidate: _____

A. Clinical Adolescent work load

- i) No of new consultations a year _____per year
(Min 100/year)
- ii) No of follow up cases seen in a year _____per year
(Min 200/year)
- iii) Provides Laboratory and support services Yes { } No { }
- iv) Provides follow up care Yes { } No { }

B. Training facilities for Adolescent Medicine

- i) Total number of accredited clinical Adolescent Specialist _____
(At least 1)
- ii) Satisfactory Outpatient Clinic rooms with conducive interview room for patient and family Yes { } No { }
- iii) Availability of computers/ internet access Yes { } No { }

C. Clinical activities in Adolescent Medicine

- i) Ward rounds with Adolescent Specialist/week _____
(min 1per week)
- ii) Attachment with other units eg psychiatry unit/week _____
(min 1 in 2 months)

iii) Participation in departmental CMEs Yes { } No { }

iv) Conferences/Workshops attended per year _____(min 2 /year)

D. Log Book.

Please attach the list of cases seen and their diagnosis.

LOG BOOK

As the field of Adolescent Medicine is mostly dealing with behavioural issues, there are basic clinical situations that need to be managed during the training. The list is not exhaustive list but a minimum requirement:

1. General Adolescent Issues

(Tick \checkmark)

Mastering HEADDSS examination	
School refusal	
Learning disorders /Mental Retardation	
ADHD	
Cognitive /Social development	
AffectiveDevelopment (early/mid/late adolescent)	
Compliance issues	
Family problems	
Bereavement/ Death	
Physical Abuse	
Smoking/Bullying /Violence	

2. Sexual and Reproductive Issues

Normal Pubertal changes	
Breast examination/ Gynecomastia	
Urethritis/Vaginitis	
STI	
Sexual exploitation/Abuse/Rape	
Teenage pregnancy	
Contraception	
Gender Identity/Homosexuality	
Sodomy	
Pelvic Inflammatory Disease	
DUB/Ammenorhoea/Dysmenorrhoea	
Delayed/precocious puberty	
PCOS/Hirsutism	
Sexuality/Sex education	
Screening for STI	
HIV/ Genital ulcers	

3. Chronic illness

Compliance issues in chronic illness	
Psychological adaptation	
Thalassemias/Malignancies	
Renal	
Asthma/ chronic resp conditions	
CVS	
GIT-Abdominal pain/Chrohns/UC	
Chronic neurological conditions	
Connective Tissues/Bone	
Diabetes/Endocrine	

4. Eating Disorders and Weight Management

Anorexia Nervosa	
Bullimia	
Food Avoidance	
EDNOS	

Disordered Eating	
Overweight/Obesity/OSAS	
Insulin Resistance	

5. Psychological problems

Depression/ Dysthymia	
Anxiety disorders	
Conduct Disorders	
Personality disorders	
Obsessive/ Compulsive Disorders	
Conversion	
Autism/Pervasive disorders	
Suicide	
Self harming/Mutilating	
Psychosis	
Mood disorders	
Phobias/Fears	
PTSD	
Psychopharmacology	
Bereavement counseling	
Addiction	

7. Special procedures /Outreach / Activities

PAPs smear/slide preparation	
Low & High vaginal swabs	
IM DEPO PROVERA	
Court Attendance	
Outreach programmes-LPPKN/ Juvenile centres etc	
Half way homes for teens	

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(Last reviewed May 2008)