

Document 3

Specialist Procedures Required for PRM Subspecialists

The trainee is expected to achieve competence in the following specialist procedures by the end of training, to be able to function independently in patient management.

Mandatory

1. Tuberculin test (Mantoux)
2. Skin prick tests of common allergens
3. Tracheal intubation (minimum of 10 performed)
4. Changing a tracheostomy tube (minimum of 3 performed)
5. Diagnostic pleural tapping (minimum of 5 performed)
6. Chest drain insertion
7. Full Lung Function Testing including spirometry, lung volumes, body plethysmography, and DLCO for children of different ages (minimum of 5 hands on tests and 30 interpretation)
8. Performance and interpretation of a polysomnogram (Sleep study) (minimum of 5 under close supervision and 30 more interpretation)
9. Flexible bronchoscopy (minimum of 15 performed and assisted in 30)
10. Use of non-invasive ventilator support

Desirable

1. Procedures during bronchoscopy: BAL, brush biopsy, endo-bronchial biopsy, bronchoscopic intubation
2. Perform and interpret exhaled nitric oxide
3. Infant and pre-school lung function tests
4. pH study for suspected GERD
5. Exercise challenge testing
6. Bronchial challenge testing
7. Respiratory muscle and airway resistance assessment