



Scope of Practice and Clinical Responsibilities General Practitioner 2016

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Acknowledgment

Dubai Health Authority (DHA) is pleased to present the scope of practice and clinical responsibilities of General Practitioner, which represents a milestone towards fulfilling the DHA Strategic Objective to “Ensure continuous development of health and medical professionals and attract the highly qualified”. This document places an emphasis on the procedures that can be performed by a licensed General Practitioner in the Emirate of Dubai.

This document was developed by the Health Regulation Department (HRD) in collaboration with Subject Matter Experts (SMEs) whose contributions have been invaluable. HRD would like to gratefully acknowledge those professionals and to thank them for their dedication to quality in healthcare and their commitment in undertaking such a complex task.

Health Regulation Department
Dubai Health Authority

1. Introduction

- 1.1 A General Practitioner (GP), also known as general practice physician or general physician, practices general medicine which is neither limited to any particular area of medicine/specialty nor limited by age, gender, body system, disease process or service site.
- 1.2 The scope of the GP clinical practice is challenging and includes promoting health, preventing diseases, and providing cure and care through early intervention for those at risk.
- 1.3 The GP provides general diagnosis and treatment for patients in all aspects of general medicine within their physical, psychological, social, cultural and existential dimensions.
- 1.4 Through the smart interplay between bio-psycho-social contributors to health, the GP demonstrates a deep understanding of the whole person, and the ability to deal with complex conditions and circumstances.
- 1.5 The GP seeks to build health and wellbeing through establishing therapeutic relationships with patients/families, application of best practice evidence in the unique context of each consultation, utilizing healthcare resources/services effectively and the appropriate use of referral in the healthcare setting.
- 1.6 The GP consults effectively with other physicians and healthcare professionals to help develop those services. Moreover, they contribute effectively to other interdisciplinary team activities.
- 1.7 They may arrange hospital admissions and referrals to specialists according to the individual patient needs. Hospital admissions shall not be under the GP name; however, the observations at the hospitals' emergency department can be under the GP name.
- 1.8 When consulting patients, the GP would advise them on the best course of action. This may be through recommending further testing, prescribing medication, recommending a change in the patient's lifestyle or by referring them to a specialist.
- 1.9 Upon patient request, the GP can visit patients at home. This requires appropriate arrangements for home visit including proper documentation of the visit, and availability of the basic assessment requirements.

1.10 This document defines the skills, activities and expertise that fall within the GP scope of practice. However, for practices/activities other than those mentioned in this document, the GP shall seek an approval from the HRD at DHA prior to performing the practice.

2. DHA licensing titles

- 2.1 A General Practitioner title is issued by DHA to physicians who have completed basic medical degree from an accredited institution after the successful completion of the required training and clinical experience as per the healthcare Professionals Qualification Requirements (PQR).
- 2.2 In certain cases, DHA may issue a GP licensing title for physicians who are holding recognized specialty certificates but did not meet the experience requirements. In such cases, GPs may practice in a hospital within the area of specialty under direct supervision of a full-time specialist.

3. Permitted health facilities for practice

GPs licensed by DHA can practice in the below health facilities:

- 3.1 Hospitals
- 3.2 Day surgical centers
- 3.3 Outpatient care facilities including polyclinics (clinics having more than 3 specialties)
- 3.4 General clinics
- 3.5 Home healthcare facilities
- 3.6 School clinics

4. General scope

- 4.1 The GP often provides the first point of contact for people with an undiagnosed health concern to assess and manage a wide range of conditions, from sinus and respiratory infections to fractures regardless of the age, gender, or any other characteristic.
- 4.2 Within their skills, competencies, and experience, licensed GPs shall:
 - 4.2.1 Demonstrate diagnostic and therapeutic skills for effective patient care by using evidence based medical practices.

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- 4.2.2 Demonstrate effective consultation with respect to patient care, culture and education.
- 4.2.3 Demonstrate an understanding of medico-legal issues.
- 4.2.4 Obtain relevant history from patients/families/communities and keep accurate and adequate patient records.
- 4.2.5 Function as a counsellor and advocate to effectively improve health of patients and communities.
- 4.2.6 Diagnose, treat and manage acute and chronic diseases, order and interpret laboratory and diagnostic tests and prescribe medications as per the DHA local regulations and Unites Arab Emirates (UAE) Federal laws.
- 4.2.6.1 Prescribe controlled drugs-CD (CD-A) up to (3) days only. Such prescription shall be in hospitals' emergency department only.
- 4.2.6.2 Prescribe semi controlled drugs-SCD (CD-B) up to (30) days with no refill.
- 4.2.7 Understand and abide to the Federal law No. (27) of 1981 concerning the prevention of communicable diseases, Federal law No. (10) of 2008 in respect of Medical Liability (article 6) and Cabinet Decision No. (33) of 2009 promulgating the bylaw of the Medical Liability.
- 4.2.7.1 A physician shall immediately inform the concerned health authority if he suspected that a patient is suffering a contagious disease; as per the Federal law No. (27) of 1981.
- 4.2.7.2 A physician shall detain the patient in the health facility, if possible, and immediately inform the concerned health authority if the physician suspected that a patient is suffering a condition that requires quarantine according to the World Health Organization (WHO) standards; as per the Federal law No. (27) of 1981. If the physician could not detain the patient, then the physician shall immediately report the case to the concerned health authority by providing all the patient details (name, address, nationality, residency place and work place).
- 4.2.8 Deliver highest quality care with integrity, honesty and compassion.
- 4.2.9 Refer patients with serious conditions to specialists or other healthcare professionals for more intensive care.
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5. Areas of clinical expertise

5.1 Adolescent health

A GP shall demonstrate the ability to:

- 5.1.1 Assess young people using an appropriate framework, taking into account the impact of cultural issues.
- 5.1.2 Provide preventive services, immunizations, health promotion, and guidance to adolescent patients during wellness visits, routine care visits, and acute care visits.
- 5.1.3 Interpret body mass index (BMI) and make recommendations for nutrition and activity.
- 5.1.4 Assess blood pressure in the context of normal ranges for age and height.
- 5.1.5 Manage common health conditions presenting in youth.
- 5.1.6 Identify risk and resilience factors.
- 5.1.7 Discuss factors that aid healthy development and resilience.
- 5.1.8 Assess mental status, recognize levels of cognitive and physical development, and distinguish between normal and abnormal developmental changes in young people.

5.2 Cardiology

A GP shall demonstrate the ability to:

- 5.2.1 Recognize the risk factors for cardiovascular diseases (CVD) as angina, myocardial infarction (MI), ischemic stroke, transient ischemic attack (TIA) and peripheral vascular disease, and explain the benefits of risk modification to the patients and their families.
- 5.2.2 Make an initial diagnosis to the symptoms that might be cardiac in origin as chest pain, breathlessness, ankle swelling, symptoms/signs thought to be caused by peripheral vascular disease (arterial and venous), palpitations and silent arrhythmias, symptoms/signs of cerebrovascular disease, dizziness and collapse.
- 5.2.3 Recognize the symptoms of stroke and transient ischemic attack.
- 5.2.4 Recognize and discuss with patients and their families end-stage CVD and provide appropriate palliative care.

- 5.2.5 Confidently use clinical tools as blood pressure (BP) measurement, lead electrocardiogram (ECG), 24-hour ambulatory BP to assess and calculate cardiovascular risk.
 - 5.2.6 Provide care for acute exacerbation of congestive heart failure in the community.
 - 5.2.7 Use medication appropriately to modify identified risk factors, including knowledge of treatment guidelines.
 - 5.2.8 Undertake a risk assessment for stroke, ensuring appropriate immediate management and/or admission according to local protocols.
 - 5.2.9 Recognize, by clinical examination and ECG, commonly encountered arrhythmias and other cardiac events, and their significance and management.
 - 5.2.10 Assess patients for risk factors and recommend secondary prevention tips in the community.
 - 5.2.11 Undertake family screening and appropriate assessment and referral.
 - 5.2.12 Undertake resuscitation skills training to the level appropriate for the working environment.
 - 5.2.13 Recognize, by clinical examination, commonly encountered heart murmurs, their significance and management.
 - 5.2.14 Order and interpret laboratory tests performed in acute cardiovascular situations appropriately.
 - 5.2.15 Understand the risk of acute rheumatic fever in vulnerable populations and describe methods of reducing this risk.
- 5.3 Dermatology
- A GP shall demonstrate the ability to:
- 5.3.1 Understand skin symptoms, including itch, rash, hair loss, lumps, ulcers and nails disorders.
 - 5.3.2 Recognize clinical and historical features of major skin diseases including:
 - 5.3.2.1 Eczema: atopic, contact and seborrheic
 - 5.3.2.2 Psoriasis
 - 5.3.2.3 Acne/Rosacea
 - 5.3.2.4 Urticaria

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- 5.3.2.5 Bacterial infections: cellulitis, erysipelas, impetigo
 - 5.3.2.6 Viral infections: herpes simplex, herpes zoster, warts, pityriasis rosea, exanthems, enanthems
 - 5.3.2.7 Fungal infections: dermatophytes, pityriasis versicolor, candidiasis
 - 5.3.2.8 Insect infections: lice, scabies
 - 5.3.2.9 Benign growths: epidermoid cysts, seborrhoeic keratoses, solar lentigos
 - 5.3.2.10 Malignancy and premalignant conditions: solar keratosis, basal cell carcinoma, squamous cell carcinoma, Bowen's disease (squamous carcinoma in situ) keratoacanthoma, melanoma
 - 5.3.2.11 Pruritus
 - 5.3.2.12 Hair diseases: alopecia areata, androgenic alopecia, telogen effluvium
 - 5.3.2.13 Nail diseases: fungal, psoriatic, neoplastic nail disease
 - 5.3.2.14 Ulcers: including venous, arterial, malignant and pressure ulcers
 - 5.3.2.15 Systemic lupus erythematosus, lichen planus, purpura, keratosis pilaris
 - 5.3.3 Recognize skin conditions related to drug reactions and environmental exposures.
 - 5.3.4 Manage common skin conditions and refer to specialists appropriately.
 - 5.3.5 Promote skin wellbeing by applying health promotion and disease prevention strategies appropriately.
 - 5.3.6 Understand appropriate skin dressings, simple suturing and treatments for a variety of wounds and conditions.
 - 5.3.7 Understand the indications for and assist in performing biopsy, diathermy, skin and nail scrapings for fungal disease and skin swabs for bacterial or viral diseases.
 - 5.3.8 Recognize life threatening dermatological emergencies.
- 5.4 Emergency and urgent care
- 5.4.1 Emergency and urgent cases are conditions or accidents that require immediate care when early recognition of warning signs, early investigation

and referral may be lifesaving. It can occur in patients of any age and may involve one or more body systems.

5.4.2 The GP needs to cope with a variety of traumatic injuries and medical emergencies, as well as acute minor trauma.

5.4.3 Life-threatening emergencies, as impending upper airway obstruction and significant dehydration, require hospital intervention and the GP requires the knowledge and triage skills to choose the appropriate management.

5.4.4 In general, the GP shall demonstrate the below clinical expertise:

5.4.4.1 Cardiovascular

5.4.4.1.1 Assess and manage cardiovascular presentations including, but not limited to, chest pain (including differentiation, initial or definitive treatment, and referral); acute arrhythmias; acute cerebrovascular event; deep vein thrombosis including knowledge of diagnostic pathways, local protocols and initial management in the community; and acute peripheral arterial insufficiency.

5.4.4.1.2 Confidently perform cardiopulmonary resuscitation (CPR) and maintain active basic life support (BLS) certificate.

5.4.4.2 Cardiorespiratory

5.4.4.2.1 Assess, differentiate and manage acute breathlessness, including rational clinical decision-making for severity and the need for secondary assessment or hospitalization versus management in the community and secondary prevention in all age groups, including children.

5.4.4.2.2 Manage other acute respiratory problems such as asthma and arterial bleeding.

5.4.4.3 Ear, nose and throat (ENT)

5.4.4.3.1 Manage epistaxis, including patient education for physical positioning and pressure, intranasal medications and nasal packing, if needed.

- 5.4.4.3.2 Identify and manage conditions that may compromise the airway, such as quinsy or foreign body in the airway.
- 5.4.4.4 Eyes
 - 5.4.4.4.1 Confidently assess and manage acute red/painful eye.
 - 5.4.4.4.2 Competently examine for and remove a simple foreign body on the surface of the eye or under the upper lid.
- 5.4.4.5 Gastrointestinal (GI)
 - 5.4.4.5.1 Recognize the causes of acute abdominal pain and/or vomiting in children and adults, and differentiate with appropriate management, including pre-hospital treatment.
 - 5.4.4.5.2 Manage acute GI bleeding, including resuscitation and appropriate referral and transfer.
- 5.4.4.6 Genitourinary
 - 5.4.4.6.1 Diagnose renal colic, initiate immediate management and appropriately refer for further investigation and management.
 - 5.4.4.6.2 Manage acute urinary retention, catheter insertion and management.
 - 5.4.4.6.3 Identify acute testicular torsion.
 - 5.4.4.6.4 Identify and manage entire spectrum of genitourinary infection.
- 5.4.4.7 Infection
 - 5.4.4.7.1 Diagnose and appropriately treat community-acquired infections.
 - 5.4.4.7.2 Recognize sepsis and be able to initiate the appropriate pre-hospital antibiotic treatment.
- 5.4.4.8 Metabolic
 - 5.4.4.8.1 Identify and manage acute metabolic emergency conditions such as anaphylaxis, angioedema, diabetic ketoacidosis, hyper/hypokalemia and hyper/hypocalcemia.

5.4.4.9 Neurology

5.4.4.9.1 Assess acute headache, including red flags.

5.4.4.9.2 Assess and manage patients post traumatic head injury and advise appropriate follow-up.

5.4.4.9.3 Manage acute seizures in children and adults, including immediate management, management of status epilepticus, and appropriate transfer or referral.

5.4.4.10 Skin

5.4.4.10.1 Recognize, assess severity of and manage cellulitis, including rational prescribing of oral antibiotics and community intravenous antibiotics when appropriate.

5.4.4.10.2 Identify and manage acute urticaria.

5.4.4.11 Trauma

5.4.4.11.1 Manage variety of wounds.

5.4.4.11.2 Assess and immediately manage burns appropriately.

5.4.4.11.3 Assess and manage fractures.

5.4.4.11.4 Manage dislocations where appropriate.

5.4.4.11.5 Assess and manage acute skin traumas.

5.5 End of life care (Palliative care)

End of life care is the active total (team) care of patients whose disease is not responsive to curative treatment. Control of pain and other symptoms, and psychological, social and spiritual issues, is paramount to provide the best quality of life for patients and their families. A GP shall demonstrate the ability to:

5.5.1 Understand the broad range of terminal illnesses (as malignancy), neurological degenerative disease (as motor neurone disease, end stage dementia), organ failure (as renal, chronic obstructive pulmonary disease [COPD], congestive cardiac failure), frailty and dementia, and Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS).

5.5.2 Understand the potential treatments available, both disease specific and for symptom control, including palliative surgery, radiotherapy and chemotherapy.

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- 5.5.3 Anticipate, diagnose and manage potential problems, either disease related or iatrogenic.
 - 5.5.4 Understand indicators of disease progression.
 - 5.5.5 Demonstrate a good understanding of drugs commonly used in palliative care (indications, doses, side effects, routes of administration).
 - 5.5.6 Gain intravenous access as needed and maintain as required, as well as perform subcutaneous and intramuscular injection techniques.
 - 5.5.7 Understand the implications of renal and hepatic impairment.
 - 5.5.8 Recognize interactions between prescribed drugs and any complementary and alternative medicines patients may be taking.
 - 5.5.9 Identify symptoms and therapeutic responses (including counselling and psychosocial support).
 - 5.5.10 Be competent in recognizing and appropriately managing and/or referring on patients with potential emergencies at the end of life such as: opioid toxicity, neutropenic sepsis, seizure, hypercalcemia, bowel obstruction, spinal cord compression and hemorrhage.
- 5.6 Endocrinology
- A GP shall demonstrate the ability to:
- 5.6.1 Recognize early presentations of the variety of endocrine conditions.
 - 5.6.2 Understand the principles of diagnosis and monitoring of metabolic chronic diseases with their comorbidities.
 - 5.6.3 Develop and maintain knowledge of the tests and investigations required.
 - 5.6.4 Discuss the side effects, both minor and major, of medications used when prescribing for endocrine conditions.
 - 5.6.5 Discuss all the factors that influence obesity and use strategies to reduce the risk of obesity.
 - 5.6.6 Recognize a variety of more unusual endocrine presentations including, but not limited to, Addison's disease, ambiguous genitalia, abnormal stature and errors of metabolism.
 - 5.6.7 Recognize normal development through puberty and identify abnormalities.
 - 5.6.8 Recognize significant or urgent presentations that require immediate referral or expert opinion.

5.6.9 Discuss the various endocrine conditions that have an impact on fertility.

5.7 ENT and eye

A GP shall demonstrate the ability to:

- 5.7.1 Understand the common eye, ear, nose and throat conditions in primary care and refer them appropriately.
- 5.7.2 Understand allergic conditions, their investigation and management, acutely and long term.
- 5.7.3 Investigate and manage sore throats, including reducing the incidence of progression to rheumatic heart disease.
- 5.7.4 Understand the epidemiology of tumors affecting eyes, ears, nose and throat areas.
- 5.7.5 Understand the importance of diabetic retinopathy screening and regular eye tests in the context of preventable sight loss.
- 5.7.6 Assess, investigate and treat throat and neck presentations, such as lump in the neck and hoarseness of voice.
- 5.7.7 Detect and safely remove foreign bodies from the eye, ear, nose or throat and manage any residual corneal ulcer or rust, including appropriate referral.
- 5.7.8 Interpret an audiogram and use the correct examination skills required for assessing a variety of ear-related conditions, such as vertigo and hearing loss.

5.8 Gastroenterology

A GP shall demonstrate the ability to:

- 5.8.1 Understand the epidemiology of digestive problems.
- 5.8.2 Determine a differential diagnosis for variety of upper and lower GI symptoms.
- 5.8.3 Interpret common symptoms in general practice, including dyspeptic symptoms (epigastric pain, heartburn, regurgitation, nausea, bloating), abdominal pain, nausea, vomiting, anorexia, weight loss, hematemesis and melena, rectal bleeding, jaundice, diarrhea and constipation, and dysphagia.
- 5.8.4 Use an evidence-based approach for management and prescribing for common GI symptoms.

- 5.8.5 Demonstrate a systematic approach to investigate common digestive symptoms such as peptic ulcer, esophageal varices, hepatitis, gastrointestinal cancers and post-operative complications.
- 5.8.6 Perform comprehensive, condition-appropriate abdominal examination.
- 5.8.7 Use appropriate equipment available for investigating bowel symptoms, such as a proctoscope.
- 5.8.8 Understand that digestive symptoms are frequently linked to psychosocial factors and empathize with individuals who are psychologically distressed.
- 5.8.9 Understand the indications, signs and symptoms for urgent referral for suspected GI cancer.

5.9 Genetics

A GP shall demonstrate the ability to:

- 5.9.1 Use a three-generation family history to recognize patterns of inherited disease or disability.
- 5.9.2 Use family history information to identify patients who are at increased risk of common, preventable multifactorial conditions.
- 5.9.3 Be aware of the wide range of conditions that may have a genetic factor in their etiology and the role of disease predisposition genes.
- 5.9.4 Understand the implications of genetic conditions for other family members who may benefit from genetic counselling.
- 5.9.5 Describe the reproductive options available to those with a known genetic condition.
- 5.9.6 Understand the role of genetic tests in the assessment of people with developmental delay, developmental disability and/or dysmorphic features.
- 5.9.7 Diagnose and manage genetic conditions through co-ordination of care with geneticists and other appropriate specialists.
- 5.9.8 Work within their limits of competency with regard to genetic screening and counselling.

5.10 Geriatrics

A GP shall demonstrate the ability to:

- 5.10.1 Understand the physical, psychological and social changes that may occur with age, especially in relation to loss of a partner, other bereavements, isolation and loneliness.
- 5.10.2 Understand how diagnosis, management and prognosis in geriatrics may be affected by the presence of altered presentations and comorbidities.
- 5.10.3 Recognize how an ageing person adapts to the ageing process, and how the breakdown of these adaptations leads to disability.
- 5.10.4 Diagnose and treat classic geriatric presentations such as confusion, falls, leg ulcers and incontinence.
- 5.10.5 Manage distressing symptoms, even in the absence of demonstrable pathology (as dizziness, isolation, constipation and dry skin).
- 5.10.6 Recognize the significant problem of polypharmacy and aim to minimize the use of medications.
- 5.10.7 Recognize the interactions and complications of multisystem diseases and conditions and refer appropriately.
- 5.10.8 Recognize the common, early red flag symptoms and signs of malignancy (as weight loss, dysphagia, melaena, diaphoresis, etc.).
- 5.10.9 Discuss with patients and their families safety issues related to physical changes with age, such as the ability to drive.
- 5.10.10 Help the patients' functional needs and help them to maintain independence, as appropriate.
- 5.10.11 Incorporate preventive care activities into their practice.
- 5.10.12 Identify support services for older patients, as podiatry, visual and hearing aids, immobility and walking aids and home care services.
- 5.10.13 Coordinate ambulatory, inpatient, and institutional care across healthcare providers, institutions, and governmental agencies.

5.11 Gynecology and women's health

A GP shall demonstrate the ability to:

- 5.11.1 Understand the pathology, clinical management and epidemiology of common illnesses relating to women as genital tract infections, reproductive tract diseases, breast diseases and urinary tract infections.

- 5.11.2 Discuss all aspects of menstruation throughout the life of the woman and the need for calcium and vitamin D as protection against osteoporosis and bone fractures.
- 5.11.3 Discuss fertility issues with patients and their families.
- 5.11.4 Recognize obstetric or gynecological emergencies and refer appropriately.

5.12 Musculoskeletal

GP plays an important role in the prevention, early detection, and management of musculoskeletal diseases by demonstrating the ability to:

- 5.12.1 Perform an appropriate musculoskeletal history and physical examination.
- 5.12.2 Formulate an appropriate differential diagnosis and recommend treatment, including requisite subspecialty referrals.
- 5.12.3 Diagnose and identify red flags that relate to infection (e.g. septic arthritis or osteomyelitis); cancer (e.g. bony metastases and osteogenic sarcoma); fracture (e.g. fragility fracture in osteoporosis); and inflammatory arthritis (e.g. rheumatoid arthritis, ankylosing spondylitis) and refer those conditions appropriately.
- 5.12.4 Identify and manage acute systemic inflammatory conditions that are appropriately treated in primary care such as gout and polymyalgia rheumatic.
- 5.12.5 Diagnose common, regional soft-tissue problems that can be managed in primary care (e.g. tennis elbow, trigger finger).
- 5.12.6 Diagnose and manage the common, regional pain syndromes such as osteoarthritis, back pain and fibromyalgia.
- 5.12.7 Screen and identify those patients at risk of systemic bone disorders, such as osteoporosis and vitamin D deficiencies, and understand the principles of primary and secondary prevention of fragility fractures.
- 5.12.8 Consider rare conditions such as connective tissue diseases (e.g. lupus) which may present with non-specific symptoms and affect extra-articular organs such as blood vessels, skin and kidneys.
- 5.12.9 Identify musculoskeletal conditions and abnormalities in children as bowlegs.

5.13 Occupational health

Occupational health deals with all aspects of the relationship between work environment and the health of workers, with the aim of improving health and minimizing injuries in the workplace. A GP shall demonstrate the ability to:

- 5.13.1 Take an accurate occupational history and conduct appropriate physical examination.
- 5.13.2 Investigate health complaints that may relate to work or environmental exposure.
- 5.13.3 Define the potential health effects of common and important workplace hazards.
- 5.13.4 Manage medical aspects of work related illness and injury.
- 5.13.5 Understand the effects of over-the-counter and prescribed medications on job performance.
- 5.13.6 Understand the role of accident prevention and proactive risk management in the workplace to prevent physical and mental work related illness and injury.
- 5.13.7 Assess fitness to work, perform pre-employment medicals and where relevant, onsite assessments.
- 5.13.8 Use evidence based medicine for the early intervention and active management of work related illness and injury.
- 5.13.9 Describe the impact of long-term health conditions on work capacity and interventions for minimizing disability.
- 5.13.10 Understand common or important occupational diseases, their treatment and potential long-term impact.

5.14 Oncology

The general practice management of cancer involves caring for people with cancer and their families over the entire spectrum of cancer. A GP shall demonstrate the ability to:

- 5.14.1 Identify, assess and manage risk factors that contribute to cancer, such as lifestyle, environmental, familial and dietary.
- 5.14.2 Identify and investigate significant symptoms, including those of metastatic disease, and refer appropriately.

- 5.14.3 Identify red flags during medical and radiation oncology treatment.
- 5.14.4 Recognize and manage common symptoms and side effects during or after treatment in conjunction with the treating oncology team.

5.15 Pediatrics

A GP shall demonstrate the ability to:

- 5.15.1 Diagnose common childhood illnesses and manage them appropriately.
- 5.15.2 Undertake an age-appropriate examination of a child and perform a physical exam including use of growth charts.
- 5.15.3 Distinguish between normal and abnormal development, recognize disabilities and refer appropriately.
- 5.15.4 Respond to serious pediatric illness at an early stage.
- 5.15.5 Prescribe medications for children, recognizing their associated risks and harms.
- 5.15.6 Recognize common childhood behavioral or mental health conditions.
- 5.15.7 Recognize the signs of child abuse or neglect and refer appropriately.
- 5.15.8 Manage urgent, life threatening problems.
- 5.15.9 Have an awareness of disease prevention, well-being and safety in children, including the following areas:
 - 5.15.9.2 Breastfeeding
 - 5.15.9.3 Healthy diet and exercise for children and young people
 - 5.15.9.4 Social and emotional well-being
 - 5.15.9.5 Keeping children and young people safe along with accident prevention
 - 5.15.9.6 Immunization

5.16 Public health

Public health involves managing the spread of communicable diseases through a population by immunization and screening programs. A GP shall demonstrate the ability to:

- 5.16.1 Discuss the childhood immunization schedule and the conditions it protects against.

- 5.16.2 Describe the various notifiable diseases and their assessment, treatment and long-term management.
- 5.16.3 Recognize the benefit of proactive, individually targeted lifestyle and nutritional interventions that can lead to protection from future serious diseases.
- 5.16.4 Evaluate and counsel about substance abuse, diet/eating disorders, sexuality, contraception, academic performance, home environment, peers issues, stress and mental health.

5.17 Respiratory

A GP shall demonstrate the ability to:

- 5.17.1 Be aware of the diagnostic and latest treatment guidelines for common respiratory diseases (asthma and COPD) in primary care.
- 5.17.2 Use an evidence-based approach to antibiotic prescribing for respiratory infections.
- 5.17.3 Recognize and refer appropriately patients with interstitial diseases.
- 5.17.4 Know the boundaries of primary care management and the role of referral and specialist services in supporting the patient.

5.18 Sexual health

A GP shall demonstrate the ability to:

- 5.18.1 Understand sexually transmitted infections (STIs) from bacterial/viral/fungal/protozoal infections including their epidemiology, basic microbiology and signs and symptoms of disease.
- 5.18.2 Understand screening principles for cancers of the breast, cervix and prostate and their management guidelines.
- 5.18.3 Understand and manage contraception including pharmacology use, cost effectiveness, accessibility and patient concordance issues for both genders.
- 5.18.4 Understand and advice on legal framework of abortion/pregnancy termination in the UAE.
- 5.18.5 Recognize genital dermatology and common gynecological/urological problems.

- 5.18.6 Intervene effectively and professionally in domestic violence and take appropriate actions.
- 5.18.7 Understand sexual dysfunction as a common issue and have the ability to discuss this with patients.
- 5.18.8 Co-ordinate care and make timely, appropriate referrals to specialist services, especially to Obstetrics and Gynecology, Urology, Genito-Urinary, Infectious Diseases and Sexual and Reproductive Health specialists.

5.19 Substance abuse

Substance abuse is wide-ranging and can include alcohol, tobacco, recreational, prescription drugs and other substance misuse. A GP shall demonstrate the ability to:

- 5.19.1 Identify people with drug or alcohol problems and need to be aware of the extent and consequences of these problems.
- 5.19.2 Use and interpret appropriate screening tools and be able to explain the process to patients.
- 5.19.3 Recognize acute conditions, such as intoxication, psychosis or withdrawal and refer appropriately.
- 5.19.4 Consider relevant co-morbidities and investigate accordingly, for example blood-borne infections and/or depression.
- 5.19.5 Explain to patients and their family the nature of substance abuse and that they are chronic and relapsing disorders.
- 5.19.6 Discuss with patients and their families the health, financial and psychosocial problems resulting from substance abuse.
- 5.19.7 Develop a working knowledge of the various treatment programs available and refer the patients appropriately.

5.20 Urology

GP shall demonstrate the ability to:

- 5.20.1 Perform a focused examination, being sensitive to the privacy of the patient and any cultural requirements.
- 5.20.2 Investigate renal conditions through ordering appropriate tests.

5.20.3 Have core knowledge of appropriate management and referral for the common renal and urological conditions seen in primary care.

5.21 Travel medicine

A GP shall demonstrate the ability to:

- 5.21.1 Use knowledge of or gain access to information on more specialized travel medicine topics.
- 5.21.2 Be familiar with immunization requirements and specific preventive measures relating to travel.
- 5.21.3 Prescribe for the traveler going overseas.
- 5.21.4 Be up-to-date with the latest recommendations from the CDC, WHO and advice patients accordingly.

6. References

- The Royal New Zealand College of General Practitioners (RNZCGP). (2014). Curriculum for General Practice. Available at: www.rnzcp.org.nz.
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- The Royal Australian College of General Practitioners (RACGP). (2011). The RACGP Curriculum for Australian General Practice 2011. Last accessed November 26th, 2014. Available at: <http://www.racgp.org.au>
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