



AUSTRALIAN INSTITUTE OF  
MEDICAL AND CLINICAL SCIENTISTS

**Fellowship Discipline Modules**

**Clinical Pathology**

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## Introduction

**THE DISCIPLINE MODULES HANDBOOK IS TO BE READ IN CONJUNCTION WITH THE AIMS FELLOWSHIP BOOKLET: PROCEDURES AND REGULATIONS.**

The AIMS Fellowship is divided into four stages, all of which must be successfully completed.

This booklet contains the four discipline-based modules that comprise Stage 1 (Modules 1 and 2) and Stage 2 (Modules 3 and 4).

Stage 1 (Modules 1 and 2) must be successfully completed before enrolling into Stage 2 (Modules 3 and 4).

Each module documents the aims, learning outcomes, syllabus and provides some learning resources for the topic/s covered. Modules are assessed by written examination conducted in-person or online. Examinations are held twice a year as required in June (applications close at the end of February) and November (applications close at the end of July). Candidates must apply to sit the examinations using the Fellowship Examination Application Form and pay the relevant fee.

Note: A member with less than two (2) years continuous Professional Membership, but with more than five (5) years postgraduate experience (within the previous 10 years), may complete Stage 1 (Modules 1 and 2) prior to enrolling and be granted advanced standing (ie credit) for successfully completed modules when eligible to enrol in the full Fellowship program.

All modules are compulsory.

## Clinical Pathology I

<b>Module</b>	<b>HAEMATOLOGY AND HAEMOSTASIS</b>
<b>Assumed knowledge</b>	Normal and abnormal cell physiology, clinical aspects relevant to routine haematological testing and other technical procedures related to cellular haematology.
<b>Aim</b>	To develop and apply expert knowledge, investigative and clinical skills relevant to the routine haematology laboratory.
<b>Module learning outcomes (MLO)</b>	On completion of this module the candidate will be able to: <ul style="list-style-type: none"> <li>(i) Discuss the importance of preanalytical factors to the quantity of test results and factors that may have an impact on the quality of the sample</li> <li>(ii) Explain the techniques and technology used in the cellular investigations and related procedures performed in the routine haematology laboratory including the principle of each technique, the performance of each technique, limitations of the techniques, problem detection, troubleshooting and the technical and clinical interpretation of results</li> <li>(iii) Describe and appraise the coagulation investigations performed in the Haemostasis laboratory</li> <li>(iv) Interpret, evaluate and explain the laboratory presentation of specific clinical conditions and situations</li> </ul>

<b>Theme</b>	<b>Syllabus</b>
<b>Preanalytical phase MLO (i)</b>	The impact of pre-analytical variables on haematology and coagulation test results including sample collection, handling, stability, storage and transport
<b>Principles and applications of techniques in Haematology MLO (ii)</b>	<ul style="list-style-type: none"> <li>• Principles of automated cell counting</li> <li>• Operation and limitations of the other automation used in the routine laboratory including staining machines, slide makers, ESR analysers</li> <li>• Factors affecting the staining of blood films</li> <li>• Morphological examination of peripheral blood and bone marrow films and body fluids and how this supports the diagnosis of haematological conditions</li> <li>• Performance of manual tests including erythrocyte sedimentation rate (ESR), reticulocytes, Heinz bodies, rapid screening tests for infectious mononucleosis and malaria, and the effectiveness and limitations of these tests</li> <li>• Strategies and standards applied to reporting laboratory results including the units and selection of reference ranges</li> </ul>

<p><b>Principles and applications of techniques in Haemostasis testing</b> MLO (iii)</p>	<ul style="list-style-type: none"> <li>• PT, INR, APTT, TT, TT correction methods</li> <li>• Fibrinogen, Fibrin/fibrinogen degradation products</li> <li>• Mixing studies</li> <li>• DIC screening</li> <li>• Clotting based factor assays</li> </ul>
<p><b>Clinical conditions and situations</b> MLO (iv)</p>	<p><u>Haematological non-malignant conditions</u></p> <ul style="list-style-type: none"> <li>• Anaemias – macrocytic, microcytic, haemolytic, hypoplastic, blood loss</li> <li>• Thalassaemia and haemoglobinopathies</li> <li>• Erythrocytosis – reactive and malignant</li> <li>• Red cell breakdown/degradation</li> <li>• Benign disorders of white blood cells</li> <li>• Thrombocytosis and thrombocytopenia</li> <li>• Haematology of conditions including pregnancy, the neonate, childhood, the elderly, infection</li> </ul> <p><u>Haematological malignancies</u></p> <ul style="list-style-type: none"> <li>• Chronic and acute leukaemia</li> <li>• Myeloproliferative disorders</li> <li>• Myelodysplastic syndrome</li> <li>• Lymphoproliferative disorders</li> <li>• Immunoproliferative disorders</li> </ul> <p><u>Coagulation disorders</u></p> <ul style="list-style-type: none"> <li>• Acquired coagulation disorders including those seen in DIC, liver disease, trauma, post-surgery, infection.</li> <li>• Hereditary coagulation factor deficiencies</li> <li>• Acquired and hereditary thrombophilia</li> <li>• Platelet dysfunction</li> </ul>
<p><b>Assessment</b></p>	<p>Assessment in this module consists of a three-hour written examination.</p> <p>The exam has two parts:</p> <ul style="list-style-type: none"> <li>• Part A has two essay questions, which should be answered in a separate answer book. Each question is worth 35 marks (70 marks in total).</li> <li>• Part B has 20 limited answer questions, all of which should be answered in the answer book provided. Each question is worth 5 marks (total 100 marks).</li> </ul>

<p><b>Learning resources</b></p>	<p><u>Reference books - the current editions of:</u></p> <p>Bain BJ, Bates I, Laffan MA. <i>Dacie and Lewis Practical Haematology</i>. Elsevier</p> <p>Bain BJ. <i>Blood Cells: A Practical Guide</i>. John Wiley &amp; Sons</p> <p>Carr JH. <i>Clinical Hematology Atlas</i>. Elsevier</p> <p>DeLoughery TG (ed). <i>Hemostasis and Thrombosis</i>. Springer International Publishing</p> <p>Greer JP, Arber DA, Glader B, List AF, Means Jr RT, Praskevas F, Rodgers GM. <i>Wintrobe's Clinical Hematology</i>. Lippincott Williams &amp; Wilkins</p> <p>Hoffbrand AV, Higgs DR, Keeling DM, Mehta AB (eds). <i>Postgraduate Haematology</i>. Wiley-Blackwell</p> <p>Hoffbrand V, Steensma DP. <i>Hoffbrand's Essential Haematology</i>. Wiley-Blackwell</p> <p>Hoffman R, Benz Jr EJ, Silberstien LE, Heslop H, Weitz J, Anatsi J. <i>Hematology: Basic Principles and Practice</i>. Elsevier</p> <p>Keohane EM, Otto CN, Walenga JM. <i>Rodak's Hematology: Clinical Principles and Applications</i>. Elsevier</p> <p>Key NS, Makris M, Lillicrap D eds. <i>Practical Hemostasis and Thrombosis</i>. John Wiley &amp; Sons doi:10.1002/9781118344729</p> <p>Kitchens CS, Kessler CM, Konkle BA, Streiff MB, Garcia DA. <i>Consultative Hemostasis and Thrombosis</i>. Elsevier</p> <p>Marder VJ, Aird WC, Bennett JS, Schulman S, White II GC. <i>Hemostasis and Thrombosis. Basic Principles and Clinical Practice</i>. Lippincott Williams and Wilkins</p> <p>Pierce A, Pittet JF. 2014. <i>Practical understanding of hemostasis and approach to the bleeding patient in the OR</i>. <i>Advances in Anesthesia</i> 32(1):1-21. doi: 10.1016/j.aan.2014.08.009</p> <p>Saba HI, Roberts HR (eds). <i>Hemostasis and thrombosis: Practical Guidelines in Clinical Management</i>. John Wiley &amp; Sons</p> <p><u>Journals</u></p> <p>American Journal of Hematology</p> <p>Archives of Pathology and Laboratory Medicine</p> <p>Australian Journal of Medical Science</p> <p>Bailliere's Clinical Haematology</p> <p>Blood</p> <p>Blood Reviews</p> <p>British Journal of Haematology</p> <p>CAP Today</p> <p>Clinical and Laboratory Haematology</p> <p>Hematology/Oncology Clinics of North America</p> <p>International Journal of Laboratory Haematology</p> <p>Journal of Clinical Pathology</p> <p>Journal of Thrombosis and Haemostasis</p> <p>Laboratory Hematology</p> <p>Lancet</p> <p>New England Journal of Medicine</p> <p>Seminars in Hematology</p> <p>Seminars in Thrombosis and Hemostasis</p> <p>Thrombosis and Haemostasis</p> <p>Thrombosis Research</p>
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	<p><u>Web-based resources (all accessed XXXX)</u></p> <p>A laboratory guide to Clinical Haematology  <a href="https://open.umn.edu/opentextbooks/textbooks/a-laboratory-guide-to-clinical-hematology">https://open.umn.edu/opentextbooks/textbooks/a-laboratory-guide-to-clinical-hematology</a></p> <p>Inherited Haemoglobin Disorders  <a href="https://www.intechopen.com/books/inherited-hemoglobin-disorders">https://www.intechopen.com/books/inherited-hemoglobin-disorders</a></p> <p>Merck Manuals  <a href="https://www.merckmanuals.com/professional/hematology-and-oncology">https://www.merckmanuals.com/professional/hematology-and-oncology</a></p> <p>Practical Haemostasis  <a href="https://practical-haemostasis.com/">https://practical-haemostasis.com/</a></p> <p>University of Prince Edward Island lectures  <a href="http://people.upei.ca/eaburto/Hematopoietic.htm">http://people.upei.ca/eaburto/Hematopoietic.htm</a></p>
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## Clinical Pathology II

Module	CLINICAL CHEMISTRY
<b>Assumed knowledge</b>	<ul style="list-style-type: none"> <li>• Sample collection and transport</li> <li>• Spectrophotometry, Beers law, electrochemistry, principles of antibody antigen interactions</li> <li>• Chemistry underpinning the various chemical assays</li> <li>• Monitoring fluid balance and blood gases</li> </ul>
<b>Aims</b>	To develop and apply expert knowledge, investigative and clinical skills relevant to the routine Clinical Chemistry laboratory.
<b>Module learning outcomes (MLO)</b>	<p>On completion of this module the candidate will be able to:</p> <ul style="list-style-type: none"> <li>(i) Discuss the factors that may impact the quality of test results</li> <li>(ii) Explain the principles of spectrophotometry, densitometry, turbidimetry, nephelometry, fluorometric assays, ion selective electrodes, osmometry and discuss the applications of these techniques to the assay of various analytes</li> <li>(iii) Explain the principles of immunoassay methods, the factors that may invalidate results and to correct these</li> <li>(iv) Discuss the principle of nucleic acid-based technologies and their role diagnosis of disease</li> <li>(v) Explain the role of quality control in chemical analytics</li> <li>(vi) Describe the significant homeostatic role carried out by electrolytes and the water, and their relationship with blood gases</li> <li>(vii) Discuss the laboratory investigation of cardiac, renal, liver and pancreatic diseases</li> <li>(viii) Discuss normal and abnormal blood glucose levels, diabetes (all forms) and laboratory assessment of these conditions</li> <li>(ix) Describe calcium metabolism, methods for measurement of calcium and the impact of disease conditions on calcium levels</li> <li>(x) Describe the metabolism of cholesterol, fatty acids and triglycerides, their role as markers of diseases</li> <li>(xi) Explain the principle and role of electrophoresis in clinical investigations of plasma proteins</li> <li>(xii) Discuss and appraise the impact of a) automation including total laboratory automation and b) point of care testing on clinical chemistry diagnostics</li> </ul>

Theme	Syllabus
<b>Preanalytical phase MLO (i)</b>	Pre-analytical, analytical and post analytical factors that may impact the quality of test results

<p><b>Instrumentation and analytical techniques</b> MLO (ii), (iii), (iv)</p>	<p><u>Photometry</u></p> <ul style="list-style-type: none"> <li>• Principles of photometric measurements and instruments used</li> <li>• Theoretical basis and applications of the following: <ul style="list-style-type: none"> <li>○ reflectance spectrophotometry</li> <li>○ densitometry</li> <li>○ turbidimetry</li> <li>○ nephelometry</li> <li>○ fluorometric assays</li> <li>○ atomic absorption</li> </ul> </li> </ul> <p><u>Immunochemistry</u></p> <ul style="list-style-type: none"> <li>• Principles and procedures used in immunochemistry including: <ul style="list-style-type: none"> <li>○ Enzyme-Linked Immunosorbent Assay (ELISA)</li> <li>○ Multiplex Immunoassay</li> <li>○ Enzyme Multiplied Immunoassay Technique (EMIT)</li> <li>○ Cloned Enzyme Donor Immunoassay (CEDIA)</li> <li>○ Luminescent Oxygen Channeling Assay (LOCI)</li> <li>○ Fluorescence Resonance Energy Transfer (FRET)</li> <li>○ Chemiluminescence Immunoassay</li> <li>○ Electrochemiluminescence Immunoassay (ECLIA)</li> </ul> </li> <li>• Sources of error in immunoassays including to high-dose hook effect, HAMA, heterophil antibodies, high dose biotin</li> </ul> <p><u>Nucleic acid-based techniques</u></p> <ul style="list-style-type: none"> <li>• Polymerase Chain Reaction (PCR): principles, methodologies and applications</li> </ul> <p><u>Automation</u></p> <ul style="list-style-type: none"> <li>• Automated chemistry analysers</li> <li>• Automated immunoassay analysers</li> <li>• Automated PCR units</li> </ul>
<p><b>Quality control (QC)</b> MLO (v)</p>	<ul style="list-style-type: none"> <li>• Westgard multi-rule system</li> <li>• Warning rule versus a rejection rule</li> <li>• External quality control programs</li> <li>• Matrix effects</li> <li>• Measurement Uncertainty MU)</li> </ul>

<b>Electrolytes and blood gases</b> <b>MLO (vi)</b>	<ul style="list-style-type: none"> <li>• Blood collection procedures, requirements and sources of error</li> <li>• Principles and techniques used in determining electrolytes and blood gases</li> <li>• Clinical interpretation of results from blood gas analysis</li> <li>• Chemical buffers</li> <li>• Serum osmolality</li> <li>• Hyponatremia, hyponatremia and the relationship to chloride and potassium</li> <li>• Euvolemia, hypovolemia, hypervolemia</li> <li>• Residual anion concentration</li> <li>• Anion gap in relation to electrolytes and blood gases</li> <li>• Potassium ions in relation to acidosis and alkalosis</li> </ul>
<b>Markers of cardiac function and injury</b> <b>MLO (vii)</b>	<ul style="list-style-type: none"> <li>• Pathology of myocardial infarction</li> <li>• The troponin complex</li> <li>• Compare the value CK-MB mass assays to Troponin T or I</li> <li>• Myoglobin as a marker</li> <li>• Impact of reperfusion and re-infarction on analytical procedures</li> <li>• Congestive Cardiac Failure and Pulmonary Embolism (BNP)</li> <li>• Limitations and pitfalls of the various analytical methods</li> </ul>
<b>Liver and pancreas function</b> <b>MLO (vii)</b>	<ul style="list-style-type: none"> <li>• Principles and limitations of methods for assessing liver enzyme levels and clinical interpretation of results</li> <li>• Principles and limitations of methods for assessing bilirubin (including delta bilirubin) levels and clinical interpretation of results</li> <li>• Demonstrate knowledge of the normal function of the pancreas</li> <li>• Principles and limitations of methods for assessing pancreatic enzyme levels and clinical interpretation of results</li> </ul>
<b>Metabolic analytes and renal function</b> <b>MLO (vii)</b>	<ul style="list-style-type: none"> <li>• Testing for urea and creatinine, sources of error, creatinine clearance</li> <li>• Estimated glomerular filtration rate (eGFR) in renal disease</li> <li>• Pathology of gout and laboratory testing for uric acid</li> </ul>
<b>Carbohydrates and diabetes</b> <b>MLO (viii)</b>	<ul style="list-style-type: none"> <li>• Pathology of diabetes mellitus types 1 and 2, and gestational diabetes mellitus</li> <li>• Testing and monitoring for hypo or hyperglycaemia</li> <li>• Haemoglobin A1c: measurement and clinical impact</li> <li>• Role of self-monitoring for glucose</li> <li>• Glucose tolerance testing in diabetic diagnosis</li> <li>• Testing for ketoacidosis and micro-albuminuria</li> <li>• Clinical effect of potassium on monitoring treatment</li> </ul>
<b>Calcium phosphate and magnesium</b> <b>MLO (ix)</b>	<ul style="list-style-type: none"> <li>• Principles of analytical methods for measurement of calcium, phosphate, and magnesium</li> <li>• Clinical interpretation of laboratory test results for calcium, magnesium and phosphates</li> </ul>
<b>Lipids and lipoproteins</b> <b>MLO (x)</b>	<ul style="list-style-type: none"> <li>• Pathology of atherosclerosis</li> <li>• Metabolic roles of fatty acids, triglycerides, phospholipids, cholesterol and HDL-in normal and disease conditions</li> <li>• Principles and applications of diagnostic tests for the various lipids</li> </ul>

<b>Proteins MLO (xi)</b>	<ul style="list-style-type: none"> <li>Principles of analytical methods for measurement of total protein and albumin</li> <li>Diagnostic value and clinical interpretation of laboratory test results for proteins</li> </ul>
<b>Point of care MLO (xii)</b>	<ul style="list-style-type: none"> <li>Rational for point of care diagnostic testing and range of analytes tested in the clinical setting</li> <li>Operational factors including instrumentation, implementation, governance, management, quality issues, training and competency determination</li> </ul>

<b>Assessment</b>	<p>Assessment in this module consists of a three-hour written examination.</p> <p>The exam has two parts:</p> <ul style="list-style-type: none"> <li>Part A has two essay questions, which should be answered in a separate answer book. Each question is worth 35 marks (70 marks in total).</li> <li>Part B has 20 limited answer questions, all of which should be answered in the answer book provided. Each question is worth 5 marks (total 100 marks).</li> </ul>
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<b>Learning resources</b>	<p><u>Reference books - the current editions of:</u></p> <p>Bishop ML, Fody EP, Van Sclen C, Mistler JM Moy M. <i>Clinical Chemistry: Principles, Techniques, and Correlations</i>. Jones and Bartlett Learning</p> <p>Gardner DG, Shoback D. <i>Greenspan's Basic &amp; Clinical Endocrinology</i>. McGraw Hill</p> <p>Holt RIG, Hanley NA. <i>Essential Endocrinology and Diabetes</i>. Wiley Blackwell</p> <p>Lippi G, Da Rin G. The Advantages and Limitations of Total laboratory Automation: A Personal Overview. <i>Clinical Chemistry and Laboratory Medicine</i> 2019; 57(6): 802–811</p> <p>Marshall WJ, Lapsey M, Day AP, Ayling RM. <i>Clinical Biochemistry: Metabolic and Clinical Aspects</i>. Churchill Livingstone</p> <p>Rifai N, Chiu RWK, Young I, Burnham CD, Wittwer CT. <i>Tietz Textbook of Laboratory Medicine</i>. Elsevier</p> <p>Rifai N, Chiu RWK, Young I, Wittwer CT. <i>Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics</i>. Elsevier</p> <p><u>Journals</u></p> <p>Australian Journal of Medical Science</p> <p>Journal of the International Federation of Clinical Chemistry and Laboratory Medicine</p> <p>Clinical Chemistry</p> <p>Medical Journal of Australia</p> <p>The New England Journal of Medicine</p>
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	<p><u>Web-based resources</u></p> <p>Abbott  <a href="https://www.corelaboratory.abbott/int/en/offerings/brands/architect">https://www.corelaboratory.abbott/int/en/offerings/brands/architect</a></p> <p>Association for Diagnostics and Laboratory Medicine  <a href="https://www.myadlm.org/">https://www.myadlm.org/</a></p> <p>Association for Molecular Pathology  <a href="https://www.amp.org/">https://www.amp.org/</a></p> <p>Australasian Association for Clinical Biochemistry and Laboratory Medicine  <a href="http://www.aacb.asn.au">www.aacb.asn.au</a></p> <p>Beckman Coulter  <a href="https://www.beckmancoulter.com/en/products/chemistry">https://www.beckmancoulter.com/en/products/chemistry</a>  <a href="https://www.beckmancoulter.com/en/products/immunoassay">https://www.beckmancoulter.com/en/products/immunoassay</a></p> <p>Diabetes Australia  <a href="https://www.diabetesaustralia.com.au/">https://www.diabetesaustralia.com.au/</a></p> <p>International Federation of Clinical Chemistry and Laboratory Medicine (IFCC)  <a href="https://ifcc.org/">https://ifcc.org/</a></p> <p>NATA  <a href="https://www.nata.com.au/">https://www.nata.com.au/</a></p> <p>National Heart Foundation  <a href="https://www.heartfoundation.org.au/">https://www.heartfoundation.org.au/</a></p> <p>National Pathology Accreditation Advisory Council (NPAAC)  <a href="https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-mpaac-index.htm">https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-mpaac-index.htm</a></p> <p>Pathology Tests Explained  <a href="https://pathologytestsexplained.org.au/">https://pathologytestsexplained.org.au/</a></p> <p>Radiometer  <a href="https://www.radiometer.com.au/">https://www.radiometer.com.au/</a></p> <p>Roche  <a href="https://diagnostics.roche.com/us/en/products/product-category/cobas-modular-platform.html">https://diagnostics.roche.com/us/en/products/product-category/cobas-modular-platform.html</a></p> <p>Royal College of Pathologists of Australasia  <a href="https://www.rcpa.edu.au/library">https://www.rcpa.edu.au/library</a></p> <p>Siemens  <a href="https://www.siemens-healthineers.com/en-au/laboratory-diagnostics">https://www.siemens-healthineers.com/en-au/laboratory-diagnostics</a></p> <p>Westgard QC  <a href="https://westgard.com/westgard-rules.html">https://westgard.com/westgard-rules.html</a></p>
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## Clinical Pathology III

<b>Module</b>	<b>TRANSFUSION SCIENCE CLINICAL MICROBIOLOGY</b>
<b>Assumed knowledge</b>	Immuno-haematology techniques and principles. Micro-organisms that are known to commonly cause infection in humans, basic laboratory techniques and clinical correlates.
<b>Aims</b>	To develop and apply expert knowledge, investigative practice and clinical skills relevant to: a) routine pre-transfusion testing and transfusion b) the identification of common infectious diseases
<b>Module learning outcomes (MLO)</b>	On completion of this module the candidate will be able to: (i) Explain the biochemical, molecular and genetic aspects of blood group systems (ii) Explain and evaluate the principles, procedures, any specific requirements, limitations, troubleshooting and effectiveness of techniques routinely performed in the Transfusion Science laboratory (iii) Interpret and explain the basis and laboratory presentation of specific clinical conditions and situations in routine transfusion practice (iv) Describe preanalytical factors which may affect the outcome of laboratory investigations for infectious disease agents (v) Describe investigative techniques employed in the routine Clinical Microbiology laboratory (vi) Describe the characteristics, epidemiology, transmission, pathogenesis and clinical significance of relevant bacteria (as listed) (vii) Discuss the optimal isolation and culture of clinically relevant bacteria from bodily fluids and tissues (as listed) (viii) Explain the mode of action and activity of antibiotics in common use and the antimicrobial resistance pathways (for the agents indicated #) (ix) Critically discuss laboratory techniques for identifying antimicrobial resistance

<b>Theme</b>	<b>Syllabus</b>
<b>Blood group systems MLO (i)</b>	<ul style="list-style-type: none"> <li>• ABO, Rh, Kell, Duffy, Kidd, P, Le, H, MNSs</li> <li>• The genetic basis for the major antigens of the known red cell blood group systems, including their gene frequencies</li> <li>• Molecular structure forming the basis of DNA-based methods and for determining the commonly used phenotypes of the ABO, Rh, Kell, Fy, Jk, MNSs systems</li> </ul>

<b>Laboratory techniques routinely used in the transfusion laboratory MLO (ii)</b>	<ul style="list-style-type: none"> <li>• Pre-transfusion blood collection requirements</li> <li>• ABO blood grouping techniques, monoclonal reagents, lectins, ABO variants and causes of ABO discrepancies</li> <li>• Rh blood grouping techniques, monoclonal reagents, and characterisation of RhD variants</li> <li>• Pre-transfusion testing: antibody screening, antibody investigations and identification, crossmatching (serological and electronic) and selection of blood products</li> <li>• Specialised techniques: DAT, elutions, red cell adsorptions, DTT, neutralisations, enzyme methods, HPC absorptions</li> <li>• Transfusion reaction investigations</li> <li>• Strategies and standards applied to reporting of laboratory results and other findings</li> </ul>
<b>Clinical practice in transfusion science MLO (iii)</b>	<ul style="list-style-type: none"> <li>• Haemolytic transfusion reactions</li> <li>• Febrile, non-haemolytic transfusion reactions</li> </ul>
<b>Pre-analytical factors to be considered with infectious disease samples MLO (iv)</b>	<ul style="list-style-type: none"> <li>• Management of clinical and patient information</li> <li>• Collection, transport and handling of samples</li> <li>• Potential for contamination by regional flora</li> <li>• Transportation and storage of samples</li> </ul>
<b>Laboratory techniques to identify infectious agents MLO (v)</b>	<ul style="list-style-type: none"> <li>• Gram staining</li> <li>• Growth media in common use including incubation equipment and conditions and quality control</li> <li>• Routine bench tests</li> <li>• Kit and similar tests</li> <li>• Molecular equipment and common applications <ul style="list-style-type: none"> <li>○ cartridge-based PCR units</li> <li>○ commercially available kit-based tests</li> </ul> </li> <li>• Role and applications of emergent identification platforms <ul style="list-style-type: none"> <li>○ MALDI-TOF mass spectrometry</li> </ul> </li> </ul>
<b>Bacteriology MLO (vi)</b>	<p><i>Characteristics of the common clinically relevant bacteria (as listed)</i></p> <ul style="list-style-type: none"> <li>• Clinical significance, epidemiology and transmission</li> <li>• Direct examination, isolation and culture</li> <li>• Identification and antimicrobial susceptibility</li> <li>• Interpretation and reporting</li> <li>• Special factors including safety, notification requirements</li> </ul> <p><i>Common clinically relevant bacteria</i></p> <ul style="list-style-type: none"> <li>• Gram-positive <ul style="list-style-type: none"> <li>○ <i>Staphylococcus aureus</i>, <i>S. saprophyticus</i>, <i>S. epidermidis</i></li> <li>○ <i>Streptococcus</i> (<i>B-hemolytic groups A and B</i>, and <i>S. pneumoniae</i>)</li> <li>○ <i>Enterococcus faecalis</i> and <i>E. faecium</i></li> <li>○ <i>Corynebacterium species</i> (<i>general features</i>)</li> <li>○ <i>Bacillus cereus</i></li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>• Gram-negative <ul style="list-style-type: none"> <li>○ <i>Neisseria gonorrhoeae</i> and <i>N. meningitidis</i></li> <li>○ <i>Moraxella catarrhalis</i></li> <li>○ <i>Acinetobacter baumannii</i> and <i>Stenotrophomonas maltophilia</i></li> <li>○ <i>Enterobacteriaceae</i></li> <li>○ <i>Aeromonas hydrophila</i></li> <li>○ <i>Vibrio cholerae</i>, <i>V. parahaemolyticus</i>, <i>V. vulnificus</i></li> <li>○ <i>Pseudomonas aeruginosa</i></li> <li>○ <i>Bordetella pertussis</i></li> <li>○ <i>Haemophilus influenzae</i>, <i>H. parainfluenzae</i></li> <li>○ <i>Campylobacter jejuni</i></li> </ul> </li> <li>• Anaerobic bacteria <ul style="list-style-type: none"> <li>○ <i>Clostridium perfringens</i></li> <li>○ <i>Bacteroides fragilis</i> group</li> <li>○ <i>Peptostreptococcus anaerobius</i></li> </ul> </li> </ul>
<b>Laboratory investigation of common infectious disease by sample site MLOs (vii)</b>	<ul style="list-style-type: none"> <li>• Blood</li> <li>• CSF</li> <li>• Body fluids and tissue samples</li> <li>• Wounds: skin and soft tissue infection</li> <li>• Genital tract</li> <li>• Eyes, ears, nose, throat, upper respiratory tract</li> <li>• Lower respiratory tract</li> <li>• Urinary tract</li> <li>• Gastrointestinal tract</li> <li>•</li> </ul>
<b>Antimicrobial agents and resistance mechanisms (where indicated #) MLO (viii)</b>	<ul style="list-style-type: none"> <li>• <math>\beta</math>-lactam antibiotics (common penicillins, cephalosporins, carbapenems) #</li> <li>• B-lactam inhibitors (clavulanate, sulbactam, tazobactam)</li> <li>• Aminoglycosides (gentamicin, tobramycin and amikacin)</li> <li>• Tetracyclines (tetracycline, minocycline)</li> <li>• Macrolides (erythromycin, azithromycin, clarithromycin)</li> <li>• Sulphonamides/Trimethoprim</li> <li>• Quinolones (nalidixic acid, norfloxacin, ciprofloxacin)</li> <li>• Multi-resistant bacteria (MRSA, VRE, CRE) and their identification</li> </ul>
<b>Antimicrobial susceptibility / resistance testing MLO (ix)</b>	<ul style="list-style-type: none"> <li>• Disc diffusion procedures (Clinical &amp; Laboratory Standards Institute [CLSI], European Committee on Antimicrobial Resistance [EUCAST])</li> <li>• <math>\beta</math>-lactamase detection</li> <li>• Microbroth dilution</li> <li>• Automation</li> <li>• Gradient strip methods</li> <li>• Quality control</li> </ul>
<b>Assessment</b>	<p>Assessment in this module consists of a three-hour written examination.</p> <p>The exam has two parts:</p> <ul style="list-style-type: none"> <li>• Part A has two essay questions, which should be answered in a separate answer book. Each question is worth 35 marks (70 marks in total).</li> <li>• Part B has 20 limited answer questions, all of which should be answered in the answer book provided. Each question is worth 5 marks (total 100 marks).</li> </ul>

<p><b>Learning resources</b></p>	<p><u>Reference book - the current edition of:</u>  Harmening DM. <i>Modern Blood Banking &amp; Transfusion Practices</i>. FA Davis  Simon TL, Gehrie EA, McCullough J, Roback JD, Snyder EL. <i>Rossi's Principles of Transfusion Medicine</i>. Wiley  Bush K, Jacoby GA. 2010. <i>Updated Functional Classification of <math>\beta</math>-Lactamases</i>. <i>Antimicrobial Agents and Chemotherapy</i> 54:969-76. doi: 10.1128/AAC.01009-09  Bush K. 2018. <i>Past and Present Perspectives on <math>\beta</math>-Lactamases</i>. <i>Antimicrobial Agents and Chemotherapy</i> 62(10):e01076-18. doi: 10.1128/AAC.01076-18  Carroll KC, Pfaller MA, Karlowsky JA, Landry ML, McAdam AJ, Patel R, Pritt BS (eds). <i>Manual of Clinical Microbiology, Multi-Volume</i>. ASM Press  De Oliveira DMP, Forde BM, Kidd TJ, Harris PNA, Schembri MA, Beatson SA, Paterson DL, Walker MJ. 2020. <i>Antimicrobial Resistance in ESKAPE Pathogens</i>. <i>Clinical Microbiology Reviews</i>: 33:10.1128/cmr.00181-19  Finch RG, Greenwood D, Norrby SR, Whitely RJ. <i>Antibiotics and Chemotherapy: Anti-infective Agents and Their Use in Therapy</i>. Saunders Elsevier  Jacoby GA. 2009. <i>AmpC <math>\beta</math>-lactamases</i>. <i>Clinical Microbiology Reviews</i> 22:161-82. doi: 10.1128/CMR.00036-08  Leber AL (ed). <i>Clinical Microbiology Procedures Handbook</i>. ASM Press  Tille P. <i>Bailey &amp; Scott's Diagnostic Microbiology</i>. Elsevier  Walsh C, Wencewicz T. <i>Antibiotics: Challenges, Mechanisms, Opportunities</i>. ASM Press</p> <p><u>Journals</u>  Australian Journal of Medical Science  Clinical Microbiology Reviews  Journal of Clinical Microbiology  Journal of Clinical Pathology  Lancet  New England Journal of Medicine  Transfusion  Transfusion Medicine  Transfusion Medicine Reviews  Vox Sanguinis</p> <p><u>Web-based resources</u>  ANZSBT – Australian &amp; New Zealand Society of Blood Transfusion  <a href="http://www.anzsb.org.au">http://www.anzsb.org.au</a>  ARCBS – Australian Red Cross Blood Service  <a href="http://www.redcross.org.au">http://www.redcross.org.au</a>  CDCI  <a href="https://www.cdc.gov/">https://www.cdc.gov/</a>  CLSI  <a href="https://clsi.org/standards/products/free-resources/access-our-free-resources/">https://clsi.org/standards/products/free-resources/access-our-free-resources/</a>  Communicable diseases Intelligence  <a href="https://www1.health.gov.au/internet/main/publishing.nsf/Content/cda-pubs-cdi-cdicur.htm">https://www1.health.gov.au/internet/main/publishing.nsf/Content/cda-pubs-cdi-cdicur.htm</a>  EUCAST  <a href="https://www.eucast.org/">https://www.eucast.org/</a>  Royal College of Pathologists of Australasia  <a href="https://www.rcpa.edu.au/library">https://www.rcpa.edu.au/library</a>  Therapeutic Guidelines: Antibiotic. Melbourne: Therapeutic Guidelines Limited  <a href="https://www.tg.org.au">https://www.tg.org.au</a></p>
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## Clinical Pathology IV

<b>Module</b>	<b>ADVANCED PRACTICE LEADERSHIP, MANAGEMENT AND SUPERVISION</b>
<b>Aims</b>	To explore innovative technologies and to describe the knowledge and attributes required for leadership as a clinical scientist and clinical pathology laboratory manager.
<b>Module learning outcomes</b>	On completion of this module the candidate will be able to: <ul style="list-style-type: none"> <li>(i) Critically evaluate relevant research to predict and prepare for emerging laboratory practices and directional shifts</li> <li>(ii) Discuss the components and requirements of a quality management system with reference to the role of internal and external Quality Control (QC) and Quality Assurance (QA)</li> <li>(iii) Discuss the models in use and provision of pathology services in Australia</li> <li>(iv) Describe the principles of pathology laboratory accreditation and the procedures necessary to gain and maintain accreditation</li> <li>(v) Formulate and evaluate operational requirements in the Clinical Pathology laboratory including occupational health and safety, standard operating procedures, laboratory information systems and all records and databases</li> <li>(vi) Specify the attributes necessary for a leadership and supervisory role as a clinical scientist and laboratory manager</li> </ul>

<b>Theme</b>	<b>Syllabus</b>
<b>Evidence-based practice in Clinical Pathology MLO (i)</b>	<ul style="list-style-type: none"> <li>• Applying research principles to ensure diagnostics are fit for purpose and to address and resolve issues in practice</li> <li>• The Evidence-Based Practice (EBP) process</li> <li>• Establishment and validation of new methods</li> <li>• Applications and limitations of statistical analyses used in the clinical laboratory</li> <li>• Anticipating, evaluating and responding to strategic direction shifts</li> </ul>
<b>Quality management MLO (ii)</b>	<ul style="list-style-type: none"> <li>• Quality management components of ISO15189 in pathology laboratories</li> <li>• Quality control, quality assurance and quality management</li> <li>• Standardisation</li> <li>• Quality audit processes</li> </ul>
<b>Pathology in Australia MLO (iii)</b>	<ul style="list-style-type: none"> <li>• The organisation and delivery of pathology services</li> <li>• The public pathology model</li> <li>• The private pathology model</li> <li>• Definitions and operational roles of personnel in the laboratory workforce</li> <li>• The oversight hierarchy for Laboratory Medicine</li> <li>• The function and responsibilities of NPAAC</li> <li>• The function and responsibilities of NATA</li> <li>• State and Federal responsibilities</li> <li>• Medicare funding of pathology</li> </ul>

<p><b>Practice and accreditation standards</b> MLO (iv)</p>	<ul style="list-style-type: none"> <li>• Australian Standards for operation of pathology laboratories</li> <li>• ISO15189 structure, components, requirements</li> <li>• The accreditation process</li> <li>• NATA accreditation requirements and processes</li> <li>• Application of ISO15189 by NATA</li> <li>• Non-conformance</li> <li>• The role and impact of TGA and IVD issues for the Clinical Pathology laboratory</li> </ul>
<p><b>Laboratory operations</b> MLO (v)</p>	<p><u>Functional requirements</u></p> <ul style="list-style-type: none"> <li>• Ethical practice in collection, usage, storage and reporting confidential information</li> <li>• Occupational Health and Safety (OHS) obligations of employers and employees</li> <li>• Legislation and codes of practice</li> <li>• Hierarchy of responsible persons</li> <li>• Promotion of safe working practices</li> <li>• Specific operational requirements in the Clinical Pathology laboratory</li> <li>• MSDS and Standard Operational Procedures (SOP)</li> <li>• Processes and requirements for workplace inspections</li> </ul> <p><u>Risk assessment and risk management</u></p> <ul style="list-style-type: none"> <li>• Implementing safety controls to minimize risk</li> <li>• Waste management and waste reduction, solvent and reagent recycling</li> <li>• Identification and management of chemical, biological, genetic and equipment hazards, environmental issues</li> <li>• Green laboratories – ISO standards</li> <li>• Federal and state waste protocols</li> </ul>
<p><b>Leadership and supervision in the Clinical Pathology laboratory</b> MLO (vi)</p>	<p><u>Principles of Leadership</u></p> <ul style="list-style-type: none"> <li>• Team dynamics, development and motivation in the laboratory setting</li> <li>• Education and training for co-workers, support personnel, students</li> <li>• Engagement with Continuing Professional Development (CPD) for self and workforce</li> <li>• Involvement with professional societies, activities, conferences and symposia</li> </ul> <p><u>Managing people</u></p> <ul style="list-style-type: none"> <li>• Communication strategies, facilitating group dynamics, conflict resolution, workplace harassment and bullying</li> <li>• Identifying and resolving errors</li> <li>• Performance Management Techniques</li> <li>• ‘Managing change’ processes</li> <li>• Human resource management: Recruiting, Hiring, Evaluating</li> <li>• Equal Employment Opportunity (EEO) Legislation and obligations</li> </ul> <p><u>Managing resources</u></p> <ul style="list-style-type: none"> <li>• Financial probity</li> <li>• Time Management Skills</li> <li>• Lean management principles in pathology</li> </ul>

<b>Assessment</b>	<p>Assessment in this module consists of a three-hour written examination.</p> <p>The exam has two parts:</p> <ul style="list-style-type: none"> <li>• Part A has two essay questions, which should be answered in a separate answer book. Each question is worth 35 marks (70 marks in total).</li> <li>• Part B has 20 short answer questions, all of which should be answered in the answer book provided. Each question is worth 5 marks (total 100 marks).</li> </ul>
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<b>Learning resources</b>	<p><u>Reference books – the current edition of:</u> McPherson RA, Pincus MR. <i>Henry's Clinical Diagnosis and Management by Laboratory Methods</i>. Elsevier Health Sciences</p> <p><u>Journals</u> American Journal of Clinical Pathology Australian Journal of Medical Science New Zealand Journal of Medical Laboratory Science British Medical Journal Clinical Laboratory Medicine</p> <p><u>Web-based resources</u> Public Pathology Australia <a href="https://publicpathology.org.au/">https://publicpathology.org.au/</a> Australian Pathology <a href="https://www.australianpathology.com/">https://www.australianpathology.com/</a> National Pathology Accreditation Advisory Council (NPAAC) <a href="https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-npaac-index.htm">https://www1.health.gov.au/internet/main/publishing.nsf/Content/health-npaac-index.htm</a> NATA <a href="http://www.nata.com.au/">http://www.nata.com.au/</a> TGA and IVD <a href="http://www.tga.gov.au/industry/ivd-regulatory-requirements.htm">http://www.tga.gov.au/industry/ivd-regulatory-requirements.htm</a> Pathology Funding Agreement (2012) MBS Schedule Category 6 – Pathology WorkSafe Australia <a href="https://www.safeworkaustralia.gov.au/">https://www.safeworkaustralia.gov.au/</a></p>
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