



THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS

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Dermatology Australasia and Australasian College of Dermatologists

**Course outline:
Infections, Infestations and Bites
2026**



Dermatology
AUSTRALASIA

1. Course information

1.1 Course aims

Infections are a common cause of skin rashes in children and adults.

Bacteria, most often *S. aureus*, cause common skin rashes such as impetigo, folliculitis, boils and cellulitis. All of these skin and soft tissue infections have characteristic appearances.

Viruses are also a very common cause of skin rashes. Herpes simplex most often causes simple cold sores and genital lesions however, it may occasionally cause widespread rashes. Warts and molluscum contagiosum are very common in children. In adults however, they are less common on skin generally but present as sexually transmitted infections.

Many of the classic viral exanthemata such as measles and varicella are now rarely seen due to immunisation, however they still do occur. It is therefore still important to be able to recognise them as there are a number of other conditions that may simulate them.

Many of the viral exanthemata we see now are due to enteroviridae. Parvovirus, however, is a relatively common cause of rashes which are associated with arthritis in adults.

Fungal infections of skin are often difficult to diagnose. Dermatophyte fungi produce tinea. The lay term for this is "ring worm" and suggests an annular rash. This is often true however, tinea can produce confusing, non-specific scaly rashes which can be difficult to diagnose. Tinea can also affect nails and hair, causing persistent nail dystrophy and hair loss.

Infestations can also cause skin rashes. The commonest are head lice and scabies. Head lice are endemic in primary school children. Scabies is much less common in urban populations but often seen in indigenous communities where it causes a major degree of morbidity.

This course covers the most commonly seen conditions in General Practice.

1.2 Learning objectives (LOs)

After completing this module, you should be able to:

1. Assess cases of infections, infestations and bites in your general practice
2. Determine related differential diagnoses
3. Recommend a range of treatment options
4. Generate the most appropriate treatment/management plan
5. Describe the risks of adverse outcomes associated with the various practical treatment options
6. Assess when to refer a patient on to a specialist dermatologist

1.3 Learning and teaching activities

The course is organised into seven components.

- **Pre-learning activities:** are completed prior to starting the course and include a self-rating of your current skills and knowledge about Infections, Infestations and Bites.
- **Self-paced online modules:** There are four self-paced online modules. At the end of each module participants will need to complete the Topic Scenarios which consist of case studies with T/F or multiple choice questions.
 - Bacterial infections
 - Viral infections and cutaneous manifestations
 - Fungal infections
 - Skin infestations and bites
- **Case Discussion Forum:** This is a forum where students list differential diagnosis, treatment, and management options on various case studies. Lecturers and other students can provide feedback for discussion. This is an interactive course component.
- **2 Case Study Submissions:** In approximately 500 – 600 words students need to submit 2 cases from their practice that are relevant to Infections, Infestations and Bites. They need to present:
 - Clinical finding of the case
 - Any investigations
 - Description of the management
 - Photos of the clinical case (if possible)
 - Summary of the case – therefore a reflection of the main learning points; how the patient was managed, rationale as to why this particular patient was managed in this way or in retrospect what could you have done differently and any other significant learning points. Please include a reference to a literature review.
- **Webinars:** 2 live webinars are held as part of this course in Trimester 2. Attendance or watching the recordings are mandatory. Attendance is preferred, as it is an opportunity to interact with your lecturer and colleagues.
- **Final Assessment:** The final assessment for the subject is an online 60-minute examination with 33 case-based questions.
- **Post-course Self Reflection:** completed after starting the course and includes a self-rating of your acquired skills and knowledge about Infections, Infestations and Bites.

Clinical scenarios are the main teaching and assessment tool across all learning modes of the course. They illustrate the essential content in the online modules. They are used to assess the application of knowledge and skills in the end-of-topic tests and final examination.

2. Course Structure and Outline

CPD Hours

	Total Hours	Educational Activities	Performance Review	Outcome Measurement
RACGP CPD Hours	26	16	8	2
ACRRM PDP Hours	26	16	8	2

You can enroll in this course at any time to access the course material. This course is delivered over a 16 - week period and is self-paced.

Please be advised that the webinars are only run in Trimester 2 of each year and enrolment in this Trimester is thus encouraged.

The course consists of a total of approximately 24 hours of student effort. Here is a general overview of how long items may take:

- 2 hour orientation/getting started
- 13 hours online learning
- 2 hours live webinar
- 2 hours Case Discussion Forum
- 4 hours Case Study Submission
- 1 hours Final Online Exam
- 2 hours Additional Reading

1. Bacterial infections	<ul style="list-style-type: none">• Overview• Impetigo• Folliculitis and boils• Paronychia• Cellulitis• Otitis externa
2. Viral infections and cutaneous manifestations	<ul style="list-style-type: none">• Warts• Molluscum contagiosum• Herpes simplex• Herpes zoster• Varicella• Erythema Infectiosum (Fifth Disease)• Hand, foot and mouth disease

3. Fungal infections	<ul style="list-style-type: none"> • Overview • Tinea • Tinea corporis • Tinea cruris • Tinea pedis • Onychomycosis • Tinea incognito • Tinea manuum • Tinea capitis • Tinea faciei (tinea barbae) • Pityriasis versicolor • Pityrosporum folliculitis • Candida Albicans
4. Skin infestations and bites	<ul style="list-style-type: none"> • Overview • Scabies • Crusted scabies • Pediculosis • Pediculus humanus var. capitis • Pediculus humanus var. corporis • Phthirus pubis • Swimmers itch • Cutaneous Lava Migrans • Bites (overview) • Papular urticaria • Flea bites • Bed bugs • Ross River Fever

3. Assessment

3.1 Assessment tasks

Tasks	Task Description	Time	Weighting
Quizzes & Practice Scenarios	Complete the 4 topics and associated activities such as short diagnostic quizzes and practice scenarios.	At the end of the relevant topics	Need to pass to proceed
Webinar	Attend the live or view the recorded webinar		Compulsory to complete
Case Discussion Forum	Reply to at all the available cases	Throughout enrolment	10%
Case Study Submission x 2	500 words on relevant IIB case	No later than 2 weeks before Trimester end	75% pass mark 40% weighting
Final Online Exam	A mark equivalent to 75% of the total possible mark for the exam must be obtained to be considered to have passed the exam.	After completing the content, 60 minutes	75% pass mark 50% weighting

3.2 Academic integrity, referencing and plagiarism

Be sure to provide a list of references whenever you draw on someone else's words, ideas or research to inform your own work. Not referencing other people's work can constitute plagiarism.

Please read the ['ACD Academic Misconduct policy.'](#) This policy is available on the ACD Website.

4. Readings and resources

Reading and Resources for examinable material will be provided within the course content. Some extended readings and resources need to be independently sourced.

5. Administrative matters

Please see our Terms and Conditions [here](#).

For further information or questions about the course, please contact enquiries@dermatologyaustralia.com.au.

The Australasian College of Dermatologists complies with the requirements of the Federal Privacy Act and the National Privacy Principles. A full copy of the College's privacy policy is available [here](#).

Acknowledgements

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- Dr Alexis Lara Rivero

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- Dr Benjamin Carew
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- Dr Simon Lee
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- Dr Adam Sheridan
- Associate Professor Peter Soyer

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