



Malgorzata Karolina Mikulska

Associate professor

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Education and training

2008

Specialist in Infectious Disease

The role of donor type on the incidence of infectious complications after HSCT - 50/50 e lode University of Genova - Genova - IT

2004

Medical Doctor Excellent with honor Medical University of Warsaw - Warsaw - PL

Academic experience

2015 - ONGOING

Associate Professor of Infectious Diseases University of Genova - Genova - IT

2011 - 2015

Research Fellow in Infectious Diseases

University of Genova - Genova - IT

2010 - 2013

PhD training Università Cattolica - Rome - IT

Work experience

2015 - ONGOING

Associate Professor of Infectious Diseases

University of Genoa and Ospedale Policlinico San Martino - IRCCS - Genova - IT

2011 - 2015

Research Fellow in Infectious Diseases

University of Genoa - Genova - IT

2008 - 2011

Malgorzata Karolina Mikulska curriculum vitae

Consultant in Infectious Diseases

San Martino University Hospital - Genova - IT

2005 - 2008

Resident in Infectious Disease

Univerity of Genova and San Martino University Hospital - Genova - IT

Language skills

English

Polish Mother tongue **Italian** Proficient **French** Independent

Proficient University of Cambridge Certificate of Proficiency in English in December 1999

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Teaching activity

I teach Infectious Diseases in the following courses: MD training at the University of Genova Residency training in Infectious Diseases at the University of Genova BA training in *Audioprostheses Techniques* at the University of Genova BA training in *Professional Education* at the University of Genova BA training in Nursing at the University of Genova

Research interests

My principal areas of expertise are infections in immunocompromised patients, in particular in allogeneic haematopoietic stem cell transplant (HSCT) recipients and patients with haematological disorders, and invasive fungal infections.

In particular, my clinical research focus on epidemiology, prevention and treatment of bacterial, fungal and viral infections in various immunocompromised populations; the use of indirect markers of invasive fungal infections; and antimicrobial stewardship.