



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™
EL PASO

Paul L. Foster School *of* Medicine

Cardiovascular Intensive Care Unit

Contents

Clerkship Description	2
Rotation Overview	2
Clerkship goals.....	2
Assessment	3
Required Reading/Resources.....	6
Required Expectations	6
Op-Log Policy.....	6
Society for Critical Care Medicine Modules.....	7
Grading and Evaluation.....	7
Mid-Clerkship Review	7
Preparation for Teaching	11
Contacts	11

CVICU Selective for MS IV students

Clerkship Description

Cardiovascular disease is the leading cause of mortality in the United States and represents a significant proportion of diagnoses in the internal medicine out-patient service. Understanding the principles of diagnosis and management of the most common cardiovascular diseases is essential training for the general internist. The goal of the Cardiovascular (CV) selective is to give students the opportunity to develop basic skills in evaluation and treatment of patients with cardiovascular disease through exposure to cardiology in the critical care setting with a wide variety of diagnostic and therapeutic cardiovascular procedures.

Rotation Overview

The CV selective is open to medical students in the 4th year of training.

The student should pick up the CV selective curriculum and rotation schedule from the cardiology secretary at least the day before the rotation starts. The student must review the curriculum prior to the rotation.

Clerkship content and Instructional Methods

1. CVICU bedside rounds and case discussion
2. ECG reading sessions
3. Stress test observation and reading sessions
4. Observation of Catheterization lab procedures
5. Reading and literature search assignments

Clerkship goals

During the rotation, the student will be exposed to the following common areas of cardiology:

- Diagnosis and management of chest pain
- Strengths and limitations of noninvasive and invasive CV tests
- Diagnosis and management of acute coronary syndromes
- Diagnosis and management of myocarditis, cardiomyopathies and heart failure
- Diagnosis and management of pericarditis and pericardial tamponade
- Diagnosis and management of atrial and ventricular tachyarrhythmias
- Diagnosis of bradyarrhythmias and indications for permanent pacing
- Diagnosis and management of Mitral & Aortic valvular diseases
- Diagnosis and management of complications of endocarditis including antibiotic prophylaxis
- Diagnosis and management of dyslipidemia
- Preoperative evaluation and care for non-cardiac surgery
- Diagnosis and management of aortic aneurysms and dissection
- Diagnosis and management of peripheral vascular disease

- Classification and management of hypertension and hypertensive emergencies

In the tables below, the principal learning objectives for each of the eight UME competencies are outlined. The abbreviations for the type of learning environment and evaluation method are defined below.

Learning Environments

CVICU Cardiovascular Intensive Care

DD Didactic learning opportunities

ECG ECG sessions

ECHO Echocardiogram sessions

STRESS Stress Tests

CATH Catheterization Rounds

Evaluation Methods

GA Global assessment which will include clinical evaluation by the faculty, cardiology fellows and residents

Assessment

At the end of the CVICU Selective rotation, a student will be able to

1. Patient Care

Objective	Learning Environments	Evaluation Methods
Perform a comprehensive history and physical examination using information from families, old records and private physicians as needed (PGO 1.1, 4.1, 4.2)	CC	GA
Clearly document patient management plans and any changes in the patient's condition in the medical record (PGO 1.7)	CC	GA

2. Medical Knowledge

Objective	Learning Environments	Evaluation Methods
Demonstrate basic knowledge of the etiology, pathophysiology, clinical manifestations, diagnostic evaluation findings and appropriate management for cardiovascular disorders (PGO 2.1, 2.2, 2.3)	CC, ECG, ECHO, STRESS, CATH	GA

Demonstrate basic understanding of risk factor modification for CAD/PAD and the management of acute coronary syndromes, acute aortic syndromes, cardiac arrhythmias, valvular heart disease, decompensated heart failure and other cardiovascular diseases (PGO 2.4, 2.5, 1.6, 1.8)	CC, ECG, ECHO, STRESS, CATH	GA
---	-----------------------------	----

3. Practice-Based Learning and Improvement

Objective	Learning Environments	Evaluation Methods
Use feedback and self-evaluation in order to improve performance (PGO 3.1, 3.3, 8.5)	CC, ECG, ECHO, STRESS, CATH	GA
Enhance learning by reading the required materials and articles provided (PGO 3.4)	CC, ECG, ECHO, STRESS, CATH	GA
Use the medical literature search tools in the library to find papers relevant to patient care (PGO 2.3, 3.4)	CC	GA

4. Systems -Based Learning

Objective	Learning Environments	Evaluation Methods
Incorporate cost-effectiveness into patient care decisions i.e. insurance /reimbursement issues (PGO 6.3)	CC	GA
Assist in the development of systems' improvement if problems are identified (PGO 3.2)	CC	GA
Assist in determining the root cause of any errors and identify methods for avoiding such errors in the future (PGO 3.5)	CC	GA

5. Professionalism

Objective	Learning Environments	Evaluation Methods
Treat all patients , health care provider and clinic personnel with respect (PGO 5.1)	CC, ECG, ECHO, STRESS, CATH	GA
Maintain a professional appearance at all times(PGO 5.1, 5.3)	CC, ECG, ECHO, STRESS, CATH	GA
Maintain patient confidentiality at all times (PGO 5.5, 5.2)	CC, ECG, ECHO, STRESS, CATH	GA
Be responsible and reliable at all times (PGO 5.3, 5.7)	CC, ECG, ECHO, STRESS, CATH	GA

Acknowledge errors and determine how to avoid future mistakes (PGO 5.3, 3.2)	CC, ECG, ECHO, STRESS, CATH	GA
--	-----------------------------	----

6. Interpersonal and Communication skills

Objective	Learning Environments	Evaluation Methods
Clearly communicate histories, exam findings, and all patient information to the faculty and inform the faculty in a timely fashion of any change in status of a patient or problem (PGO 4.2, 1.5, 8.1)	CC	GA
Communicate accurately and compassionately with patients and their families (PGO 4.1)	CC	GA

7. Interprofessional Collaboration

Objective	Learning Environments	Evaluation Methods
Consistent demonstration of core values evidenced by working together, aspiring to and wisely applying principles of altruism, excellence, caring, ethics, respect, communication, [and] accountability to achieve optimal health and wellness in patients (PGO 7.2)	CC	GA
Place the interests of patients at the center of interprofessional health care delivery. (PGO 7.2, 7.3)	CC	GA
Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services (PGO 7.1, 7.2, 2.5)	CC	GA

8. Personal and Professional Development

Objective	Learning Environments	Evaluation Methods
Demonstrate ongoing self-assessment of personal knowledge and correction of deficiencies. (PGO 8.5, 3.1)	CC	GA

Use feedback from external sources to further identify personal knowledge gaps and learning needs. (PGO 3.3, 8.5)	CC	GA
Integrate newly acquired knowledge and technologies into clinical and research environments. (PGO 8.5, 2.3, 2.6)	CC	GA

Required Reading/Resources

1. Mukherjee D (ed). Cardiology Pocketbook. Germany, Borm Bruckmeier Publishing LLC, 2011
2. Mukherjee D (ed). ECG Cases pocket book. Germany, Borm Bruckmeier Publishing LLC

Required Expectations:

1. Attendance /Punctuality. Call the CV secretary Ms. Georgina Grado or MSIII coordinator Ms. Marissa Tafoya to report acute illness or personal/family emergency necessitating absence.
Missed days will be managed per Common Clerkship Policies.
2. Attendance at all scheduled sessions
3. Professional behavior at all times
4. Completion of reading and literature search assignments in a timely manner
5. Attendance at the Internal Medicine Core conferences daily at noon
6. Ability to identify common cardiac emergencies and formulate a plan for their management.
7. Clerkship objectives identify the types of patient conditions students are expected to encounter as part of the clerkship.
8. **Five History and Physicals will need to be documented in appropriate form and presented to the attending.**
9. *****Please do not bring food or drink (s) into the areas where studies are either being conducted or interpreted.**

Op-Log Policy

1. Students will be required to complete Op-Log entries on all patients with whom they have clinical contact; e.g., take all, or significant part of the patient's history, conduct a physical examination, perform or assist in diagnostic or treatment procedure, write orders, participate in treatment decisions, etc. A student will also be expected to complete Op-Log entries on patients seen with an attending or resident where clinical teaching and learning through observation is an explicit goal of the encounter.
2. Students will document each problem/diagnosis addressed by the student at the time of the encounter; e.g., if a patient has the following diagnoses listed on his/her record—DM type 2, hypertension, and osteoarthritis, but the student only addresses the OA during the encounter, OA is the only problem that would be recorded in Op-Log for that encounter.
3. **Students are expected to record their encounters in OP-Log on at least a weekly basis.** Regardless of where the assessment falls in a week, students must have their Op-Log recordings up-to-date at least 24 hours prior to scheduled mid-block of clerkship formative assessment and 24 hours prior to the final end of block or clerkship assessment. For hospitalized patients, a student will complete an entry at the time of patient discharge OR when the student's responsibility for caring for a patient ends. Timely, complete, and accurate clinical encounter Op-log

entries will be a component of the clerkship assessment. **Students who do not meet expectations in the documentation of their clinical experiences will not be eligible for “Honors” designation.**

4. Students will not document “incidental” patient-encounters. Routine follow-up visits with hospitalized patients do not need to be documented in Op-log (see #3 above).

5. We expect that students will document a minimum of five encounters during this selective. Please note that these are minimum/mandatory expectations.

a. The five required minimum encounters must include the following at the level of assist or manage:

1. Chest Pain Evaluation or Acute Coronary Syndrome
2. Dyspnea/shortness of breath

b. . In rare circumstances it may be necessary to assign students computerized cases, simulations, or special readings to achieve objectives that are not being met through actual patient care.

Society for Critical Care Medicine Modules

Students will be given access to SCCM adult learning modules. A minimum of eight (8) modules must be completed as assigned.

Optional

1. Didactic presentations to the CVICU/Cardiology group
2. Journal club presentation

Grading and Evaluation

1. A formal evaluation and verbal discussion with the student will be performed at mid-clerkship and at the end of the rotation. Student evaluations are written with input from the cardiology attending, nursing staff, patients or their families.
2. Students will also be required to evaluate faculty at the end of the rotation.

Mid-Clerkship Review

1. Cardiology Attending will conduct this and the student will be scheduled by the coordinator in his office.
2. This mid-point review will specifically focus on strengths and weaknesses and a plan to optimize CVICU selective experience.
3. Mid-clerkship assessment form

MS4 Mid-Clerkship Assessment v.1 ✕

Knowledge for Practice

Can independently apply knowledge to identify problems

N/A Needs Improvement Pass Honors

Patient Care and Procedural Skills

Addresses patient's agenda

N/A Needs Improvement Pass Honors

Completes an appropriate history

N/A Needs Improvement Pass Honors

Exam is appropriate in scope

N/A Needs Improvement Pass Honors

Identifies pertinent physical findings

N/A Needs Improvement Pass Honors

Develops a treatment plan appropriate to the patient and based on up-to-date scientific evidence.

N/A Needs Improvement Pass Honors

Appropriately documents findings.

N/A Needs Improvement Pass Honors

Independently performs exam with proper technique.	<input type="radio"/> N/A	<input type="radio"/> Needs Improvement	<input type="radio"/> Pass	<input type="radio"/> Honors
Interpersonal and Communication Skills				
Communicates effectively with patients and families across a broad range of socio-economic and cultural backgrounds.	<input type="radio"/> N/A	<input type="radio"/> Needs Improvement	<input type="radio"/> Pass	<input type="radio"/> Honors
Presentations to faculty or resident are organized.	<input type="radio"/> N/A	<input type="radio"/> Needs Improvement	<input type="radio"/> Pass	<input type="radio"/> Honors
Practice-Based Learning and Improvement				
Demonstrates knowledge of current peer-reviewed literature in relation to patient management.	<input type="radio"/> N/A	<input type="radio"/> Needs Improvement	<input type="radio"/> Pass	<input type="radio"/> Honors
Takes the initiative in increasing clinical knowledge and skills; for example, identifies a learning issue on rounds or in the OR and reports back to the team/resident.	<input type="radio"/> N/A	<input type="radio"/> Needs Improvement	<input type="radio"/> Pass	<input type="radio"/> Honors
Systems-Based Practice				
Effectively utilizes medical care systems and resources to benefit patient health.	<input type="radio"/> N/A	<input type="radio"/> Needs Improvement	<input type="radio"/> Pass	<input type="radio"/> Honors

Professionalism
Displays appropriate level of professionalism.
<input type="radio"/> N/A <input type="radio"/> Needs Improvement <input type="radio"/> Pass <input type="radio"/> Honors
Planned date of discussion
Actual date of discussion
Areas that would yield the greatest improvement in the student's skills
OpLog - Discuss student's oplog documentation and any areas where the students does not appear on track. Identify date when student should come back to see you if he/she has not yet met the requirements
Please discuss the student's 2-3 strongest performance areas

Selective Layout (M – F)

	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00 AM	Morning report	Morning report	Morning report	Morning report	Morning report
8:00AM-12:00PM	CVICU Rounds	CVICU Rounds	CVICU Rounds	CVICU Rounds	CVICU Rounds
12:00 PM-1:00 PM	Residents' conference	Residents' conference	Residents' conference	Residents' conference	Residents' conference
1:00 -5:00 PM	Stress Lab (Dr Abbas)	ECHO Dr Mukherjee	Didactics/ Self study	CATH LAB (Dr El Mallah)	ECHO (Dr. Siddiqui)

Preparation for Teaching

Attending faculty and residents will be oriented to the experience by the CVICU Clerkship Director or their designee, and provided copies of the syllabus and forms that they will use to assess student performance.

Residents will be required, as part of their training and orientation, to function as teachers. All residents are required to participate in a “Residents as Teachers” program that is administered by the Office of Graduate Medical Education. In addition, each resident will be provided copies of the Medical Student syllabus with particular emphasis on goals, objectives, and assessment methods and criteria.

Contacts

Clerkship Director

*Debabrata Mukherjee, MD

Debabrata.mukherjee@ttuhsc.edu

Professor

AEC 140

Hours: M – F; 8 AM – 6 PM

Phone: 915 215 5223

Block Director

Chandra Ojha, MD (pending 9/2017)

Coordinator

Georgie Grado

Cardiology Secretary

AEC 123

Hours: M – F; 8 AM – 5 PM

Georgina.Grado@ttuhsc.edu

Phone: 915-215 5223

Marissa Tafoya

Unit Coordinator

Hours: M – F; 8 AM – 5 PM

Marissa.Taffoya@ttuhsc.edu

Phone: 915-215-5262

*In emergencies dial the UMC operator and they should be able to reach me at all times.