

Pediatric Cardiology Elective

Elective rotation available for residents of all training levels

Value of the Rotation

- o Exposure to outpatient pediatric cardiology and select surgical and catheterization procedural interventions

Broad Goal:

- o Establish competency in basic outpatient evaluation of common pediatric cardiology clinical problems and presentations

Objectives:

- o Expand exposure to the clinical cardiac historical, physical exam, and cardiac testing utilized in pediatric cardiology clinical problem assessments

Rotation Description:

- o Weekly exposure to daily outpatient pediatric cardiology clinic patient evaluations, paired with Pediatric Cardiology Attending clinic schedule, with interactive history, exam, testing and result analysis.
- o Periodic (once a week) observational exposure to Pediatric Cardiology Surgical or Pediatric Cardiology Catheterization laboratory interventions.
- o Occasional exposure to Pediatric Cardiology inpatient consultation service, paired with the presiding Ward Pediatric Cardiology attending with interactive history, exam, testing and result analysis as relates to inpatient pediatric cardiology consultative patient evaluations.
- o Attendance for observation of group Pediatric Cardiac Catheterization, Pediatric Cardiology Surgical, and Pediatric Cardiology Echo conference, each occurring weekly.

Expectations:

- o Attendance of the indicated weekly departmental Pediatric Cardiology Catheterization and Pediatric Cardiac Surgical clinical conferences
- o Attendance at assigned daily Pediatric Cardiology outpatient clinic (excused for weekly Continuity Care pediatric clinics and Thursday afternoon resident teaching conferences).
- o Periodic attendance at the scheduled surgical or catheterization procedures, with alternate of Inpatient Pediatric Cardiology Ward Service Consultation involvement if the interventional cases are cancelled or otherwise not available.

Schedule:

- o Residents are expected to be in the hospital and available via page for consults and clinic from 8am-5pm, Monday - Friday.
- o There are no night or weekend responsibilities directly related to this elective, however residents may be needed to staff cross-covers on the weekends and occasionally during the week.

- o The only general exceptions are Thursday afternoons, when time is protected for didactics, and their assigned continuity clinic afternoon. Other exceptions, will be listed on the block docs that are sent out prior to the start of the rotation.
- o Residents are expected to communicate with the attending early in the rotation if other time is going to be missed, such as for a doctor's appointment.
- o As the rotation begins Monday mornings, the first point of arrival for the rotation is at the fellows Cardiac Catheterization Conference on Monday mornings in the **Chair's Office Suite conference room** (Children's Hospital) conference room at 7:15am.
- o Residents will be scheduled at the outpatient (Nyes Road) Pediatric Cardiology clinic on the first day of their rotation – a schedule outlining their assigned Pediatric Cardiology attending will be e-mailed to them in advance of that date, they are to report to that attending cardiologist directly following the catheterization conference (allow 20-30 minutes driving time), to be oriented to the Nyes Road Pediatric Cardiology clinic at that time (clinic start times usually begin 9 AM and extend to 4-5 PM).
- o Residents are often working with Medical Students and/or Pediatric Cardiology Physician Assistants under one attending in the clinic setting. Evaluation of the resident falls only to the presiding Pediatric Cardiology Attending.
- o The pediatric Cardiology Surgical conference meets weekly in P1106 (Children's Hospital) conference room each Thursday at 7:30am.
- o The pediatric Cardiology Echo conference meets weekly in P1106 (Children's Hospital) conference room each Friday at 7am.

Reading/Resources:

- o **Online clinical syllabus** includes articles pertaining to common outpatient Pediatric Cardiology clinical assessments (murmur, chest pain, syncope, palpitation).

Individualized Curriculum:

- o Select literature exposure and discussion will be based on particular outpatient, inpatient, surgical or catheterization problems or interventions that the individual resident is exposed to on the rotation, and the particular career interests (e.g. primary care, specialty care, critical care) of the resident involved.
- o E-mail the Pediatric Cardiology fellow prior to the start of your rotation to assist in designing a schedule that is tailored to each pediatric resident's clinical interests.
- o If 4 weeks of this elective is done during residency, this will count as a "key" elective.

Feedback & Evaluation:

- o Residents can expect to receive daily verbal feedback from the Pediatric Cardiology attending involved in their outpatient clinic activity. Written evaluation will be completed at end of rotation as assigned to one or more of the Pediatric Cardiology attendings involved. As the pediatric cardiac surgical or catheterization exposure is strictly observational in nature, no performance evaluation will be performed relative to those exposures.
- o Evaluation parameters will include

- o Knowledge base, problem-solving and patient management skills as demonstrated in patient care discussions (inpatient and outpatient), written notes, topic discussions.
- o Communication skills as demonstrated in discussions with patients and families in both the inpatient and outpatient settings
- o Attention to life-long learning as demonstrated during weekly topic reviews as well as evidence of ongoing reading on Pediatric Cardiology topics

Questions & Concerns:

- o Please contact the Cardiology Fellows (Dr. Farrah Munir, Dr. Aniqah Shahrier, and Dr. Gretchen Hackett) and Dr. Tim Wolfe with any questions, concerns or clarifications regarding this elective.