GOALS AND OBJECTIVES FOR PGY1 CARDIOTHORACIC SURGERY RESIDENT ON THE CORONARY CARE UNIT (CCU)

Description:
While on the CCU service, residents will learn how to perform a basic cardiovascular history and physical, providing exposure to cardiology patients with common physical findings/heart sounds. Residents will also become more proficient in reading EKGS, cardiac angiograms, and cardiac catheterizations. Importantly, residents will be exposed to the medical treatment of cardiovascular conditions, including myocardial ischemia and heart failure.

(1) Medical Knowledge
1. Understand the pathophysiology, diagnosis, preventative medicine, and current treatment regimens for the following disease processes: coronary artery disease (acute myocardia infarction, unstable and stable angina) including the role of thrombolytics and acute intervention (both catheter-based and surgical), and the management of its complications including heart failure, arrhythmias, VSDs, mitral regurgitation, and pericarditis.
2. Cardiac arrhythmias.
3. Congestive heart failure (acute and chronic), including current medical and surgical treatment options (CABG vs. PCI, valve replacement/repair, ventricular remodeling surgery, ventricular assist devices, biventricular pacing, and transplantation).
4. Arrhythmias (atrial fibrillation, atrial flutter, supraventricular and ventricular tachycardia, and bradycardia) including ability to interpret ECG, understand ACLS protocols, indications for catheter ablation, and surgical treatment options/indications.
5. Pericarditis (viral, bacterial, Dressler’s syndrome) including acute, constrictive, and restrictive.
6. Cardiomyopathy.
7. Understand diagnostic and prognostic evaluation of valvular regurgitation and stenosis, including medical, interventional, and surgical treatment options.
8. Understand IABP indications, contraindications, management, proper balloon timing, effects of incorrect balloon timing, and complications.
9. Interpretation of ECGs.
10. Interpretation of coronary angiograms.
11. Interpretation of PA catheter readings and ability to make appropriate intervention to improve systemic perfusion/oxygen delivery.
12. Knowledge of the indications, mechanisms, and interactions/side effects of commonly used drugs in the CCU setting, including epinephrine, neosynephrine, norepinephrine, dobutamine, dopamine, milrinone, vasopressin, nitroglycerine, nipride, and nitric oxide.

(2) Clinical Skills
1. Take a relevant history.
2. Perform an adequate physical examination, recognizing common physical findings associated with structural and valvular disease, including AS, AI, MS, MR, HOCM, TR.
3. Arrive at an acceptable differential diagnosis.
4. Order appropriate laboratory, radiologic, and other diagnostic procedures demonstrating knowledge in the interpretation of these investigations.
5. Arrive at a reasonable plan of management, demonstrating knowledge of the medical, interventional, and surgical management of the disease process.

6. Manage the patient from presentation in the emergency room and throughout the CCU stay.

(3) Patient Care
1. Placement of central venous lines (internal jugular, subclavian, and femoral) and arterial lines (radial and femoral).
2. Perform endotracheal intubation.
3. Placement of IABP and troubleshoot and manage pump.
4. Perform elective or emergent cardioversion.

(4) Professionalism
1. The ability to be honest, reliable, and respectful of the religious, racial, and gender characteristics of patients, their families and other members of the health care team.
2. The ability to give and receive advice in a manner that is consistent with the harmonious operation of a health care team.
3. The ability to recognize when to seek assistance from more experienced colleagues.
4. Deliver highest quality care with ethics, integrity, honesty, and compassion.
5. Exhibit appropriate personal and interpersonal professional behaviors.
6. Understand the professional, legal, and ethical codes to which physicians are bound.

(5) Interpersonal and Communication Skills
1. Listen effectively.
2. Establish therapeutic relationship with patients and families.
3. Obtain and synthesize relevant history from patients and family.
4. Inform patients and families about their condition at an appropriate and understandable level.
5. Write clear consultation notes, progress notes, discharge summaries, and clinic notes.
6. Prepare and present ward rounds in an organized manner.
7. Participate actively in scheduled rounds.
8. Communicate effectively with allied health care professionals.

(6) Systems-Based Practice
1. Utilize resources effectively to balance patient care and learning needs.
2. Allocate finite health care resources wisely.
3. Work effectively and efficiently in a health care organization.
4. Understand the importance and mechanisms to safely utilize resources in a cost-effective manner to benefit all patients.
5. Recommend practices to effectively utilize resources including undertaking studies to assess effectiveness of standard care procedures.

(7) Practice-Based Learning and Improvement
2. Critically appraise sources of medical information and be aware of resources available.
3. Read around clinical cases.
4. Prepare and present scheduled rounds.
5. Participate actively in scheduled morbidity and mortality conferences.
6. Participate effectively in facilitate learning of patients, teaching housestaff/medical students and other health professionals.

**Method of assessment of resident academic performance**

1. End of rotation online evaluation
2. Yearly in-service training exam.
3. Bi-annual case log review