2018-2019 Catalog

Cardiology Inpatient And Consultative Services - Jacksonville

MED E 1J | 4th Year Elective | Internal Medicine | Clinical Science

Prerequisites

4th year medical student

Course Description

This elective involves rounding on the inpatient Cardiology Consultative service with the house-staff assigned to that rotation. This will generally consist of an internal medicine resident, a cardiology fellow and the attending physician in charge. Pre-rounds usually occur prior to meeting with the attending physician who will determine the exact hour to officially go over consults that have been pre-evaluated by the team (student, resident, fellow). Usually consults that come overnight are seen early in the am – time, order and distribution of these patients is determined by the Cardiology fellow who leads this pre-rounding.

Course Faculty and Staff

- Gladys Velarde MD (Director)
- Dani Brown (Course Staff)
- Karen Goodman (Course Staff)
- Frank J Genuardi MD, MPH (Other Faculty)

Meeting Place and Time

On the first day of the rotation, please report to the Cardiology Lobby located on the 5th Floor, ACC Building at 8:30am

Course Materials

Texts recommended
- Rapid Interpretation of EKGs by Dale Dubin
- Braunwald’s Heart Disease; 8th ed A Textbook of Cardiovascular Medicine

Additional Educational Materials: May be obtained from The Borland Medical Library and other in house permissible educational sites.

Additional Information

Before & during the elective, contact Ms. Karen Goodman @ 904-244-3932 or karen.goodman@jax.ufl.edu, for assistance.

At the end of a 4 week-rotation, a 4th year medical student should be able to do the following:
1. Interpret a 12 lead ECG in a systematic way and be able to identify rhythm, axis, intervals and basic abnormalities
2. Interpret basic CXR in a systematic way and able to recognize cardiovascular landmarks
3. Interpret basic rhythms on telemetry monitoring
4. Be able to conduct a throughout physical exam with emphasis on the cardiovascular system and identification of normal vs abnormal cardiac sounds.
5. Evaluate consultations that come to the consultative service and able to generate a concise consultative report based on chief complaint, H and P, objective data, physical exam with emphasis on cardiovascular system and cardiac findings
6. Formulate differential diagnosis based on objective and subjective data
7. Present findings and differential diagnosis to the members of the team independently

Conferences:
Medical students rotating in either of the cardiology electives are required to attend all core conferences offered to cardiology fellows in the Department of Cardiology. You can get weekly schedule of conferences from Cardiology Program Administrator, Karen M. Goodman. Students are also required to attend Monday Morning Report, which occurs on Mondays at 7:45 am, Unless otherwise noted on the conference schedule. Additionally, medical students are encouraged to attend other didactic sessions in EP, interventional cardiology or echocardiography as their schedule permits.

Evaluations:
Medical students in the cardiology rotations will be evaluated by the house staff they worked under and the attending physician who was in charge of the team at the time.

Grading: Pass or Fail options

Classes Offered

<table>
<thead>
<tr>
<th>Period</th>
<th>Length</th>
<th>Credits</th>
<th>(Avail / Max) Slots</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period 1</td>
<td>4 Weeks (May 7 - Jun 2)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 2</td>
<td>4 Weeks (Jun 3 - Jun 30)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 4</td>
<td>4 Weeks (Jul 29 - Aug 25)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 4</td>
<td>First 2 Weeks (Jul 29 - Aug 11)</td>
<td>2</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period</td>
<td>Length</td>
<td>Credits</td>
<td>(Avail / Max) Slots</td>
</tr>
<tr>
<td>----------</td>
<td>---------------------</td>
<td>---------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Period 5</td>
<td>4 Weeks (Aug 26 - Sep 22)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 6</td>
<td>4 Weeks (Sep 23 - Oct 20)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 7</td>
<td>4 Weeks (Oct 21 - Nov 17)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 8</td>
<td>4 Weeks (Nov 18 - Dec 15)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 9</td>
<td>4 Weeks (Jan 1 - Jan 26)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 10</td>
<td>4 Weeks (Jan 27 - Feb 23)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 11</td>
<td>4 Weeks (Feb 24 - Mar 23)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 12</td>
<td>4 Weeks (Mar 24 - Apr 20)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
<tr>
<td>Period 13</td>
<td>4 Weeks (Apr 21 - May 17)</td>
<td>4</td>
<td>(1 / 1)</td>
</tr>
</tbody>
</table>

**Evaluated Competencies**

**#1 Professionalism**

**Educational Objectives:** Demonstrates respect for patients; families; and members of the health care team. Demonstrates an attitude of caring. Preserves patient confidentiality; and demonstrates knowledge about HIPAA regulations. Demonstrates timeliness.

**Method of Evaluation:** Faculty observation and feedback from residents

**#2 Patient Care**

**Educational Objectives:** Conducts efficient; comprehensive; medical interviews and physical examinations; and records accurate information. Integrates information from
medical history and physical examination into coherent problem list/differential diagnosis; and uses this information to determine cost-effective test ordering. Appropriately interprets diagnostic test results. Formulates appropriate management plans and writes orders. Presents clear and concise patient information during rounds/clinic. Writes progress notes using SOAP format. Seeks opportunities to perform appropriate medical procedures (e.g. peripheral venous access; central venous access; arterial blood gas).

**Method of Evaluation:** Faculty observation during attending rounds/procedures and feedback from residents. Mini-CEX.

#3 Medical Knowledge

**Educational Objectives:** To learn preoperative assessment and risk assessment for patients undergoing noncardiac surgery. To learn the principles; indications; and limitations of noninvasive testing. To understand the principles of cardiac care during pregnancy; in the postoperative patient; and in the elderly. To develop basic skills in ECG interpretation. To learn differential diagnosis and evidence-based care in chronic heart failure. To learn the pathophysiology; assessment; and treatment of chronic valvular heart disease. To develop a diagnostic and evidence-based approach to chronic coronary artery disease. To learn the differential diagnosis; mechanisms; and evaluation and treatment options for chronic tachyarrhythmias and bradyarrhythmias.

**Method of Evaluation:** Faculty observation during attending rounds and feedback from residents.

#4 Practice-Based Learning

**Educational Objectives:** Regularly identifies gaps in knowledge and seek answers to those questions from current medical literature. Demonstrates skills in principles of evidence-based medicine and ability to critically appraise available evidence. Shares results of knowledge discovered with their team. Self-evaluates effectiveness of care provided to their patients.

**Method of Evaluation:** Faculty observation during attending rounds and feedback from residents.

#5 Interpersonal and Communication Skills

**Educational Objectives:** Interacts with patients; family members; and colleagues in a manner that engenders confidence; trust; and cooperation. Uses open-ended questions and demonstrates active listening in patient interactions. Works well as a team member.

**Method of Evaluation:** Faculty observation during attending rounds; and feedback from patients; family members; and residents.
#6 Systems-Based Practice

**Educational Objectives:** Demonstrates an awareness of resources (e.g. social support; educational; financial; access to care; etc.) needed by patients to effectively maintain health and manage disease.

**Method of Evaluation:** Faculty observation during attending rounds and feedback from residents