

RESPONSIBILITIES OF THE CARDIOLOGY FELLOW DURING THE VA CORONARY CARE / STRESS TESTING ROTATION

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Location: John Cochran VA Medical Center

Hours: 7:00 AM – 5:00 PM. You will be required to round every other weekend while you are there (alternates with Saint Louis University). This is a hybrid rotation where SLU and WU fellows split the month. SLU fellows are responsible for the consult service for the first half of the month while WU fellows cover the stress lab. SLU fellows cover the stress lab for the second half of the month while WU fellows cover the consult service.

The fellow is required to carry both your personal pager and when on service (unless someone is covering you, for which you should let Cardiology Assistant know) and the consult pager. The attendings will contact the fellow his/her personal pager or cell phone.

With respect to fellow's continuity clinic, SLU covers WU and vice versa. If the time missed is not for clinic (but for some other reason), then each organization is responsible for their own coverage (ie, SLU needs to find SLU coverage, WU needs to find WU coverage).

The cardiology service is responsible for being the primary service for CCU patients s/p STEMI, post cath patients with complicated interventions, heart block requiring transvenous pacing, cardiogenic shock, and malignant arrhythmias. These patients must be signed out to the covering MOD who will cover them overnight for noncardiac calls but with no sign out they will not take care of them.

CCU is a CLOSED UNIT. All transfers to the ICU will be deemed to the CCU or the MICU by the admitting MOD who is an attending. Any patients who are deemed CCU are followed and all orders are written by the consult fellow. No residents are involved in these patients. The MODs are supposed to know what is going on with these patients and it is expected that you will sign them out to the on call MOD prior to leaving each day with goals of care etc.

The WU fellow generally takes home call every third night starting on the 3rd of the month. Note, changes can be made to the call schedule to accommodate days off thus check the cardiology call schedule with the Cardiology Division Executive Assistant.

On call the fellow is responsible for new consults, ER consults, covering of patients checking in on 4N the night before for IV fluids prior to cath, as well as the current consult list.

Responsibilities:

- Consults/Inpatient:
 1. The St. Louis University (SLU) Fellow will cover the inpatient service until the 15th of the month, the Washington University (WU) Fellow will cover from the 16th to the end of the month.
 2. The weekends will be split between the two fellows as per the call schedule.
 3. The fellow is responsible for all patient admitted under the CCU service as the primary team. This includes putting in orders for am labs and anything else.
 4. The fellow is responsible for all cardiology consults from the floor (please see attached supplement of how to complete the required CPRS documentation).
 5. Each morning would check with the on call fellow and MOD to ensure there were no admissions to the CCU service.
 6. All consults should be seen the same day.
 7. The fellows will round with the attending at their designated time every day and weekend.
 8. After consults are seen, the recommendations should be communicated to the primary service.
 9. The inpatient cardiology fellow will cover for the stress lab fellow while they are in clinic or at conference.
 10. The fellow is responsible for consenting any patient that requires a cardiac catheterization from the consult service or CCU service. The cath lab (53418) and the cath lab fellow should also be notified of the case. If you are unable to do the consent for any reason, make sure you communicate with the cath lab fellow.
 11. The fellow (or resident) is responsible for writing a daily note on all patients being followed on the CCU or consult service (please see attached supplement of how to complete the required CPRS documentation).
 12. A "Troponin List" is printed three times over the course of the day. It contains the results of every troponin drawn in the hospital over the past 24 hours. The fellow is responsible for going over the list and looking up each patient on the list to ensure they are not having a cardiac event. The fellow is responsible for writing a note saying you

reviewed their chart and notifying the service to consult cardiology if further assistance is needed (please see attached supplement of how to complete the required CPRS documentation). Only one note is needed per patient, per admission, unless the patient is being seen by inpatient cardiology.

13. For any primary CCU patients, the MOD should be contacted in the evening (at around 7PM) for sign out of any patients. They will not cover the patients overnight if they do not receive sign out. A list of patients should be left in a designated area in the MICU for the MOD.
 14. The fellow is required to be present to the Tuesday afternoon didactic clinic on 8N. If there is a conflict with the Tuesday afternoon didactic clinic with your continuity clinic attempts should be made ahead of the rotation to see if there are any other times during those weeks that the fellow can do their continuity clinic (the continuity clinic is the primary responsibility).
 15. Patients from the cath lab that need to be admitted to the CCU for any reason will be picked up by the consult fellow and discharged by their service. These patients should also be signed out to the MOD.
 16. For transfers, occasionally the operator may page the fellow to speak with a transferring physician. The fellow cannot accept the patients themselves! All transfers go through the medicine chief resident on call as they are admitted to medicine (not cardiology). The fellow get the name and number of the transferring physician and have the chief call them. Do not use the operator as an intermediary between referring physicians and chief residents.
 17. If someone needs to be transferred to a higher level of care (rare given the 24/7 cath lab, ability place IABP at bedside, transvenous pacers at bedside), the fellow is responsible for arranging the transfer. This will require an accepting physician and preauthorization including a fee basis request. This fee basis request requires approval by the VA administration prior to ANY transfer. **DO NOT TRANSFER A PATIENT WITHOUT THE ATTENDING KNOWING AND WEIGHING IN ON THE DECISION.** To transfer, the fellow needs an accepting attending to speak with your attending and all documents need to be in, including a fee basis approval, or else the VA will not pay (which will leave the patient vulnerable) so the fee basis request **MUST** be signed off on prior to arrangement of the ambulance. Please direct your questions to the MOD if you are transferring and/or speak with the medicine residents to help you in this process.
 18. STEMI/Acute Unstable NSTEMI (see the VA Cardiac Cath section, essentially have ER call cath lab attendings directly).
- **Stress Lab:**
 1. The WU fellow is responsible for the stress lab for the 1st-15th, the SLU fellow is responsible for the stress lab from the 16th to the end of the month.
 2. The fellow is responsible for reviewing all past medical history, determining the appropriateness of the study, and consenting the patient for the stress test.
 3. The fellow should be present for all stress tests.
 4. The stress lab will be performing stress echo and you are required to proctor these as well working with Dr. Ou as he deems necessary.
 5. The fellow is responsible for interpreting all stress tests and reviewing with the daily attending.
 6. The stress lab fellow is responsible for covering the inpatient service while that fellow is at clinic for conference. This includes seeing any emergent or urgent consults that cannot wait for the fellows return.
 7. After all the stress tests have been performed and interpreted, the fellow should report to radiology for nuclear image interpretation. This is the most recommended to help get numbers for nuclear imaging interpretation. The fellow can potentially make arrangements to spend time in ECHO, EP, cath lab, or clinic if they would prefer. This needs to be approved by the attending.
 8. The fellow should spend at least 8.5 hours in the hospital with the exception of the clinic day.
 - **VA Call:**
 1. The VA Call is home call. We expect the fellow on call to come and evaluate any patients with unstable cardiac issues (STEMI, shock, CHB, unstable arrhythmias, etc.). If in doubt, go see the patient.
 2. If you accept an admission to the CCU or there is a change in status of any patient, the consult fellow needs to be contacted in the morning for report.
 3. Call on the weekends starts at 1200 pm. The weekend rounding fellow is responsible for any admissions or consults prior to that time.

Tips:

- The code to the cardiology office is 8642*.
- Notify the on call fellow of any sick patients you are seeing (generally this is rare).
- The ICU can be used for telemetry overflow, and this is helpful for patients that do need cardiology but do not need to be on the cardiology service. If they are there for tele overflow, they are not CCU patients and the medicine floor team is the primary. These patients do not need to be signed out to the MOD by the fellow.
- The MICU is located on the 6th floor and SICU on the 4th floor. Most of the other ward patients will primarily be located on the 7th floor. Most surgical patients are located on the 6th floor.
- Parking is limited. See the map below for potential parking locations.

Education:

- Braunwald's Heart Disease: A Textbook of Cardiovascular Medicine, 2-Volume Set: Expert Consult Premium Edition - Enhanced Online Features and Print, 9e (Heart Disease (Braunwald) (2 Vols)) by Robert O. Bonow (Publication Date: March 2, 2011 | ISBN-10: 1437727085 | ISBN-13: 978-1437727081 | Edition: 9)
- The Washington Manual® Cardiology Subspecialty Consult (The Washington Manual® Subspecialty Consult Series) by Phillip S. Cuculich and Andrew M. Kates (Publication Date: July 30, 2008 | ISBN-10: 0781791510 | ISBN-13: 978-0781791519 | Edition: Second)
- Concise Cardiology: An Evidence-Based Handbook by David V. Daniels (Publication Date: May 14, 2008 | ISBN-10: 078178509X | ISBN-13: 978-0781785099 | Edition: 1)

Competency	Goals	Objectives	Assessment Method
Veteran Care	Fellows are expected to provide compassionate care that is effective for the promotion of health, prevention, treatment and care at the end of life.	<ul style="list-style-type: none"> • Complete cardiovascular examination and documentation • Triage care from cath lab to CCU or 7 North/South service • For outpatient caths, provide follow-up medical care plan, pre-operative evaluation and documentation to patient. • Interprets results from cardiovascular testing to determine best method of individualized veteran care 	<ul style="list-style-type: none"> • Global assessment • Direct observation • Record review
Medical knowledge	Fellows demonstrate knowledge of biomedical, clinical and social science, and applies that knowledge effectively to patient care.	<ul style="list-style-type: none"> • Have in-depth learning of cardiac anatomy, physiology, and pathophysiology • Understand and apply ACC/AHA / Veteran Affairs clinical practice guidelines and • Form and articulate cardiac diagnoses and therapeutic modalities • Plan, perform and/or supervise all invasive procedures under attending guidance 	<ul style="list-style-type: none"> • Global assessment • Direct observation
Practice Based Learning and Improvement	Fellow use evidence and methods to investigate, evaluate, and improve veteran care practices	<ul style="list-style-type: none"> • Assimilate test results to provide best veteran care • Improve veteran care practices through appraisal of scientific evidence • Use information technology to optimize learning • Provide treatment and follow-up information to referring physician 	<ul style="list-style-type: none"> • Global assessment • 360 degree assessment
Interpersonal Skills/ Communication	Fellow demonstrates these skills to establish and maintain professional and therapeutic relationships with vets and healthcare team	<ul style="list-style-type: none"> • Appropriate and compassionate communication skills to veterans and families • Effective communication with healthcare team • Follow-up communication to referring physicians • Participate in education didactic conferences • Involve team to manage chronic disease 	<ul style="list-style-type: none"> • Global assessment • 360 degree assessment • Record Review
Professionalism	Fellow demonstrates behaviors that reflect an ongoing commitment to continuous professional development, ethical practice, sensitivity to diversity, and responsible attitudes.	<ul style="list-style-type: none"> • Demonstrate compassion, integrity and respect for others • Respect for veteran privacy and autonomy • Cultural competency 	<ul style="list-style-type: none"> • Global assessment • 360 degree assessment
Systems Based Practice	Fellow demonstrates an understanding of both contexts and systems in which health care is provided and applies this knowledge to improve and optimize patient care.	<ul style="list-style-type: none"> • Work effectively in the cardiac catheterization lab setting and system • Incorporate considerations of cost awareness and risk-benefit analysis in veteran care 	<ul style="list-style-type: none"> • Global assessment • Direct observation • Record Review

St. Louis VA Medical Center John Cochran Division
Employee parking lots are located:

1. Enright Avenue – 2 lots: (Lot 1) Immediately behind the Medical Center . Entrance off Enright Ave. This is a gated lot requiring a coded Employee ID Badge to open the gate. (Lot 2) Smaller lot further west on Enright Ave. Enter from Enright Ave.
2. Grandel Square - 2 lots both entered from Grandel. PLEASE NOTE for Lot 4 that the Medical Center leases a limited number of parking spaces from the owner of this lot. Obey all signs and only park in spaces designated for VA Employees. If you park in non-designated or blocked off spaces you will be towed.
4. Olive Street Scottish Rite Garage: The Medical Center leases parking spaces for VA employees. Have your Scottish Rite Garage parking ticket validated at the Information Desk (Medical Center Lobby) or by the VA Police . A shuttle bus runs between the Medical Center and the Scottish Rite Garage.

