

RESPONSIBILITIES OF CARDIOLOGY FELLOWS DURING CARDIO-ONCOLOGY ROTATION

I. The Cardiology fellow on the Cardio-Oncology Service will be expected to do the following:

- a. Outpatient Responsibilities
 - i. Attend two half-day Cardio-Oncology clinics per week (Mon, Weds, Fri)
 - ii. Continue to attend the fellow's half-day continuity clinic once per week (total of three half day clinics)
- b. Inpatient Responsibilities
 - i. Perform inpatient Cardio-Oncology consultation and follow patients known to the Cardio-Oncology service.
 - ii. Participate in Cardio-Oncology clinical rounds Monday through Friday.
- c. Call and Weekend Responsibilities
 - i. Fellows on the Cardio-Oncology service are not expected to take primary call and are not expect to round on the weekends.
- d. Educational expectations
 - i. Participate in all multidisciplinary meetings related to Cardio-Oncology and Amyloidosis, presenting at least one clinical case. Meetings include Amyloid Center of Excellence Meeting (1-2 times/month) and Monthly ICOS Webinars.
 - ii. Fellows are expected to engage in a research project during their Cardio-Oncology rotation. This may include clinical studies, chart review, or case report presentation.
- e. Recognition
 - i. Fellows who complete 3 months of Cardio-Oncology Rotations will be eligible for acknowledgement of a Focus in Cardio-Oncology on their graduation transcript.

II. Educational Goals of the Rotation

- a. Identify risk factors for cardiotoxicity, including pre-existing heart disease and genetic factors, and the implications for cancer treatment
- b. Recognize the chemotherapeutic, biological, and radiation therapies associated with cardiovascular toxicities.
- c. Understand and manage the cardiac emergencies pertinent to cancer and cancer therapy, including pericardial tamponade.
- d. Understand the prognosis and usual treatment options for common cancers with cardiovascular implications.
- e. Become familiar with the types of systemic amyloidosis, the cardiac implications, pertinent diagnostic studies, and therapies.
- f. Manage hypertension in patients treated with tyrosine kinase inhibitors.
- g. Identify best practices for the integration and functioning of the cardio-oncology team to improve patient outcomes
- h. Incorporate guidelines from the cardiology and oncology societies into clinical practice
- i. Recognize appropriate imaging modalities to assess cardiotoxicity, and distinguish the strengths and weaknesses of each cardiac monitoring modality, including echocardiography, strain, CT, MRI, and nuclear imaging

III. Competencies:

- **Patient Care:** The fellow is expected to gain greater expertise in cardio-oncology. Patients are seen in consultation and the fellow may interact with other medical subspecialists,

internal medicine attendings, surgeons, and other non-medical specialists. The fellow will learn to help coordinate care between multiple services.

- **Medical Knowledge:** The fellow will be expected to research the clinical trials that support the therapy of these patients. It is expected that the fellow will present the results of trials which are germane to the care of their patients.
- **Practice-based Learning and Improvement:** All trainees must understand the limitations of their knowledge and accept constructive feedback. In addition, the fellow must understand the variability of patient care styles of different attending physicians.
- **Interpersonal and Communication Skills:** The fellow must demonstrate caring and respect for all patients and families. The fellow must conduct supportive and respectful discussions goals of care. The fellows will facilitate the learning of students and residents.
- **Professionalism:** The fellows will demonstrate respect and compassion. The fellows will understand that they are the representatives of the Cardiovascular Division even when off-service and will be expected to perform in a professional manner at all times. The fellows will appreciate the diversity of ethical, religious, and socioeconomic factors which impact patients and their families and their response to healthcare professionals.
- **System-based Practice:** The fellow must work well in a complex system of nurses, social workers, and other healthcare professionals. The fellow will try to facilitate the transition from inpatient to outpatient and will utilize appropriate resources to continue high quality care as an outpatient. Relationships cultivated with the oncology team help improve patients with combined oncologic and cardiac disease who are co-managed by these services.
- **Teaching Methods:** The primary mode of learning for inpatient care will be through teaching rounds with the attending physician. Teaching rounds will occur 5 days/week. The fellow is expected to assure that the residents and students are prepared to present the appropriate data at teaching rounds. The primary mode of learning for outpatient care will be through direct and indirect supervision of clinic encounters by the attending physician. Fellows will gather data, develop a plan, and present to the attending physician.
- **Conferences:** The fellow is expected to participate in all multidisciplinary conferences pertinent to Cardio-Oncology, including amyloidosis.
- **Evaluation Methods:** At the end of each four-week block, the fellow will meet with the attending for feedback. One attending will be asked to complete the evaluation in *MyEvaluations.com* after consulting the other attendings.

I HAVE READ AND UNDERSTAND THE GOALS AND OBJECTIVES FOR THE CARDIO-ONCOLOGY ROTATION.

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Print Name

Signature

Date

Cardio-Oncology Rotation Diagram

Week	Monday	Tuesday	Wednesday	Thursday	Friday
1	AM – Cardio Oncology Clinic	AM - Research	AM – Cardio Oncology Clinic	AM – Research*	AM – Cardio Oncology Clinic
	PM – Inpatient Rounding	PM – Inpatient Rounding	PM – Inpatient Rounding*	PM – Inpatient Rounding	PM – Inpatient Rounding
2	AM – Cardio Oncology Clinic	AM - Research	AM – Cardio Oncology Clinic	AM – Research*	AM – Cardio Oncology Clinic
	PM – Inpatient Rounding	PM – Inpatient Rounding	PM – Inpatient Rounding*	PM – Inpatient Rounding	PM – Inpatient Rounding
3	AM – Cardio Oncology Clinic	AM - Research	AM – Cardio Oncology Clinic	AM – Research*	AM – Cardio Oncology Clinic
	PM – Inpatient Rounding	PM – Inpatient Rounding	PM – Inpatient Rounding*	PM – Inpatient Rounding	PM – Inpatient Rounding
4	AM – Cardio Oncology Clinic	AM - Research	AM – Cardio Oncology Clinic	AM – Research*	AM – Cardio Oncology Clinic
	PM – Inpatient Rounding	PM – Inpatient Rounding	PM – Inpatient Rounding*	PM – Inpatient Rounding	PM – Inpatient Rounding
* Wednesday PM Amyloid Center Meeting 1-2x/month (check schedule with attending) * ICOS Webinar once/month (check schedule with attending)					