**New Application: Clinical Cardiac Electrophysiology**

**Review Committee for Internal Medicine**

**ACGME**

**Oversight**

**Participating Sites**

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| Describe the reporting relationship to the program director of the cardiovascular disease program. [PR.I.B.1.b)] (Limit response to 300 words) |
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**Resources**

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| Will there be adequate inpatient facilities (e.g., conference rooms, on-call rooms) for the program? [PR I.D.1.a)] | YES  NO |
| Will there be adequate facilities in the ambulatory settings (e.g., exam rooms, meeting/conference room, work area) for patient care and the educational components of the program? [PR I.D.1.a)] | YES  NO |

Explain any “NO” responses. (Limit response to 250 words)

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| **Will the following facilities/laboratories/resources be available?** | **Yes or No** |
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| Electrophysiologic laboratory [PR I.D.1.c).(1)] | YES  NO |
| Cardiac fluoroscopic equipment [PR I.D.1.c).(1)] | YES  NO |
| Recording devices [PR I.D.1.c).(1)] | YES  NO |
| Resuscitative equipment [PR I.D.1.c).(1)] | YES  NO |
| Cardiac radionuclide laboratories [PR I.D.1.c).(2)] | YES  NO |
| Active cardiac surgery program [PR I.D.1.d).(1)] | YES  NO |
| Cardiac intensive care unit [PR I.D.1.d).(2)] | YES  NO |
| Cardiac surgery intensive care unit [PR I.D.1.d).(3)] | YES  NO |
| Programmable stimulator [PR I.D.1.c).(3)] | YES  NO |
| Outpatient clinic [PR IV.C.7. ] | YES  NO |
| Access to training using simulation [PR IV.C.4.] | YES  NO |

Explain any “NO” responses. (Limit response to 250 words)

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**Educational Program**

**ACGME Competencies**

**Patient Care and Procedural Skills**

Will fellows demonstrate competence in the practice of health promotion, disease prevention, diagnosis, care, and treatment of patients of each gender, from adolescence to old age, during health and all stages of illness? [PR IV.B.1.b).(1).(a)]  YES  NO

Will fellows demonstrate competence in the prevention, evaluation, and management of both inpatients and outpatients with the following? [PR IV.B.1.b).(1).(b).(i)-(x)]

1. Aborted sudden cardiac death  YES  NO
2. Arrhythmias results from pharmacologic interactions  YES  NO
3. Disorders of cardiac rhythm  YES  NO
4. Increased risk for sudden cardiac arrest  YES  NO
5. Metabolic derangements resulting in arrhythmia  YES  NO
6. Need for acute or chronic anticoagulations  YES  NO
7. Palpitations  YES  NO
8. Prolonged QT syndrome  YES  NO
9. Syncope  YES  NO
10. Wolff-Parkinson-White (WPW) syndrome  YES  NO

Will fellows demonstrate competence in the following? [PR IV.B.1.b).(1).(c).(i)-(v)]

* 1. Care of patients in the cardiac care unit, emergency room, or other intensive care settings  
       YES  NO
  2. Care of the patients before and after an electrophysiologic procedure  YES  NO
  3. Care of patients with post-operative arrhythmias  YES  NO
  4. Care and monitoring of patients with i**mplantable cardioverter defibrillators (**ICDs) and biventricular ICDs

YES  NO

* 1. Care and monitoring of patients with temporary and permanent pacemakers of all types, including biventricular pacemakers  YES  NO

Will fellows demonstrate competence in the use of non-invasive testing relevant to arrhythmia diagnoses and treatment? [PR IV.B.1.b).(2).(a)]  YES  NO

Will fellows demonstrate competence in the following procedures? [PR IV.B.1.b).(2).(b).(i)-(iii)]

1. Diagnostic electrophysiology studies  YES  NO
2. Catheter ablative procedures  YES  NO
3. Procedures related to implanted cardiac electronic devices ICEDs  YES  NO

Will fellows demonstrate competence in the interpretation of the following? [PR IV.B.1.b).(2).(c).(i)-(v)]

1. Activation sequence mapping recordings  YES  NO
2. Advanced electrocardiographic methods of risk stratification   
     YES  NO
3. Continuous and event electrocardiogram (ECG) recording

YES  NO

1. Remote device transmissions  YES  NO
2. Tilt testing  YES  NO

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| **For the following procedures, indicate the minimum number each fellow will be required to perform during the program.** | |
| Tilt-table tests [PR IV.B.1.b).(2).(a).(i)] | # |
| Ddiagnostic electrophysiology studies [PR IV.B.1.b).(2).(b).(i).(a)] | # |
| Supraventricular ablative procedures (exclusive of procedures for atrial fibrillation or flutter) [PR IV.B.1.b).(2).(b).(ii).(a)] | # |
| Atrial flutter ablations [PR IV.B.1.b).(2).(b).(ii).(b)] | # |
| Atrial fibrillation procedures [PR IV.B.1.b).(2).(b).(ii).(c)] | # |
| Ventricular tachycardia ablations in patients with structural heart disease [PR IV.B.1.b).(2).(b).(ii).(d)] | # |
| Implantations of cardiac electrical devices [PR IV.B.1.b).(2).(b).(iii).(a)] | # |
| Device replacements or revisions [PR IV.B.1.b).(2).(b).(iii).(b)] | # |
| Device interrogations or reprogrammings [PR IV.B.1.b).(2).(b).(iii).(c)] | # |

**Medical Knowledge**

Will fellows demonstrate knowledge of the following? [PR IV.B.1.c).(1)-(3).(i)]

1. The scientific method of problem solving and evidence-based decision making

YES  NO

1. Indications, contraindications, limitations, complications, techniques, and interpretation of results of those diagnostic and therapeutic procedures integral to the discipline, including the appropriate indications for and use of screening tests/procedures

YES  NO

1. Anticoagulation  YES  NO
2. Arrhythmia control  YES  NO
3. Basic cardiac electrophysiology, including genesis of arrhythmias, normal and abnormal electrophysiologic responses, autonomic influences, effects of ischemia, drugs, and other interventions  YES  NO
4. Device management  YES  NO
5. Epidemiology of arrhythmias  YES  NO
6. The genetic basis of pathological arrhythmias  YES  NO
7. Medical management of acute and chronic heart failure associated with left ventricular systolic dysfunction  YES  NO
8. Radiation physics, biology, and safety related to the use of x-ray imaging equipment

YES  NO

1. The role of randomized clinical trials and registry experiences in clinical decision making

YES  NO

**Practice-based Learning and Improvement**

Briefly describe how fellows will demonstrate competence in investigating and evaluating their care of patients, appraising and assimilating scientific evidence, and continuously improving their patient care based on self-evaluation and lifelong learning. [PR IV.B.1.d).] (Limit response to 400 words)

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**Interpersonal and Communication Skills**

Briefly describe how fellows will develop skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals. [PR IV.B.1.e)] (Limit response to 400 words)

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**Systems-based Practice**

Briefly describe how fellows will demonstrate an awareness of and responsiveness to the larger context and system of health care, including the structural and social determinants of health, as well as the ability to call effectively on other resources to provide optimal health care. [PR IV.B.1.f] (Limit response to 400 words)

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**Follow-Up/Outpatient Experiences**

Describe the fellows’ follow-up/outpatient experience. Address all relevant information, including the duration, number of sessions per week, average number of patients seen, and whether faculty supervision is provided. [PR IV.C.7.] (Limit response to 400 words)

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**Curriculum Organization and Fellow Experiences**

**Conferences**

Will fellows routinely participate in the following? [PR IV.C.5.b)]

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| Core Curriculum Conference Series | YES  NO |
| Clinical Case Conferences | YES  NO |
| Research Conferences | YES  NO |
| Journal Club | YES  NO |
| Morbidity and Mortality Conferences | YES  NO |
| Quality Improvement Conferences | YES  NO |

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| Will the members of the faculty participate in required conferences? [PR IV.C.5.c)] | YES  NO |

Explain any “NO” responses. (Limit response to 250 words)

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Describe the program’s Core Curriculum Conference Series. [PR IV.C.5.] (Limit response to 400 words)

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Describe how the program will ensure that the fellows have the opportunity to make up missed core conferences (e.g., when offsite). [PR IV.C.5.a)] (Limit response to 400 words)

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Will fellows receive instruction in practice management relevant to the specialty? [PR. IV.C.6.]

YES  NO

**Faculty Scholarly Activity [PR IV.D.2.]**

To demonstrate a scholarly environment, the Review Committee expects the program to provide evidence of scholarly activity by documenting that at least 50 percent of its required minimum number of core faculty members annually engage in a variety of scholarly activity. **List one example** of scholarly activity for the program’s core faculty members during the past academic year.

*Identify academic year:* Academic Year

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| Name of Core Faculty Member | Type of Activity | Citation/Description of Product |
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**Evaluation**

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| Describe the method for assessment of fellows’ procedural competence.[PR V.A.1.a).(2)] (Limit response to 400 words) |
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| Will the program use multi-source evaluation, including patients, peers, and non-physician team members, to assess each fellow’s ability to meet professional responsibilities? [PR V.A.1.c).(1)] | YES  NO |

Explain any “NO” responses. (Limit response to 250 words)

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**Faculty Evaluation**

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| Will the evaluations of faculty members be written and confidential? [PR V.B.1.b)] | YES  NO |
| Will the results of the faculty evaluations be communicated to the faculty members on a regular basis, at least annually? [PR V.B.2.] | YES  NO |

Explain any “NO” responses. (Limit response to 250 words)

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**The Learning and Working Environment**

Describe how faculty members and fellows will be educated about fatigue and its negative effects. [PR VI.D.] (Limit response to 400 words)

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