

## Rotation: Continuity Clinic – Bayview

**Rotation Director:** Dr. Edward Kasper

**Other Faculty:** Faculty members with clinics at Bayview

**Rotation Hours:** as arranged; one half day per week

### A. Continuity Clinic: Patient Care

	<b>Principal Educational Goals</b>	<b>Learning Activities</b>	<b>Evaluation Methods</b>
1.	Take a complete medical history and perform a careful and accurate physical examination with a cardiology focus.	DPC, ACS	AE, RR
2.	Ability to recognize the physical findings of chronic congestive heart failure, acute pulmonary edema, mitral regurgitation, mitral stenosis, aortic stenosis, aortic regurgitation, and tricuspid regurgitation.	DPC, FS	AE
3.	Write concise, accurate and informative histories, physical examinations and clinic notes with a cardiology focus.	DPC, ACS	AE, RR
4.	Ability to formulate comprehensive and accurate problem lists, differential diagnoses and plans of management for patients with acute and chronic cardiac illness.	DPC, CC	AE
5.	Effectively evaluate and manage patients with chronic cardiac illness; particularly coronary atherosclerosis, congestive heart failure, arrhythmias and valvular heart disease.	DPC, ACS	AE
6.	Effectively manage patients with undiagnosed chest pain, including the appropriate use of diagnostic testing.	DPC, ACS	AE
7.	Ability to perform/review and recognize major abnormalities of cardiac stress tests, cardiac echo and coronary angiograms.	DPC, DSP, EC, CAC	AE, DSP
8.	Ability to interpret complex electrocardiograms and rhythm strips.	DPC, ECG	AE
9.	Effectively evaluate and manage patients who have undergone interventional procedures.	DPC, CAC	AE
10.	Effectively evaluate and manage cardiac risk factors such as hypertension, diabetes, hyperlipidemia, hyperhomocysteinemia, and smoking.	DPC, ACS	AE
11.	Willingness and ability to help patients undertake basic strategies for prevention of cardiovascular disease, including modifications of diet and physical activity, and cessation of use of tobacco.	DPC, ACS	AE

### B. Continuity Clinic: Medical Knowledge

	<b>Principal Educational Goals</b>	<b>Learning Activities</b>	<b>Evaluation Methods</b>
1.	Expand clinically applicable knowledge base of the basic and clinical sciences underlying the care of patients with chest pain and chronic cardiac disease.	DPC, CC	AE
2.	Access and critically evaluate current medical information and scientific evidence relevant to acute cardiac care.	DPC, CC	AE
3.	Understand indications for aggressive anticoagulant and antiplatelet therapy as well as the mechanisms of action of the various agents.	DPC, CC	AE
4.	Develop and demonstrate in-depth knowledge of the pathophysiology, clinical manifestations, diagnosis and management of cardiac diseases, as seen in an outpatient basis.	DPC, ACS	AE

5.	Develop and demonstrate in-depth knowledge of the principles of diagnosis and management of essential hypertension; ischemic heart disease including unstable angina pectoris and myocardial infarction; congestive heart failure; cardiac arrhythmias especially atrial fibrillation, supraventricular tachycardia, and ventricular arrhythmias; rheumatic heart disease, and congenital heart disease.	DPC, EP, ACS	AE
6.	Develop and demonstrate in-depth knowledge of the indications for, principles, complications, and interpretation of ECG, inpatient rhythm monitoring, exercise and chemical stress tests, electrophysiologic studies, transthoracic and transesophageal echo, nuclear cardiac imaging, right and left heart catheterization, coronary angiography, and percutaneous interventions.	DPC, DSP, EP, ECG	AE, DSP
7.	Fully understand principles of assessment of lifetime cardiovascular risk & cardiovascular risk prevention.	DPC, PCF	AE
8.	Develop in-depth knowledge of the strategies for cessation of use of tobacco.	DPC, PCF	AE

### C. Continuity Clinic: Interpersonal Skills and Communication

	Principal Educational Goals	Learning Activities	Evaluation Methods
1.	Communicate effectively with patients and families in an office setting.	DPC, ACS	AE, ECR
2.	Communicate effectively with physician colleagues and members of other health care professions to assure timely, comprehensive patient care.	DPC, ACS	AE, PR, ECR
3.	Communicate effectively with colleagues when offering consultation service.	DPC, ACS	AE, PR, ECR

### D. Continuity Clinic: Professionalism

	Principal Educational Goals	Learning Activities	Evaluation Methods
1.	Interact professionally toward patients, families, colleagues, and all members of the health care team.	DPC	AE, PR, ECR
2.	Interacting with patients and families in a professionally appropriate manner.	DPC, PC	AE, ECR
3.	Acceptance of professional responsibility as the primary care physician for patients under his/her care.	DPC, PC	AE, ECR
4.	Appreciation of the social context of illness.	DPC	AE, ECR
5.	Effective utilization of ethics knowledge and consultants. This includes guidelines for CPR and DNR and end of life cardiac care.	DPC, ET	AE, PR, ECR

### E. Continuity Clinic: Practice-Based Learning and Improvement

	Principal Educational Goals	Learning Activities	Evaluation Methods
1.	Identify and acknowledge gaps in personal knowledge and skills in care of chronic cardiac patients.	DPC, CC, OWE	AE
2.	Develop real-time strategies for filling knowledge gaps that will benefit patients in the outpatient setting.	DPC	AE

3.	Commitment to professional scholarship, including systematic and critical perusal of relevant print and electronic literature, with emphasis on integration of basic science with clinical medicine, and evaluation of information in light of the principles of evidence-based medicine.	DPC, FS	AE
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## F. Continuity Clinic: Systems-Based Practice

	Principal Educational Goals	Learning Activities	Evaluation Methods
1.	Understand and utilize the multidisciplinary resources necessary to care optimally for chronically ill cardiac patients.	DPC, PC	AE
2.	Collaborate with other members of the health care team to assure comprehensive cardiac care.	DPC, PC	AE
3.	Use evidence-based, cost-conscious strategies in the care of patients with chest pain and other cardiac disease.	DPC	AE
4.	Knowing when to ask for help and advice from senior fellows and attending physicians.	DPC	AE, PR
5.	Effective professional collaboration with residents, other fellows, and faculty consultants from other disciplines such as Radiology and Surgery.	DPC, PC	AE, ECR
6.	Learning by participation in clinic rounds, teaching conferences and other educational activities.	DPC, AR	AE
7.	Effective collaboration with other members of the health care team, including residents, medical students, nurses, clinical pharmacists, occupational therapists, physical therapists, nutrition specialists, patient educators, speech pathologists, social workers, case managers, and providers of home health services.	DPC, PC	AE, ECR
8.	Effective utilization of ethics consultants, including knowing when and how to request consultation, and how best to utilize the advice provided.	DPC, PC	AE
9.	Consideration of the cost-effectiveness of diagnostic and treatment strategies.	DPC, ACS	AE
10.	Ability to lead team, including medical students, residents, nurses, nurse assistants, clinical pharmacist, case manager, and social worker.	DPC, ACS	AE, ECR
11.	Willingness and ability to teach medical students and residents.	DPC	AE, PR

## Objectives and expectations while on this rotation

Fellows are assigned to one faculty physician for clinic experience at The Johns Hopkins Bayview Medical Center. They are expected to become familiar and comfortable with the evaluation and management of patients with known or suspected cardiovascular disease. In addition, they will learn to manage the transition from inpatient/acute care to outpatient/chronic care of such patients; developing an on-going and in many cases, long-term relationship with the patient and family members.

### Learning activities

*Fellows are expected to become competent in the evaluation and long-term management of patients with the following conditions:*

- Possible cardiac symptoms such as chest pain, dyspnea, palpitations, and syncope.

- Known cardiovascular conditions such as coronary artery disease, congestive heart failure, valvular heart disease and arrhythmia.

***Fellows will also be expected to demonstrate the ability to:***

- Effectively communicate with patients and family members and other caregivers regarding appropriate patient care
- Develop an understanding of the systems and resources necessary to effectively care for patients in the outpatient setting.

**Content and methods**

- Direct patient care experience under the supervision and guidance of an attending physician.
- Informal teaching and case discussion with attending physicians.
- Review of appropriate medical literature is encouraged or provided on a PRN basis.

**Supervision:**

- Supervision is provided by the attending physician, who is in clinic at the same time as the fellow, and who is available for immediate consultation and evaluation as needed.
- All patients seen by fellows are evaluated by the supervising attending physician at each visit.
- Test results are reviewed directly, or via printed reports, by the supervising physician on an as-needed basis.
- Fellows are required to create written reports of patient visits which are reviewed by the attending

**Evaluation Process:** fellows will be evaluated on this rotation using a competency-based system in the online E-Value program twice per year.

1. Written evaluation of the fellows will be performed by the supervising attending physician each year, using the on-line E-value system.
2. Supervising attending physicians will provide verbal feedback during each clinic session and formal evaluation (written) to fellows on a bi-yearly basis, or more frequently, as needed.

