

# GOALS AND OBJECTIVES FOR CARDIOLOGY WARDS

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## Goal

Residents get an exposure to a variety of patients with cardiac diseases in the inpatient setting. Through caring for patients admitted through the Cardiac Sciences Unit as well as through the Emergency Department, residents get an opportunity to analyze patient problems, develop clinical skills and make treatment plans for patients with cardiac presentations. After the cardiology wards rotation residents are expected to be able to assess, manage and care for patients with different levels of cardiac presentations.

## Entrustable Professional Activities

### TRANSITION TO DISCIPLINE

- D1 Performing histories and physical exams, documenting and presenting findings, across clinical settings for initial and subsequent care
- D2 Identifying and assessing unstable patients, providing initial management, and obtaining help
- D3 Performing the basic procedures of internal medicine

### FOUNDATIONS OF DISCIPLINE

- F1 Assessing, diagnosing, and initiating management for patients with common acute cardiac presentations in acute care settings
- F2 Managing patients admitted to acute care settings with common medical problems and advancing their care plans
- F3 Consulting specialists and other health professionals, synthesizing recommendations, and integrating these into the care plan
- F4 Formulating, communicating, and implementing discharge plans for patients with common medical conditions from acute care settings
- F5 Assessing and providing targeted treatment for unstable patients and consulting as needed
- F6 Discussing and establishing patients' goals of care
- F7 Identifying personal learning needs while caring for patients and addressing those needs
- F8 Providing and receiving handover in transitions of care

### CORE OF DISCIPLINE

- C1 Assessing, diagnosing and managing patients with complex or atypical acute medical presentations
- C2 Assessing, diagnosing, and managing patients with complex chronic diseases
- C4 Assessing, resuscitating, and managing unstable and critically ill patients
- C5 Performing the procedures of Internal Medicine
- C7 Discussing serious and/or complex aspects of care with patients, families, and caregivers
- C8 Caring for patients who have experienced a patient safety incident (adverse event)
- C10 Implementing health promotion strategies in patients with or at risk for disease

C11 Teaching and assessing junior learners through supervised delivery of clinical care

### **TRANSITION TO PRACTICE**

- P1 Managing an inpatient medical service
- P3 Assessing and managing patients in whom there is uncertainty in diagnosis and/or treatment
- P5 Initiating and facilitating transfers of care through the health care system
- P6 Working with other physicians and healthcare professionals to develop collaborative patient care plans
- P7 Identifying learning needs in clinical practice, and addressing them with a personal learning plan
- P8 Identifying and analyzing system-level safety, quality or resource stewardship concerns in healthcare delivery

### **PRESENTATIONS TO COVER**

Shortness of breath  
Hemodynamic instability/hypotension  
Chest pain  
Cardiac dysrhythmia  
Cardiac arrest  
Hypertension  
Syncope  
Abnormal cardiac enzymes  
Palpitations  
Edema  
Pericardial effusion

### **DIAGNOSES TO COVER**

Congestive heart failure  
Coronary artery disease/ACS  
DVT/PE  
Hypertension  
Endovascular infection  
Pericardial disease  
Valvular disorder  
Cardiovascular risk  
Pulmonary hypertension  
Cardiomyopathy  
Arterial aneurysm/dissection  
Atrial fibrillation  
Other dysrhythmia (not A.fib)

## Objectives (by Stage of Training)

### Transition to Discipline (8 objectives)

#### Medical Expert

1. Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results for the purpose of diagnosis and management, disease prevention, and health promotion (ME2.2)
2. Prioritize issues to be addressed in a patient encounter (ME2.1)
3. Determine the most appropriate procedures or therapies (ME3.1)
4. Implement a patient-centered care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)

#### Communicator

1. Communicate using a patient-centred approach that encourages patient trust and autonomy and is characterized by empathy, respect, and compassion (CM1.1)
2. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
3. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

#### Collaborator

1. Demonstrate safe handover of care, using both verbal and written communication, during a patient transition to a different health care professional, setting, or stage of care (CL3.2)

### Foundations of Discipline (21 objectives)

#### Medical Expert

1. Perform a patient-centered clinical assessment and establish a management plan (ME2)
2. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice (ME1.6)
3. Establish goals of care in collaboration with patients and their families, which may include slowing disease progression, treating symptoms, achieving cure, improving function, and palliation (ME2.3)
4. Establish plans for ongoing care and, when appropriate, timely consultation (ME4)
5. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

#### Communicator

1. Establish professional therapeutic relationships with patients and their families (CM1)
2. Respond to a patient's non-verbal behaviours to enhance communication (CM1.4)
3. Adapt to the unique needs and preferences of each patient and to his or her clinical condition and circumstances (CM1.6)
4. Seek and synthesize relevant information from other sources, including the patient's family, with the patient's consent (CM2.3)
5. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)

6. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
7. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

### Collaborator

1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centered collaborative care (CL1.1)
2. Determine when care should be transferred to another physician or health care professional (CL3.1)
3. Demonstrate safe handover of care, using both verbal and written communication, during a patient transition to a different health care professional, setting, or stage of care (CL3.2)

### Health Advocate

1. Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients (HA1.3)

### Scholar

1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice (SC1.1)
2. Identify, select, and navigate pre-appraised resources (SC3.2)

### Professional

1. Exhibit appropriate professional behaviours and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)
2. Demonstrate accountability to patients, society, and the profession by responding to societal expectations of physicians (PR2.1)
3. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)

## Core of Discipline (28 objectives)

### Medical Expert

1. Perform a patient-centred clinical assessment and establish a management plan (ME2)
2. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice (ME1.6)
3. Establish goals of care in collaboration with patients and their families, which may include slowing disease progression, treating symptoms, achieving cure, improving function, and palliation (ME2.3)
4. Plan and perform procedures and therapies for the purpose of assessment and/or management (ME3)
5. Carry out professional duties in the face of multiple, competing demands (ME1.5)
6. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
7. Recognize and respond to harm from health care delivery, including patient safety incidents (ME5.1)
8. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

## Communicator

1. Provide a clear structure for and manage the flow of an entire patient encounter (CM2.2)
2. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
3. Manage disagreements and emotionally charged conversations (CM1.5)
4. Engage patients and their families in developing plans that reflect the patient's health care needs and goals (CM4)
5. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

## Collaborator

1. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)
2. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts (CL2)
3. Demonstrate safe handover of care, using both verbal and written communication, during a patient transition to a different health care professional, setting, or stage of care (CL3.2)

## Leader

1. Analyze patient safety incidents to enhance systems of care (LD1.3)
2. Engage in the stewardship of health care resources (LD2)
3. Set priorities and manage time to integrate practice and personal life (LD4.1)

## Health Advocate

1. Work with patients to address determinants of health that affect them and their access to needed health services or resources (HA1.1)
2. Work with patients and their families to increase opportunities to adopt healthy behaviours (HA1.2)
3. Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients (HA1.3)

## Scholar

1. Recognize the influence of role-modelling and the impact of the formal, informal, and hidden curriculum on learners (SC2.1)
2. Promote a safe learning environment (SC2.2)
3. Provide feedback to enhance learning and performance (SC2.5)
4. Integrate evidence into decision-making in their practice (SC3.4)

## Professional

1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)
2. Demonstrate a commitment to excellence in all aspects of practice (PR1.2)

## Transition to Practice (25 objectives)

### Medical Expert

1. Perform a patient-centered clinical assessment and establish a management plan (ME2)
2. Prioritize issues to be addressed in a patient encounter (ME2.1)
3. Plan and perform procedures and therapies for the purpose of assessment and/or management (ME3)
4. Carry out professional duties in the face of multiple, competing demands (ME1.5)

5. Implement a patient-centered care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
6. Recognize and respond to harm from health care delivery, including patient safety incidents (ME5.1)

### **Communicator**

1. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
2. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
3. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

### **Collaborator**

1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centered collaborative care (CL1.1)
2. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)
3. Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture (CL2.2)
4. Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care (CL3)

### **Leader**

1. Analyze patient safety incidents to enhance systems of care (LD1.3)
2. Engage in the stewardship of health care resources (LD2)
3. Set priorities and manage time to integrate practice and personal life (LD4.1)
4. Implement processes to ensure personal practice improvement (LD4.3)

### **Health Advocate**

1. Work with patients to address determinants of health that affect them and their access to needed health services or resources (HA1.1)

### **Scholar**

1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice (SC1.1)
2. Integrate evidence into decision-making in their practice (SC3.4)

### **Professional**

1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)
2. Demonstrate accountability to patients, society, and the profession by responding to societal expectations of physicians (PR2.1)
3. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)
4. Demonstrate a commitment to physician health and well-being to foster optimal patient care (PR4)
5. Promote a culture that recognizes, supports, and responds effectively to colleagues in need (PR4.3)