

## Cardiology – Goals & Objectives

- **Participating Site(s):** Inpatient cardiology consult service; coronary care unit (as applicable); outpatient cardiology clinics
- **Duration:** 2-4 weeks
- **Required or Elective:** Required

### Rotation Overview

This rotation provides residents with structured exposure to the prevention, evaluation, and management of cardiovascular disease across inpatient and outpatient settings. The experience emphasizes diagnostic reasoning, interpretation of cardiovascular testing, guideline-directed management, risk factor modification, and high-value, patient-centered care.

### Overall Rotation Goal

The goal of this rotation is for residents to progressively demonstrate the knowledge, clinical skills, and judgment required to evaluate and manage common and high-risk cardiovascular conditions, provide preventive care, and appropriately utilize cardiology consultation and advanced testing.

### Educational Objectives (Aligned with ACGME Competencies)

#### Patient Care

Residents will be able to:

- Obtain a comprehensive cardiovascular history and perform a focused cardiovascular physical examination, including assessment of heart sounds, murmurs, and vascular findings
- Evaluate patients presenting with common cardiovascular complaints such as chest pain, dyspnea, syncope, palpitations, edema, and shock
- Formulate and implement evidence-based diagnostic and management plans for ischemic heart disease, arrhythmias, heart failure, valvular disease, hypertension, and peripheral vascular disease

#### Medical Knowledge

Residents will be able to:

- Explain the pathophysiology and clinical presentation of major cardiovascular disorders
- Interpret electrocardiograms and recognize common and high-risk arrhythmias
- Apply guideline-directed medical therapy and high-value care principles to acute and chronic cardiovascular conditions

#### Practice-Based Learning and Improvement

Residents will be able to:

- Identify personal learning needs related to ambulatory medicine and practice management
- Incorporate feedback from community preceptors to improve efficiency, diagnostic reasoning, and patient care
- Reflect on clinical encounters to enhance future outpatient practice

#### Interpersonal and Communication Skills

Residents will be able to:

- Communicate diagnostic impressions, risks, and management plans clearly to patients and families
- Present cardiovascular cases concisely to consulting and interdisciplinary teams
- Collaborate effectively with cardiology faculty, fellows, nursing, and ancillary staff

## **Professionalism**

Residents will be able to:

- Demonstrate accountability, integrity, and respect in all patient interactions
- Recognize personal limitations and seek appropriate supervision
- Uphold ethical standards and patient confidentiality

## **Systems-Based Practice**

Residents will be able to:

- Utilize diagnostic testing and specialty consultation appropriately to provide cost-conscious, high-value cardiovascular care
- Coordinate care across inpatient, outpatient, and procedural settings
- Identify indications for referral, advanced imaging, and invasive cardiovascular procedures

## **PGY-Level Expectations**

### **PGY-1:**

- Identify common cardiovascular conditions and report findings under direct supervision
- Interpret basic ECG findings and observe advanced diagnostic testing and procedures

### **PGY-2:**

- Develop differential diagnoses and propose diagnostic and management plans with indirect supervision
- Interpret common cardiovascular tests and apply guideline-based therapy

### **PGY-3:**

- Independently manage routine cardiovascular conditions with attending oversight
- Lead care coordination and advise on diagnostic strategies, risk stratification, and referral decisions

## **Teaching and Learning Activities**

- Inpatient cardiology consults and rounds
- Outpatient cardiology clinics
- ECG, stress testing, and imaging review sessions
- Case-based discussions and guideline review

## **Evaluation and Feedback**

Resident performance is evaluated through:

- Direct faculty observation
- End-of-rotation faculty evaluation
- Assessment of clinical reasoning, ECG interpretation, and communication skills
- Milestone-based assessment tools

Residents receive ongoing formative feedback and summative feedback at the conclusion of the rotation.

## **Supervision**

Faculty supervision is provided in accordance with ACGME supervision guidelines and is based on resident demonstrated competence, PGY level, and patient acuity.