

Fellowship In Pediatric Cardiology



1. Information of Course Course Content

Curriculum of Pediatric Cardiology Fellowship:

1. Curriculum of Pediatric Cardiology Fellowship:
1. Basic training in Pediatric cardiovascular examination
2. Clinical skills in echocardiography, electrophysiology, inpatient care, bedside hemodynamic assessment
3. Airway management and mechanical ventilation
4. Vascular access
5. Preoperative stabilisation

Research programs, teaching skills: Clinical Core competency skills : development and assessment § Representation in conferences § Writing a paper and basics of statistics § Staying in touch and staying updated

Teaching scheme: Daily teaching clinical rounds & case discussions, Bedside clinics and discussions. Monthly critical care audit meets, Success cases discussions Discussions on mortality data Monthly statistics of the unit Equipment maintenance

Basic pediatric cardiology to undergraduate and postgraduate students

Journal reading and advances in paediatric cardiology

Case presentations

Hands on echocardiography

Rotation

Allied posting

Rotations in : Cardiac intensive care, inpatient care, electrophysiology, consultation, outpatient care, catheterisation, angiography, echocardiography, adult congenital heart disease

Cardiac intensive care is aimed for the fellow to develop expertise in acute and chronic management of infants and children diagnosed with congenital and acquired heart disease

KEY ACCOUNTABILITIES

The Fellow reports supervised by Dr Sampada Tambolkar ma'am with respect to general operational and clinical issues of the Fellowship.

Specific duties of the Fellow

Daily responsibilities:

To examine pediatric cardiac patients and suggest appropriate treatment

Attend pediatric cardiology references call

Observe and monitor post op pediatric cardiac patients

OTHER responsibilities:

PRESENTATION OF MORTALITY MEET ONCE A MONTH

WEEKLY ONE CASE, PRESENTATION AND JOURNAL CLUB.

TEACHING UGs, PGs

The Fellow is encouraged to undertake a clinical research project, which may take up one day per week. This time may also be used for private study or attending training opportunities outside the department or hospital.

QUALIFICATIONS AND EXPERIENCE

Qualifications required

MD Pediatrics / DNB Pediatrics

Intake Capacity – 1 student Per year

KEY SELECTION CRITERIA

Applicants are expected to be able to provide a high standard of patient care, and possess skills in communication, problem-solving, and organisation, as well as the ability to work both independently as well as in a multi-disciplinary team.

Examination

At the end of his tenure there will be university exam (Theory +Practical) which will be conducted in the presence of external examiner. Examination will carry 500 marks.

Theory : 200 marks

2 papers (Total 200 Marks)

- Paper -1 – Pediatric Cardiology and basics (anatomy, physiology, embryology) - (100marks)
- Paper -2 – Pediatric Cardiology and Recent Advances - (100 marks) bjective structured Clinical and Practical Examination(OSCE) : 10 stations carrying 10 marks each b.Practical Examination- (Total 200 marks)
- Case Presentations
 - 1 long case – (70 marks)
 - 1 short case – (30 marks)
- Table and Viva (100 marks)

Project Work – 100 Marks

Expectation from the Fellow at the end of Fellowship

At the end of his tenure fellow will be developed essential skills in diagnosis and management of pediatric congenital and acquired heart diseases.

CURRICULUM

Basic training in Pediatric emergencies and intensive care:

Fellows are required to make diagnostic and therapeutic decisions based on patient information, current scientific evidence and clinical judgment. They should be able to provide effective counseling with regard to medical issues such as pregnancy and contraception. Fellows should be aware of the unique psychosocial needs that must be met for these patients in transitioning from pediatric to adult care. The Cardiac Intensive Unit rotation is designed for the fellow to develop expertise in the acute and chronic medical management of infants and children diagnosed with congenital and acquired heart disease.

fellows become familiar with all aspects of care for critically ill cardiac patients including: vascular access,

indications for, and limitations and risks of, invasive tests and procedures in critically ill patients principles of pharmacology and relationship with cardiovascular physiology

Airway management and mechanical ventilation

Preoperative stabilization

Cardiopulmonary bypass and its sequelae

Technical aspects of cardiac surgery and postoperative management Mechanical support including ECMO

experience in managing these types of patients: ductal-dependent lesions,

acute heart failure,

Neonates with complex physiology (e.g., hypoplastic left heart syndrome, critical aortic stenosis), severe Ebstein's anomaly, and pulmonary atresia with ventricular septal defect and major aortopulmonary collateral vessels

d-transposition of the great arteries

total anomalous pulmonary venous connection with obstruction anomalous origin of a coronary artery from the pulmonary artery Single-ventricle patients

symptomatic arrhythmias

infectious endocarditis/sepsis

pericardial effusion and tamponade

hypercyanotic episode

Cardiology fellows work closely with critical care, cardiac anesthesia and cardiac surgery fellows in the management of all patients in the CICU, including pre- and post-operative care and participation in invasive procedures.

During the echocardiography laboratory rotation, fellows learn the segmental approach to cardiac diagnosis and the morphologic method of cardiac description and become acquainted with a wide variety of congenital heart defects.

fellows acquire the knowledge and skills necessary to correctly perform and interpret transthoracic echocardiogram, transoesophageal echocardiogram and fetal echocardiogram.

Research programs, teaching skills □ Clinical Core competency skills : development and assessment □ Research dissertation completion □ Organizing a CME □ Representation in conferences □ Writing a paper and basics of statistics □ Staying in touch and staying updated: Virtual PICU

2. Duration : 1 Year

3. Training facility:

Pediatric cardiology OPD is seen by Dr Santosh Joshi, Consultant Interventional Pediatric Cardiologist, MD Paeds, FPC(RGUHS) and is working since last 9 years.

Hospital also Have a High End Simulation training lab for training the newcomers

Teaching Faculty

1. Dr. Shailaja Mane, Professor & Head , Dept of Pediatrics

NMC Registration No 70305

2. Dr. Sampada Tambolkar (Course Coordinator)

Professor, Dept of Pediatrics

NMC Registration No. 2000020782

3. Dr. Sudhir Malwade.

Professor, Dept of Pediatrics

NMC Registration No. 81696

4. Dr. Manojkumar G. Patil

Professor, Dept of Pediatrics

NMC Registration No. 2003020651

5. Dr. Vishnu Biradar

Pediatric Gastroenterologist , Dept of Pediatrics

NMC Registration No. 2003083133

6. Dr Santosh Joshi

Pediatric Cardiologist , Dept of Pediatrics

NMC Registration No. 2003031109

7. Dr. Manoj Matnani

Pediatric Nephrologist , Dept of Pediatrics

NMC Registration No. 88924

8. Dr. Sarita Verma

Pediatrics Hematologist , Dept of Pediatrics

NMC Registration No. 2007/05/2071

9. Dr. Supriya Gupte

Pediatric Endocrinologist , Dept of Pediatrics

NMC Registration No. 2017104974

4. Infrastructure:

Cardiology OPD having GE- VIVID e95 2 dimensional echocardiography machine.

Hospital has CVTS OT and pediatric as well as adult cardiac patients are operated. CVTS recovery room consists of 8 beds for post op monitoring of cardiac patients. There is another 8 bedded CVTS ICU.

Following facilities are available in CVTS Unit

- Portable x-ray, sonography, M.R.I. C.T. facilities
- Defibrillator
- Portable USG & Echocardiography
- ABG facility
- Post-operative surgical care(Peritoneal dialysis, CAPD)

Fees : 1,00,000/- (Rupees One Lakh Only)