Rotational Trans-Esophageal Echocardiography (TEE) Guideline

Educational Purpose of the Rotation

The trans-esophageal echocardiography (TEE) rotation is conducted primarily at Sparrow Health System. This rotation is meant to provide the sub-specialty resident adequate experience to perform TEE independently, by the end of the fellowship. The rotation is conducted in the second and third years of fellowship.

Resources

This rotation is conducted at non-invasive suit at Sparrow Health System. Patient characteristics include both genders with a variety of diagnoses including evaluations for valvular heart disease, patent foramen oval/Atrial septal defects, intra-cardiac thrombus and masses, infective endocarditis, aortic aneurysms etc. Individuals are referred for testing by cardiologists, primary care physicians, MSU Health Team physicians, internal medicine residents, other residency services and neurology service. Sub-specialty residents also get opportunity to do peri-operative and follow up TEE on patients post structural procedures like, TAVR, left atrial occlusion device and ASD closure device. By the conclusion of this training the sub-specialty fellows will have successfully served as primary operator in at least 50 cases.

Rotation Attendings

Ronald Voice MD James Schafer MD Todd Hickox DO Sonali Arora MD Appa Bandi MD Link Chad DO Michael Brown DO Nam Cho DO Gaurav Dhar MD Carlos Fernandez DO Mathew Wilcox DO Peter Yoo MD

Objectives

Sub-specialty residents do 2-3 rotations during the course of the training program. The expectation is that the sub-specialty resident will progress through levels of competence in this area. By the conclusion of all rotations the sub-specialty resident will: Demonstrate increased knowledge of indications, contraindications, probable outcomes and procedural risks.

- 1. Demonstrate proficiency in pre-procedural work up and preparation including obtaining informed consent.
- 2. Demonstrate thorough understanding of conscious sedation and the risks involved.
- 3. Demonstrate understanding of various views and planes of TEE.
- 4. Recognize normal and abnormal anatomy.
- 5. Review the results with the attending and dictate the report in a logical, timely and concise manner.

Instructional Methods

Attending physicians participating in this rotation will:

- 1. Supervise and instruct the sub-specialty residents in accordance with the Supervision Policy.
- 2. Provide an atmosphere allowing for responsible patient care while encouraging sub-specialty residents to assume more primary responsibility as their skills progress.
- 3. Provide sub-specialty residents with ongoing feedback regarding the progression of skills.
- 4. Provide structured teaching opportunities including appropriate literature references/citations for review and discussion.

Evaluation Process

At the conclusion of each rotation:

- 1. Attending physicians will summarize the subspecialty resident's performance on the provided evaluation form. The attending physician will review this evaluation with the sub-specialty resident and both will sign their acknowledgment and return the form to the Program Office for review by the Program Director and inclusion in the file.
- 2. The sub-specialty resident will evaluate the faculty performance as well as the relative value of the rotation on the provided form and return it to the Program Office. In order to insure anonymity, these comments will be entered into a database program and the original forms are destroyed.

Competency Level

Completion of all Cardiac Catheterization rotations would permit the sub- specialty resident to qualify for level 2 competency under the COCATS 4 Guidelines. A log must be kept on all TEE procedures.