

MARSHALL UNIVERSITY SCHOOL OF MEDICINE

CARDIOLOGY FELLOWSHIP

TRAINING PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS/FELLOWS FROM MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE (MUSOM) AND HERSHEL "WOODY" WILLIAMS VA MEDICAL CENTER (VAMC).

This letter of agreement is an educational statement that sets forth important points of agreement between Marshall University School of Medicine (MUSOM) and Hershel "Woody" Williams VA Medical Center (VAMC). This statement of educational purpose does not affect current contracts and institutional affiliation agreements between the two institutions.

This Letter of Agreement is effective from July 1, 2022, and will remain in effect for three (3) years, or until updated, changed, or terminated by the MUSOM Cardiology Fellowship Training Program and/or Hershel "Woody" Williams VA Medical Center. Such changes must be communicated with the MUSOM Office of Graduate Medical Education.

1. Persons Responsible for Education and Supervision

At MUSOM: Ellen Thompson, M.D., Program Director,

At VAMC: Site Director: Tina Sias, MD ; Ellen Thompson, MD; Rameez Sayyed, MD; Robert Feinstein, MD; Richard McBride, MD; Carl Winters, MD: Supervising Faculty of the Department of Cardiovascular Services.

The above mentioned people are responsible for the education and supervision of the residents/fellows while rotating at the Participating Site.

2. Responsibilities

The faculty at the Participating Site must provide appropriate supervision of residents/fellows in patient care activities and maintain a learning environment conducive to educating the residents/fellows in the ACGME competency areas. The faculty must evaluate resident performance in a timely manner during each rotation

or similar educational assignment and document this evaluation at completion of the assignment.

3. Content and Duration of the Educational Experiences

The content of the educational experiences has been developed according to ACGME Residency/Fellowship Program Requirements and are delineated in the attached goals and objectives for each rotation.

As program director, Dr. Ellen Thompson is ultimately responsible for the content and conduct of the educational activities at all sites, including VAMC. The program director, Participating Site director and the faculty are responsible for the day-to-day activities of the residents/fellows to ensure that the outlined goals and objectives are met during the course of the educational experiences.

The day-to-day supervision and oversight of resident/fellow activities will be determined by the specialty service where they are assigned. Nancy Floyd, Program Administrator, is responsible for oversight of some resident/fellow activities, including coordination of evaluations, arrangements of conferences, sick leave, annual leave and benefits.

4. Educational Goals and Objectives

The following goals and objectives will guide resident/fellow training while assigned to VAMC.

- I. The first year Cardiovascular Resident shall complete the following goals and objectives:
 - A. Appropriately evaluate patients for cardiac catheterization procedures.
 - B. Participate in cardiac catheterization procedures including interpretation of angiograms and establishing disposition.
 - C. Appropriately respond to in-patient and emergency department consultations including communication with referring physicians.
 - D. Develop appropriate use of diagnostic testing, both invasive and non-invasive.
 - E. Develop triage skills for urgent and emergent consultations.

5. Assignments

MUSOM will provide to VAMC the name of the resident(s)/fellow(s) assigned to the site, the service they will be training on and other relevant information. Residents/fellows will remain on MUSOM's payroll; remain eligible for all resident benefits, including annual leave, sick leave, and health insurance, etc. Resident's will be covered under MUSOM'S malpractice policy in the amount of one million dollars per occurrence. The policy also provides tail coverage and legal defense.

6. Responsibility for supervision and evaluation of residents

Residents will be expected to behave as peers to the faculty, but be supervised in all their activities commensurate with the complexity of care being given and the resident’s own abilities and level of training. Such activities include, but are not limited to the following:

- Patient care in clinics, inpatient wards and emergencies
- Conferences and lectures
- Interactions with administrative staff and nursing personnel
- Diagnostic and therapeutic procedures
- Intensive Care Unit or Ward patient care

The evaluation form will be developed and administered by the Cardiology Fellowship Training Program. Residents will be given the opportunity to evaluate the teaching faculty, clinical rotation and Participating Site at the conclusion of the assignment.

7. Policies and Procedures for Education

During assignments to VAMC, residents/fellows will be under the general direction of MUSOM’s Graduate Medical Education Committee’s and the Cardiology Fellowship Training Program’s Policy and Procedure Manual as well as the policies and procedures of the Participating Site for patient confidentiality, patient safety, medical records, etc.

8. Authorized Signatures

Hershel “Woody” Williams VA Medical Center

TINA M SIAS Digitally signed by TINA
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Date: 2022.06.28
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325507

Dr. Tina Sias, Site Director

Date

WILLIAM M. Digitally signed by WILLIAM
M. SKEENS 146245
Date: 2022.06.28 13:04:07
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Dr. Na Su, Chief of Staff

06/28/2022

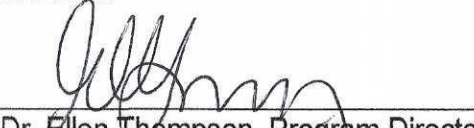
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Jeffrey B Digitally signed by Jeffrey
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Mr. Brian Nimmo, Director

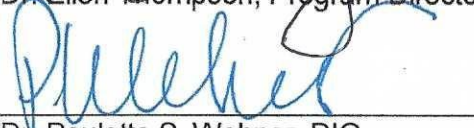
Date

MUSOM



Dr. Ellen Thompson, Program Director

6/29/22
Date



Dr. Paulette S. Wehner, DIO
Vice Dean for GME

6/25/22
Date



Dr. Bobby L. Miller, Interim Dean

6/28/22
Date

Goals and Objectives for the MUSOM Cardiology Fellowship Training Program

LEVEL I

In the first year of the Cardiovascular Disease Fellowship Program, the Fellow is expected to develop understanding and skills in virtually all areas of clinical cardiology. The first year is relatively equally divided between the Veterans Affairs Medical Center, St. Mary's Medical Center and Cabell Huntington Hospital including the PM Consult Rotation.

	GOALS	Patient Care	Medical Knowledge	Practice-Based Learning & Improvement	Interpersonal & Communication Skills	Professionalism	Systems-Based Practice
1.	Provide training in general consultative cardiology	X	X	X	X	X	X
2.	Provide a basic understanding of echocardiography	X	X				
3.	Provide a basic understanding of appropriate use of diagnostic testing and use of results	X	X				X
4.	Provide adequate exposure to the Cardiac Catheterization Suite to a significant comfort level	X	X				X
5.	Provide an environment of life-long learning			X			
6.	Provide strong conference time to apply the basic Cardiovascular Medicine fund of knowledge		X	X			X
7.	Provide adequate critical care training to be comfortable as a consultative Cardiologist in critically ill patients	X	X		X		X
8.	Provide one month of research time to design and institute a project			X			

Level I

	Objectives	Patient Care	Medical Knowledge	Practice-Based Learning & Improvement	Interpersonal & Communication Skills	Professionalism	Systems-Based Practice
1.	The fellow should be comfortable assuming the role of a consultant	X	X	X	X	X	X
2.	The fellow should be able to perform a cardiac catheterization independently.		X				
3.	The fellow should be able to adequately triage and provide appropriate emergency cardiac care	X	X		X	X	X
4.	The fellow should have committed to become a life-long learner in medicine			X		X	
5.	The fellow should have basic echocardiography interpretive skills		X				
6.	The fellow should have independent skill in EKG interpretation, Holter monitoring interpretation	X	X				
7.	The fellow should be comfortable with preoperative consultative assessment	X	X		X	X	X
8.	The fellow should be comfortable in a Continuity Clinic setting	X	X	X	X	X	X
9.	The fellow should be comfortable with communication with consulting				X	X	X
10.	The fellow will competently complete an EHR note with						

	communication to the consulting physician					X	X
11.	The fellow will have either established a basic science research project or completed a basic science project design including IRB approval			X			