



SCOPE OF PRACTICE

**Advanced Heart Failure and Transplant Fellowship
Director of Program: Luis Arroyo, MD
USF Health Morsani College of Medicine
University of South Florida**

This document pertains to the fellow rotations under the auspices of the Advanced Heart Failure and Transplant at Tampa General Hospital and Moffitt Cancer Center. All Accreditation Council of Graduate Medical Education (ACGME), Joint Commission (JC), Agency for Health Care Administration (AHCA), and CMS guidelines pertaining to graduate medical education apply to this scope of practice.

The purpose of this policy is to ensure that fellows are provided adequate and appropriate levels of supervision during the course of the educational training experience and to ensure that patient care continues to be delivered in a safe manner. The privilege of progressive authority and responsibility, conditional independence, and a supervisory role in patient care delegated to each resident is assigned by the program director and faculty members to ensure effective oversight of resident supervision.

Each fellow and faculty must inform each patient of their respective roles in patient care. The fellow (PGY-7) must know the limits of their scope of authority and the circumstances under which he/she is permitted to act with conditional independence. Fellows must communicate with the supervising faculty in the following circumstances:

1. Patients which are found to be in cardiogenic shock.
2. Any patient admitted with the diagnosis or suspicion of acute rejection.
3. All admission of patients with a ventricular assist device.
4. Any patient requiring any form of mechanical assist support (MCS).
5. Immediate post-operative management of heart transplant patient.
6. Immediate post-operative management on patients requiring MCS.
7. Management of patients with intractable ventricular arrhythmias.
8. Patients in shock requiring multiple pressors and/or inotropes

All patient care must be provided under a credentialed and privileged attending physician. The attending physician is ultimately responsible for management of the individual patients and the supervision of the fellow (PGY-7) involved in the care of the patient. Supervision must be documented in the medical record in accordance with the Advance Heart Failure and Transplant Fellowship Program at the Tampa General and University of South Florida compliance guidelines.

Fellows and faculty can report concerns regarding inadequate supervision on the GME website or the hospital reporting system. Any reports will be protected from reprisal. This document is available on the GME website for all residents, faculty, other team members, and patients.

The program follows the ACGME classification of supervision as noted below. The supervising physician can refer to a faculty, fellow, or resident that who has been given supervisory privilege. These supervisory levels are used throughout the Scope of Practice document.

Direct Supervision

- 1) The supervising physician is physically present with the Fellow (PGY-7) during the key portions of the patient interaction.
- 2) The supervising physician and/or patient is not physically present with the Fellow (PGY-7) and the supervising physician is concurrently monitoring the patient care through appropriate telecommunication technology.

Indirect Supervision

The supervising physician is not providing physical or concurrent visual or audio supervision but is immediately available to the Fellow (PGY-7) for guidance and is available to provide appropriate direct supervision.

Oversight

The supervising physician is available to provide review of procedures/encounters with feedback after care is delivered.

The fellowship program has a curriculum for providing knowledge and performance competence that includes: endomyocardial biopsies, right heart catheterization, troubleshooting of VADs, ECMOs and Impellas. Annual decisions about competence are made by the program's Clinical Competency Committee (CCC) to ensure a successful transition and preparation for the next level. All fellows need to maintain current ACLS training.

	Supervising Physician present (Direct)	Supervising Physician is not providing physical or concurrent visual or audio supervision but is immediately available (Indirect)	Supervising physician is available to provide a review of procedures/encounters with feedback after care is delivered (oversight)	
Designated Levels	1	2	3	
CORE PROCEDURES				PGY-7
<ul style="list-style-type: none"> Admit patients and complete inpatient H&P for general ward service Perform patient care and procedures in outpatient setting Admit patients and complete inpatient H&P for general ward service Admit patients to ICU and complete H&P for ICU level of care Treat and manage common medical conditions Make referrals and request consultations Provide consultations within the scope of his/her privileges Render any care in a life-threatening emergency Establish an appropriate immunosuppressive treatment and care of heart transplant patients admitted Initiate and establish appropriate medical regimen in patient admitted with acute or decompensated heart failure Management and care of all VAD patients 				2
Floor Procedures				PGY-7
<ul style="list-style-type: none"> Arterial line placement Cardioversion, emergent Cardioversion, elective Central venous catheterization ECG interpretation panel, emergent ECG interpretation panel, elective 				2

	Supervising Physician present (Direct)	Supervising Physician is not providing physical or concurrent visual or audio supervision but is immediately available (Indirect)	Supervising physician is available to provide a review of procedures/encounters with feedback after care is delivered (oversight)	
Designated Levels	1	2	3	
Procedures				PGY-7
<ul style="list-style-type: none"> • Endomyocardial biopsies • Right heart catheterizations • Coronary angiograms • Insertion of an intra-aortic balloon pump • Troubleshooting of a ventricular assist device (VAD) • Troubleshooting of an ECMO or Impella device • Repositioning of an Impella device under echo guidance • Pericardiocentesis (emergent) • Swan-Ganz catheterization • Trans-esophageal echo (TEE) 				1

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 Luis Arroyo, MD
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 Advanced Heart Failure and Transplant

1/3/2023 | 11:18 CST

Effective Date