



# SCOPE OF PRACTICE

**SCOPE OF PRACTICE**  
**Cardio-Oncology Fellowship**  
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## **Background**

This document pertains to fellows' rotations under the auspices of the Cardio-Oncology program at H. Lee Moffitt Cancer Center and Research Institute. All Joint Commission (JC), Agency for Health Care Administration (AHCA), and CMS guidelines pertaining to graduate medical education apply to this scope of practice.

## **Purpose**

The purpose of this policy is to ensure that the 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.

## **Supervision**

Each fellow must know the limits of his/her scope of authority and the circumstances under which he/she is permitted to act with conditional independence. Fellows are responsible for asking for help from the supervising physician under any circumstance in which the fellow feels uncomfortable making independent clinical decisions.

The Cardio-Oncology program's fellow will be either PGY-IV or PGY-VII depending on the applicants' pool, with preference given to PGY-VII cardiology trainees. The supervision is tailored to the fellows' PGY level, as outlined below.

Supervision may be provided by more senior fellows in addition to attendings. However, 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 residents involved in the care of the patient. Supervision must be documented in the medical record in accordance with the Cardio-Oncology Program at the University of South Florida compliance guidelines.

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

Direct Supervision The supervising physician is physically present with the resident and patient


Indirect Supervision Supervising Physician is not providing physical or concurrent visual or audio supervision but is immediately available (indirect)

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 routine teaching sessions and mentoring. Direct patient evaluation is a core procedure of the program and is evaluated with direct supervision. There are no elective diagnostic/therapeutic procedures that require competence or evaluation as part of this fellowship. Annual decisions about competence are made by the program’s faculty and Program Director, to ensure a successful transition and preparation for the next PGY level and/or independent practice. 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			
Designated Levels	1	2	3			
<b>CORE PROCEDURES</b>					<b>PGY-4</b>	<b>PGY-7</b>
Perform patient care and procedures in outpatient setting					2	2
Treat and manage common medical conditions					2	2
Make referrals and request consultations					3	3
Provide consultations within the scope of his/her privileges					2	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			
Designated Levels	1	2	3			
Render any care in a life-threatening emergency					3	3
<b>Floor Procedures</b>					<b>PGY-4</b>	<b>PGY-7</b>
Arterial blood gas					2	2
Arterial line placement					2	2
Cardioversion, emergent					3	3
Cardioversion, elective					1	2
Central venous catheterization					1	3
ECG interpretation panel, emergent					2	3
ECG interpretation panel, elective					1	2
Transthoracic Echocardiography performance, emergent					1	3
Transthoracic Echocardiography performance, elective					1	2
Transesophageal Echocardiography performance, emergent					N/A	1
Transesophageal Echocardiography performance, elective					N/A	1
Pericardiocentesis (emergent)					N/A	1
Swan-Ganz catheterization					N/A	1
Suturing					2	2
Venipuncture					2	2
Peripheral IV placement					2	2

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Date