

Application for Hosting EACTA/ESA Cardiothoracic and Vascular Anaesthesia Fellowship Programme

Fellowship Information Cardiothoracic and Vascular Fellowship Programme

Institution Name Onassis Cardiac Surgery Center

Address 356 Sygrou Avenue, 176 74 Kallithea, Athens, Greece

Website

Chair Name **Email**

Programme Director

Name

Board Certification(s)

Title/Affiliation

Number of original publications

EACTA, ESA, or other societies membership

If yes, membership's number

Email

Mailing Address

Street

Country **City/Zip code**

Phone **Fax**

Will the Programme director devote sufficient time to provide substantial leadership to the programme and supervision for the fellows? Yes No

Will the Programme director review the fellows' clinical experience logs at least quarterly and verify completeness and accuracy? Yes No

Does the national/international regulatory authority(s) recognizes the institutional CTVA Fellowship Programme? Yes No

After submission of our request to the Central Board of Health to recognize the Fellowship Programme, the Chairman Professor Markou gave a verbal approval. The official written approval will be granted mid 2018.

If yes, please explain

Completion of the programme will be acknowledged by the Department of Anaesthesia and Intensive Care at the host centre in junction with European Association of Cardiothoracic Anaesthesia (EACTA) Yes No

Candidate's requirements

The candidates must be board certified or board eligible according to European residency programme standards Yes No

Language requirements:

Specific requirements towards the attending fellow:

At least Part 1 Diploma and EDIAC
Interest in Cardiac Anaesthesia
Interest in Research

General Programme Information

Aims, goals and objectives of the Fellowship Programme

Aims: i. To train young, promising Anaesthesiologists, ii. To work towards recognizing Cardiac Anaesthesia as an official subspecialty because of ongoing increasing knowledge in the field. **Goals:** i. To share knowledge with young anaesthesiologists, ii. To make the Onassis Cardiac Surgery Center, a European Training Center on cardiac anaesthesiology because of the infrastructure and human resources available. **Objectives:** i. to unify training on cardiac anaesthesia in Europe in accredited centres like the Onassis Cardiac Surgery Center, ii. to create young, well-trained, high quality cardiac anaesthesiologists ready to be employed by specialized cardiac centers.

Information on the Onassis Cardiac Surgery Center and its educational activities

The Onassis Cardiac Surgery Center is a non-profit institution. The hospital was donated to the Greek State by the Alexander S. Onassis Public Benefit Foundation in October 1992 and its operation started in May 1993 and it operates under the supervision of the Ministry of Health. The OCSC has 131 beds (90 on the nursing floors, 20 in SICU, eight in the CCU, 8 in the Pediatric Unit, 3 incubators and two in the day clinic). There are four operating rooms and three cath labs.

Statistics: The average number of open heart surgeries per year is 1.800 without the pediatric cases. In 2017, the mortality rate is for CABG operations 1.03%, CABG & Valves 3.28%, acute dissection & disruption of aorta 22.22%. Overall mortality with the exception of transplants, VADs implantations & acute aneurysms is 2.21%. The average number of TAVI performed per year is 86 and ASD 45. The mitral clip programme will start soon. The anaesthesiologists are already trained. As far as Balloon Pulmonary Angioplasty cases, there have been 32 since the beginning of the programme (December 2016 up to January 2018) but the plan is for 72 cases to be performed per year and that is the number I've included in the clinical skills and responsibilities.

Medical Staff: Five Directors, 19 consultants, 65 doctors. The first fellowship program of the Anaesthesiology Department has just started with two fellows. Their tenure will be 12 month long. There are also one fellow in the Cardiac Surgery Department, three in the Cardiology Department, one has started his tenure and two more are going to start their tenure shortly. There are residents in Cardiac Surgery and 12 residents in the Cardiology Department. Over the years, the Anaesthesiology Department has had residents who were trained for three months each. At the moment, there is one resident in anaesthesiology.

Other educational activities of the Anaesthesiology Department include journal club once per month and presentation of interesting cases once a week. Every three months we'll invite a speaker from different Medical Schools. Once a year we plan to have a one day seminar. This year's seminar is on 3rd November. In our hospital, we accommodate CEEA meetings in which anaesthesiologists from the Onassis Cardiac Surgery Center have an active role in organizing and participating.

Finally, please note that I am the Local Organizer of the EACTA ECHO COURSE which will take place in Athens in June 2018.

Preferred Duration 12 months 24 months

* Of note, the training period should not be interrupted by frequent and/or prolonged periods of secondment to other divisions / departments.

Preferred Programme Training Start: Programme End:

Number of Positions Per Year

Type of fellowship training available:

- Clinical only
 Clinical / Basic Research
 Clinical / Clinical Research
 Basic Research only
 Clinical Research only

If clinical, will the fellows be allowed to work with the patients under supervision Yes No

Comments

We are keen on involving Fellows to the everyday clinical practice (operation room, ICU, Cath Lab, Rounds for Pain Management, Outpatient Dept. for pre-anaesthetic evaluation and Echo Lab which is accredited by EACVI).
 Clinical research activities in cooperation with other departments, namely Cardiac Surgery and Cardiology
 Simulation in Echo

Faculty*

CTV Anaesthesia Faculty - Research Interest and/or Clinical Expertise. * Please, list at least three names.

Name	EACTA member	Certification in Cardiothoracic and Vascular Anaesthesia	Additional Qualifications	Email	Contact Address
Theofani Antoniou	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	-	6 month training in Washington University in St. Louis, Missouri, USA	antoniou@ocsc.gr	356 Sygrou Avenue, 176 74 Kallithea, Athens, Greece

			Accredited in transoesophageal echocardiography		
			Echo grader		
Christina Antzaka	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	-	Fellowship in Cardiac Anaesthesia (Paediatric & Adult), Royal Victoria Hospital, Mc Gill University, Montreal, Canada	antzaka@ocsc.gr	356 Sygrou Avenue, 176 74 Kallithea, Athens, Greece
Mary Vassili	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	-	EDAIC	vassili@ocsc.gr	356 Sygrou Avenue, 176 74 Kallithea, Athens, Greece
Andreas Karabinis	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	-	Professor of Emergency Care, Medical School, University of Athens	karabinis@ocsc.gr	356 Sygrou Avenue, 176 74 Kallithea, Athens, Greece
Click here to enter text.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

Publications lists of the faculty's members in PubMed

Theofani Antoniou: 19
Christina Antzaka: 7
Mary Vassili: 8
Andreas Karabinis: 109

Resources

Check if each of the following is available at the host centre.

Resource	Yes	Number	Working days/week
Total cardiothoracic and vascular ward beds		86	7
Number of ICU beds dedicated to CTV patients		24	7
Is there an emergency department in which cardiothoracic patients are managed 24 hours a day?	x		7
An adequately designed and equipped post-anaesthesia care unit for cardiothoracic patients located near the operating room suite?	x	1	7
Is there monitoring and advanced life support equipment representative of current levels of technology?	x	31	7
Hybrid Operating Rooms	x	2*	2
*Hybrid Operating Rooms- Note:	As far as TEVAR & EVAR, there is no hybrid OR. TAVI, Mitral Clip & BPA are performed in the Cath Lab.		
Cardiac Operating Rooms	x	4	7
Thoracic Operating Rooms	<input type="checkbox"/>		
Vascular Operating Rooms	x	1	2
Catheterisation Labs	x	2	6
Electrophysiology Labs	x	1	5
Pulmonology Labs	x	1	5
Interventional Vascular Suits	<input type="checkbox"/>		
Separate CVICU Facility	<input type="checkbox"/>		
Animal Laboratory for research purposes	<input type="checkbox"/>		
Outpatient Clinic for perioperative evaluation of patients undergoing cardiothoracic and vascular procedures	x	3	5
24-hours acute pain service available for patients undergoing cardiac, thoracic and vascular procedures	<input type="checkbox"/>		
Meeting Rooms	x	1 can be divided into 2	7
Classrooms with visual and other educational aids	x	1 can be divided into 2	7
Study areas for fellows	x	1	5
Office space for faculty members and fellows	x	3	7
Diagnostic facilities	x	14	5
Therapeutic facilities	x	7	7
24-hour laboratory services available in the hospital	x		7
Cardiac stress testing	x	1	5
Cardiopulmonary scanning procedures	x	1	
Pulmonary function testing	x	1	5
Computers and IT support	x	6	6

Resource	Yes	Number	Working days/week
Appropriate on-call facilities for men and women	x	8	7

Clinical Skills and Responsibilities

Will your Programme offer a 12-24 months of fellowship education in fundamental clinical skills of medicine relevant to the practice of CTVA? Yes No

If yes, for each rotation or experience below, specify the duration (in months, four weeks = one month) during the 12-24 months of education in fundamental clinical skills.

Caring for inpatients in:

Cardiac Surgery using CPB

6 months (on average 1.570 cases/year→ av. 392 cases/fellow/6months. Note: in each OR there is an echo machine).

Cardiac Surgery without CPB

1 month (av. 230 cases/year→ av. 10 cases/fellow/month)

Minimally-Invasive Cardiac Procedures

1 week (av. 12 cases/year→ av. 1 case/fellow/week. Expected increase in numbers of minimally invasive procedures will affect the number of cases fellows will participate-we cannot anticipate the number at the moment).

Interventional Cardiac Catheterization (e.g. TAVI, Mitraclip, ASD..)

1 month (av. 86 cases/year→ av. 4 cases/fellow/month)

Electrophysiology Lab (e.g. mapping, ablation, pacemakers, ICDs..)

1 week (av. 9.396 cases/year→av. 784/month→196 cases/week→98 cases/fellow/week)

Robotic Cardiac Surgery

N/A

Heart, Lung, and Heart/Lung Transplants

1 week (av. 10 /year the days will be scattered within the year. Both fellows will participate whenever there is a donor).

ECLS, ECMO, VAD Procedures

2 weeks (av. for all devices 39/year→3,5 cases/month→2 cases/2 weeks)

Echocardiography Lab

1 week (av. 29.698/year→2.474 cases/month→618 cases/week→309 cases/fellow/week. They'll be trained in TTE, TOE, 3D echo).

Thoracoscopic Surgery

N/A

Pulmonary Resection

1 week (av. 10/year→1 case/month. They'll attend surgery whenever it occurs).

Oesophageal Surgery

N/A

Tracheo-Bronchial Surgery

N/A

(Interventional Pulmonology Procedures) – Balloon Pulmonary Angioplasty

1 week (av. 72 cases/year→ 6 cases/month→1 case/fellow/week)

Major Vascular Procedures

1 month (av. 50 cases/year→ 4 cases/month→ 2 cases/fellow/month)

Neurological monitoring during major vascular surgery

1 week (INVOS – BIS and in thoracoabdominal aneurysms ICP and CFS drainage monitor in all major vascular cases. Because of the limited number of cases per month, the Fellows will be trained in so many cases as to cover the week).

Interventional Vascular Procedures

N/A

Acute and Chronic Pain Management for CTVA patients

1 week (all cardiac surgery patients are treated for acute pain. Therefore, 1.800 cases/year→37,5 week→ 10 cases/fellow/1 week)

Basic Research

NO

Clinical Research

2 weeks (The Fellows will participate in two protocols already running on the subjects of TAVI and Neuromonitoring. More protocols are in progress).

Rotations in:

Cardiac Anaesthesia

7 months

Thoracic Anaesthesia

N/A

Anaesthesia for Major supra-inguinal Vascular Procedures

1 month (limited number of cases)

Trans-oesophageal and trans-thoracic echocardiography

1 week in Echo Lab

Medical or surgical Critical Care Rotation

2 months

Inpatient or outpatient cardiology

1 month

Inpatient or outpatient pulmonary medicine

1 week

Extracorporeal perfusion technology (CPB, ECMO, Nova-Lung.)

1 week (except Nova-Lung)

Paediatric cardiothoracic anaesthesia

NO

Basic Research

NO

Clinical Research

1 week

Will all fellows entering the CTVA Programme complete each of the fundamental clinical skills of requirements? Yes No

If no, explain.

Click here to enter text.

In the clinical anaesthesia setting, including nights and weekends, will faculty members at any time direct perioperative CTVA care, involving fellows, for more than two anaesthetizing locations simultaneously? Yes No

If Yes, describe:

The Fellow can offer services simultaneously in the OR, the Cath Lab, Pain Management, ICU and emergencies like a cardiac arrest under the supervision of a Faculty member.

Clinical Responsibility:

The Fellow will participate in perioperative rounds, open heart surgeries (including heart transplant), cath lab procedures, outpatient clinic, acute pain management clinic and ward rounds under the supervision of a Faculty member.

List any other rotations (along with their duration, in months) offered in the Programme to augment fellows' learning.

Cath Lab (2 months), ICUs (2 months), Echocardiography Lab (1 month)

Will advanced subspecialty rotations reflect increased responsibility and learning opportunities? Yes No

Maximum Time in Non-Clinical Activities

9,5 hrs per month

Financial Statement

An employment contract will be signed with the candidate

Yes No

Accommodation options are provided

Yes No

Transportation/travel options are provided

Yes No

Monthly Salary:

Amount

€1.300 before tax plus compensation for on call duty

Currency

Euro

This opportunity is not funded by the centre

Yes No

Source of financial support for the candidate:

- Host centre (monthly salary)
- Candidate's centre
- Scholarship
- Educational grant
- Award
- Candidate's own expenses
- Others

Please, describe

Educational and Academic Programme

Didactic Sessions

Will faculty members' attendance be monitored?

Yes No

Will fellows' attendance be monitored?

Yes No

Will attendance be mandatory for faculty members?

Yes No

Will attendance be mandatory for fellows?

Yes No

Who of the following will provide content at conferences? Check all that apply.

What the topics in

Anaesthesiology faculty members from this department	<input checked="" type="checkbox"/>
Anaesthesiology faculty members from other sites	<input checked="" type="checkbox"/>
Non-anaesthesiologists from the primary clinical site	<input checked="" type="checkbox"/>
Non-anaesthesiologists from the participating sites	<input type="checkbox"/>
Visiting faculty members	<input type="checkbox"/>
Drug/industry representatives	<input checked="" type="checkbox"/>
Fellows	<input checked="" type="checkbox"/>
Others (specify): Click here to enter text.	<input type="checkbox"/>
Others (specify): Click here to enter text.	<input type="checkbox"/>

will be the frequency of following educational the programme's

schedule?

	Weekly	Bi-weekly	Monthly	Quarterly	Semi-annually	Annually
Critical care appraisal of the literature (i.e., journal club)	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality improvement (M&M, QA)	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Board review (e.g., oral exams, keywords)	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grand rounds	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Formal Course Work Available in: INTRANET

Extra-Institutional Educational Conference Support: Yes, active participation at the EACTA Congress with scientific contribution.

In the Previous 5 Years, Fellows were 1st or 2nd Author On*:

Abstracts	N/A	Peer-Reviewed Journal Articles	N/A
Book Chapters	N/A	Other Publications	N/A

Dedicated Research Time: N/A

*There was no fellowship programme in the past up until now. As written in the General Information section, a fellowship programme has just started.

Patient Care

Competency Area	Settings/Activities	Assessment Method(s)
Following standards for patient care and established guidelines and procedures for patient safety, error reduction, and improved patient outcomes.	Implementation of Protocols of care and Guidelines	Make decisions, manage therapies, cooperate with faculties for patient- focused care
Pre-operative patient evaluation and optimization of clinical status prior to the cardiothoracic procedure.	Anaesthesiology Outpatient Exam & Pre-op visit to the Wards	Gather data, order diagnostic test, interpret data
Interpretation of cardiovascular and pulmonary diagnostic test data.	Anaesthesiology Outpatient Exam & Pre-op visit to the Wards	Optimize patient clinical status
Hemodynamic and respiratory monitoring.	Invasive monitoring, TOE, standard respiratory monitoring	Optimize respiratory and hemodynamic patient parameters
Pharmacological and mechanical hemodynamic support.	Choose the appropriate regime according the hemodynamic parameters	Improve patient outcome
Peri-operative critical care, including ventilatory support and peri-operative pain management.	Appropriate hemodynamic and respiratory support for uneventful patient outcome - protocols of pain management (PCA)	Use statistical results for assessment the safety of implemented therapies
Providing anaesthesia care for patients undergoing cardiac surgery with and without extracorporeal circulation.	Using the necessary monitoring and pharmacological regime adapted on patient clinical situation	Assess the improvement of the medical knowledge and competency on how they manage these patients
Providing anaesthesia care for patients undergoing thoracic surgery, including operations on the lung, oesophagus, and thoracic aorta.	Incremental exposure in operation of thoracic aorta operation from program cases to urgent cases	Medical knowledge, clinical performance assessed by supervisors
Advanced-level peri-operative TEE.	Training in the operating room and in the echo lab which is EACVI accredited. Echo rounds, advanced echo lecture	Echo case presentations and assessment the ability of diagnosis. Examination of perform TEE in operating room and ICU Hands-on intra-operative echocardiographic instruction
The ability to independently manage intra-aortic balloon counterpulsation and be actively involved in the management of other extracorporeal circulatory assist devices.	Educated on the management of IABP, LVAD, BiVAD, ECMO in practical-based learning	Discussion with supervisors by using clinical scenarios
Management of cardiopulmonary bypass (CPB).	Theatre/Surgery	Level of knowledge

Medical Knowledge

Indicate the activity (ies) (lectures, conferences, journal clubs, clinical teaching rounds, etc.) in which residents will demonstrate knowledge in each of the following areas. Also indicate the method(s) used to assess competence.

Area of Knowledge	Settings/Activities	Assessment Method(s)
How cardiothoracic diseases affect the administration of anaesthesia and life support to adult cardiothoracic patients.	Curriculum in which included lectures, clinical teaching rounds, journal club, conferences.	Evaluation of resident performance in a small group discussion, during case presentation, oral exam-like format Monthly evaluation of the fellow by 2 faculties
Embryological development of the cardiothoracic structures.	Conferences by specialists in co-operation???? With congenital heart disease dpt.	Oral exam-like format Monthly evaluation of the fellow by 2 faculties
Pathophysiology, pharmacology, and clinical management of patients with cardiac disease, to include cardiomyopathy, heart failure, cardiac tamponade, ischemic heart disease, acquired and	Educational Curriculum for Fellows, Conferences by expertise from congenital heart disease dpt., cardiac failure dpt. Interventional cardiology dpt.	Oral exam-like format, clinical performance ratings Monthly evaluation of the fellow by 2 faculties

Area of Knowledge	Settings/Activities	Assessment Method(s)
congenital valvular heart disease, congenital heart disease, electrophysiologic disturbances, and neoplastic and infectious cardiac diseases.		
Pathophysiology, pharmacology, and clinical management of patients with respiratory disease pleural, bronchopulmonary, neoplastic, infectious, and inflammatory diseases(not applied)	Educational Curriculum, Combined Anaesthesia and ICU Depts on clinical management of patients with respiratory disease in the context of Cardiac surgery	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Pathophysiology, pharmacology, and clinical management of patients with thoracic vascular, tracheal, oesophageal, and mediastinal diseases, to include infectious, neoplastic, and inflammatory processes.(not applied)	Combined lectures with surgeons and intensivists	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Non-invasive cardiovascular evaluation, to include electrocardiography, transthoracic echocardiography, TEE, stress testing, and cardiovascular imaging.	Educational Curriculum, observation of TEE Dept, rotation in echo lab	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Cardiac catheterization procedures and diagnostic interpretation, to include invasive cardiac catheterization procedures, including angioplasty, stenting, and transcatheter laser?? and mechanical ablations.	Rotation	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Non-invasive pulmonary evaluation, to include pulmonary function tests, blood gas and acid-base analysis, oximetry, capnography, and pulmonary imaging.	ICU +everyday basis education	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Pre-anaesthetic evaluation and preparation of adult cardiothoracic patients.	Anaesthesiology Outpatient Dept and Pre op visit	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Peri-anaesthetic monitoring, both non-invasive and invasive (intra-arterial, central venous, pulmonary artery, mixed venous saturation, cardiac output)	Anaesthesia	Oral exam with clinical scenarios Monthly evaluation of the fellow by 2 faculties
Pharmacokinetics and pharmacodynamics of medications prescribed for medical management of adult cardiothoracic patients.	Educational Curriculum	Oral exam with clinical scenarios Monthly evaluation of the fellow by 2 faculties
Pharmacokinetics and pharmacodynamics of anaesthetic medications prescribed for cardiothoracic patients.	Educational Curriculum	Oral exam with clinical scenarios Monthly evaluation of the fellow by 2 faculties
Pharmacokinetics and pharmacodynamics of medications prescribed for management of haemodynamic instability.	Educational Curriculum -Anaesthesiology Department	Oral exam with clinical scenarios Monthly evaluation of the fellow by 2 faculties
Extracorporeal circulation, to include: myocardial preservation; effects of CPB on pharmacokinetics and pharmacodynamics; cardiothoracic, respiratory, neurological, metabolic, endocrine, haematological, renal, and thermoregulatory effects of CPB; and coagulation/ anticoagulation before, during, and after CPB.	Educational Curriculum -Anaesthesiology dpt, -Perfusionist	Structural case discussions, stimulated chart recall Monthly evaluation of the fellow by 2 faculties
Inotropes, chronotropes, vasoconstrictors, and vasodilators.	Educational Curriculum Anaesthesiology dpt	Structural case discussions, stimulated chart recall ,oral exam Monthly evaluation of the fellow by 2 faculties
Circulatory assist devices, to include intra-aortic balloon pumps, left and right ventricular assist devices, and extracorporeal membrane oxygenation (ECMO).	Educational Curriculum be given by Transplantation, Anaesthesiology and Cardiac Failure Departments	Structural case discussions, stimulated chart recall ,oral exam Monthly evaluation of the fellow by 2 faculties
Pacemaker insertion and modes of action.	Rotation in the Electrophysiology dpt.	Structural case discussions, stimulated chart recall ,oral exam Monthly evaluation of the fellow by 2 faculties
Cardiac surgical procedures, to include: minimally invasive myocardial revascularization; valve repair and replacement; pericardial, neoplastic procedures; and heart and lung transplantation.	OR all except neoplastic procedures and lung transplantation	Structural case discussions, stimulated chart recall ,oral exam Monthly evaluation of the fellow by 2 faculties
Thoracic aortic surgery, to include: ascending, transverse, and descending aortic surgery with circulatory arrest; CPB employing low flow and or retrograde perfusion; lumbar drain indications and management; and spinal cord protection, including cerebral spinal fluid (CSF) drainage.	Activities in the OR	Discussion of each case before the operation and literature review.
Oesophageal surgery, to include varices, neoplastic, colon interposition, foreign body, stricture, and tracheoesophageal fistula.	Not applicable	Not applicable

Area of Knowledge	Settings/Activities	Assessment Method(s)
Pulmonary surgery, to include segmentectomy (open or video-assisted), thorascopic or open, lung reduction, bronchopulmonary lavage, one-lung ventilation, lobectomy, pneumonectomy and bronchoscopy, including endoscopic, fiberoptic, rigid, laser resection.	Limited number of segmentectomies when co-existed with heart disease	Case discussion before the operation
Post-anaesthetic critical care of adult cardiothoracic surgical patients.	ICU	Logbook, 4 weeks in ICU
Peri-operative ventilator management, to include intra-operative anaesthetics, and critical care unit ventilators and techniques.	OR and ICU	Logbook
Pain management of adult cardiothoracic surgical patients.	OR, ICU and Wards	Logbook
Research methodology/statistical analysis, the fundamentals of research design and conduct, and the interpretation and presentation of data.	Cooperation with the personnel of the University of Athens. The Fellow is encouraged to be involved with clinical research and to design and conduct a clinical research on cardiac anaesthesia.	Assessment of progress and the ability to design a study and of its progress.
Quality assurance/ improvement.	Quality Control of Indices kept by the Anaesthesiology Dept.	Assessment of Quality Indices and presentation of the work
Ethical and legal issues, and practice management.	Presentation of ethics cases in monthly meetings & debates	Assessment by the Faculty.

Evaluation of Trainees

- The Programme Director will give an appraisal for each fellow every 6 months. Yes No
- The faculty and trainee should agree a joint evaluation both fellow's progress and the training programme, and devise a plan for addressing any perceived difficulties or deficiencies. Yes No
- Training programmes should encourage fellows to provide a written confidential evaluation of the programme. Yes No
- The centre will be able to maintain a register of those fellows who have entered and successfully completed a training programme in order to continue its accreditation as a training centre. Yes No
- At the end of the training period, the centre would acknowledge in writing successful completion of a fellow training. Yes No

Practice-based Learning and Improvement

- Briefly describe one planned learning activity in which fellows engage to: identify strengths, deficiencies, and limits in their knowledge and expertise (self-reflection and self-assessment); set learning and improvement goals; and identify and perform appropriate learning activities to achieve self-identified goals (life-long learning).

Each Fellow is matched with a Mentor Anaesthesiologist. The Mentor is not involved in the assessment (clinical or theoretical) of the Fellow. The Fellow and his/her Mentor meet **at least** once a month to discuss the Fellow's progress and set plans for improvement in case of limitations (e.g. more clinical hours in the area needed).

- Briefly describe one planned quality improvement activity or project that will allow the fellows to demonstrate an ability to analyse, improve and change practice or patient care. Describe planning, implementation, evaluation and provisions of faculty support and supervision that will guide this process.

A quality improvement activity would be how to improve the collection of data of the patients and its analysis. Step 1: study of current situation, Step 2: Design of the new set of data and the way of collecting it, step 3: pilot study, step 4: evaluation of the pilot study and possible improvements, step 5: Implementation of the new method. Supervision of the Fellow by the Mentor.

- Briefly describe how fellows will receive and incorporate formative evaluation feedback into daily practice.

Every staff member makes notes on the Fellow's logbook, regarding clinical misjudgements, gaps in knowledge, strengths and improvements. Every staff member and the Department Head can assess how the Fellow incorporates the feedback he/she has.

- Briefly describe one example of a learning activity in which fellows engage to develop the skills needed to use information technology to locate, appraise, and assimilate evidence from scientific studies and apply it to their patients' health problems. The description should include:

Filling in the electronic anaesthetic record. The Anaesthesiologist of the OR will supervise the Fellow. Any questions will be discussed during the operation.

- Briefly describe how fellows will participate in the education of patients, families, students, fellows, and other health professionals.

The fellow participates actively in the outpatient clinic, the pre-operative evaluation of patients, Thursdays meetings and visits by students.

Interpersonal and Communication Skills

1. Briefly describe one learning activity in which fellows demonstrate competence in communicating effectively with patients and families across a broad range of socioeconomic and cultural backgrounds, and with physicians, other health professionals, and health-related agencies.

Communication with the patient's family in the perioperative period under the supervision of faculty.

2. Briefly describe one learning activity in which fellows demonstrate their skills and habits to work effectively as members or leaders of a health care team or other professional group. In the example, identify the members of the team, responsibilities of the team members, and how team members communicate to accomplish responsibilities.

Participation of the Fellow in the Blue Code team. The Fellow gets feedback from the members of the team. A report is also sent to the Mentor of the Fellow, and the Mentor advises, discusses and makes plans for improvement of non-technical skills. Non technical skills workshop is regularly yearly held by the Hellenic Society of Anaesthesiology. The Blue Code Team is consisted of doctors on duty, that is a cardiologist, an anaesthesiologist and a cardiac surgeon, and nurses. The Cardiologist is the leader of the team and performs CPR, the anaesthesiologist intubates and ventilates the patient and the cardiac surgeon is waiting to perform emergency thoracotomy if needed.

3. Briefly describe how fellows will be provided with opportunities to act in a consultative role to other physicians and health professionals related to clinical information systems.

The Fellow will educate the nursing personnel.

4. Briefly describe how fellows will be provided with opportunities to maintain comprehensive, timely, and legible medical records, if applicable.

The Fellow will be responsible to fill the pre-anaesthetic record in detail. There will be assessment by the Mentor.

5. Briefly describe how fellows will maintain a comprehensive anaesthesia record for each patient, including evidence of pre- and post-operative anaesthesia assessment, an ongoing reflection of the drugs administered, the monitoring employed, the techniques used, the physiologic variations observed, the therapy provided as required, and the fluids administered.

The Fellow will be trained in using the electronic anaesthetic record (INOVIAN SYSTEM). Then, s/he will be responsible for maintaining the patients' records under Faculty supervision.

6. Briefly describe how fellows will create and sustain a therapeutic relationship with patients, engage in active listening, provide information using appropriate language, ask clear questions, provide an opportunity for comments and questions, and demonstrate sensitivity and responsiveness to cultural differences, including awareness of their own and their patients' cultural perspectives.

Close pre-and postoperative communication and assessment of patients with a staff member if necessary.

Professionalism

Briefly describe the learning activity(ies), other than lecture, by which fellows demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles, including: compassion, integrity, and respect for others; responsiveness to patient needs that supersedes self-interest; respect for patient privacy and autonomy; accountability to patients, society, and the profession; and sensitivity and responsiveness to a diverse patient population, including to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.

Close pre-and postoperative communication and assessment of patients with a staff member if necessary.

Systems-based Practice

1. Describe the learning activity(ies) through which fellows achieve competence in the elements of systems-based practice: working effectively in various health care delivery settings and systems, coordinating patient care within the health care system; incorporating considerations of cost-containment and risk-benefit analysis in patient care; advocating for quality patient care and optimal patient care systems; and working in inter-professional teams to enhance patient safety and care quality.

The Fellow can participate in working groups and Committees and functions of the hospital in order to develop competence of systems-based practice. S/he will participate in the M+M Meetings, Case Discussion Meetings, Internal Auditing of the Hospital as required by the ISO 9001:2008, Journal Clubs.

2. Describe an activity that fulfils the requirement for experiential learning in identifying system errors and implementing potential systems solutions.

Study of the hospital literature on Quality (quality protocols, procedures, etc), daily monitoring of implementation and drafting proposal for implementing quality improvement.

EACTA/ESA Biennial Reviewers 'Visit (for 2-days)

Dates proposed for the visit (at least 3): **27 – 28 June 2018** or **27 – 28 September 2018** or **29 – 30 November 2018**

I hereby accept the regulations of the Hospital visiting especially to take in charge the travel costs and the hotel accommodation of the 2 reviewers on the most reasonable base. Yes No

Other Comments:

During the EACTA Echo Course in Athens next June, there will be a tour of the Onassis Cardiac Surgery Center for those interested. Date will be announced.

To be completed by the Head of department or the authorised deputy.

Please fill in all required fields and send to eacta@mci-group.com