





Building an Interventional Cardiology Education Program

Mike Carlozzi, RN, BSN, Eric Harrington, RN, BSN, Lisa Hird, RN, MSN, Lana Gavin, RN, MS, CCRN

Beth Israel Deaconess Medical Center

Introduction/Problem

Interventional cardiology is a highly specialized subset of intensive care nursing but does not fit the typical intensive care educational model. As a result there is a lack of centralized education that fits the needs of the department. The fast paced, ever evolving nature of this discipline creates many barriers to developing, implementing, and maintaining an educational infrastructure. There was no designated Interventional Cardiology Nurse Specialist or Unit Based Educators (UBE) who had time to devote attention to these initiatives.

Aim/Goal

- Create and establish a formal plan for a structured educational program
- Improved quality of nursing care
- Encourage staff personal growth and development
- Promote interdisciplinary collaboration

The Team

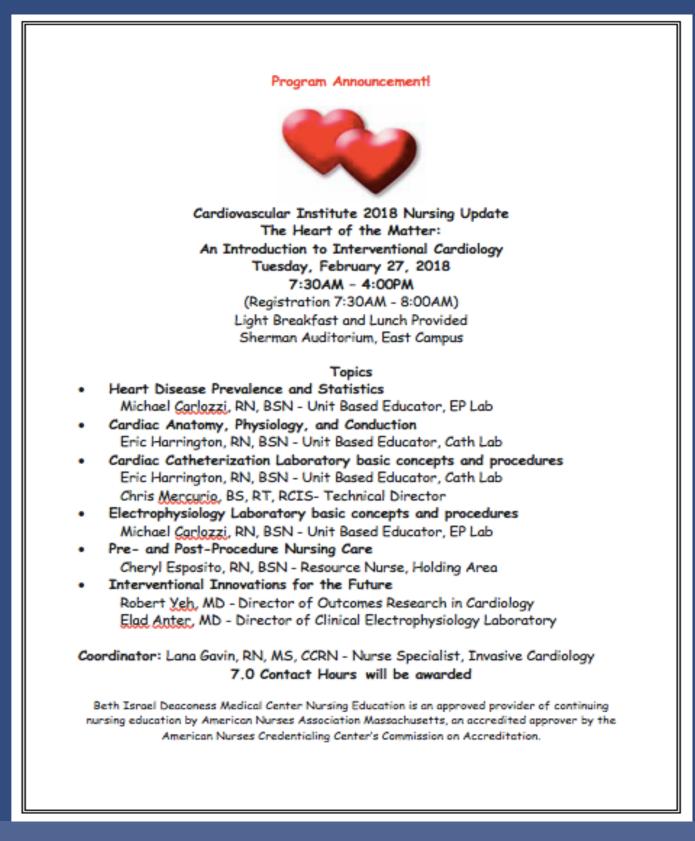
- Mike Carlozzi, RN, BSN- UBE Electrophysiology Lab
- > Eric Harrington, RN, BSN- UBE Cardiac Catheterization Lab
- > Lana Gavin, RN, MS, CCRN- Nurse Specialist
- Lisa Hird, RN, MSN- Nurse Director
- > Peter Zimetbaum, MD- Associate Chief and Director Clinical Cardiology
- Duane Pinto, MD, MPH- Director Cardiac Catheterization Laboratory

The Interventions

- > Acquired a dedicated Nurse Specialist and created dedicated time for UBEs
- > Created a multidisciplinary syllabus for a collaborative educational series
- Obtained contact hours for programs provided
- Incentivized program attendance
- Developed a staff driven quarterly Grand Rounds Series
- Created an Annual Competency and Compliance Day program
- > Developed and presented a CVI nursing conference for all BIDMC nurses

Progress to Date

2017 Invasive Cardiology Educational Calendar		
January 2017	Sudden Cardiac Death	Al Buxton, MD
February 2017	Anti-Arrhythmic	Peter Zimetbaum, MD
	Medication Review	
March2017	STAFF GRAND ROUNDS:	Keith Tottenham, RN, BS
	Basic Hemodynamics	Lana Gavin, RN, MS
	Review	
April 2017	Anti-Coagulation	Peter Zimetbaum, MD
	Medication Review	
May 2017	Annual Competency Day	ALL STAFF
June 2017	STAFF GRAND ROUNDS:	John Whitlock, RN, MS
	ECMO in an Hour	Joe Previtera, RT
July 2017	Research and its real world	Mike Gibson, MD
	application	
August 2017	Electrophysiology Mapping	Fernando Contreras, MD
	Systems	
September 2017	STAFF GRAND ROUNDS:	Edina Bonassin
	Impella Simulation	Lana Gavin, RN, MS
October 2017	What the LOA are we	Eric Harrington, RN, BSN
	looking at?	
November 2017	Device Codes and Modes	Mike Carlozzi, RN, BSN
December 2017	STAFF GRAND ROUNDS:	ALL STAFF
	Pig Heart Dissections	



Example of 2017 monthly syllabus for structured education Program announcement for 2018 CVI conference at BIDMC

For more information, contact:

Lana Gavin, RN, MS, CCRN lfgavin@bidmc.harvard.edu



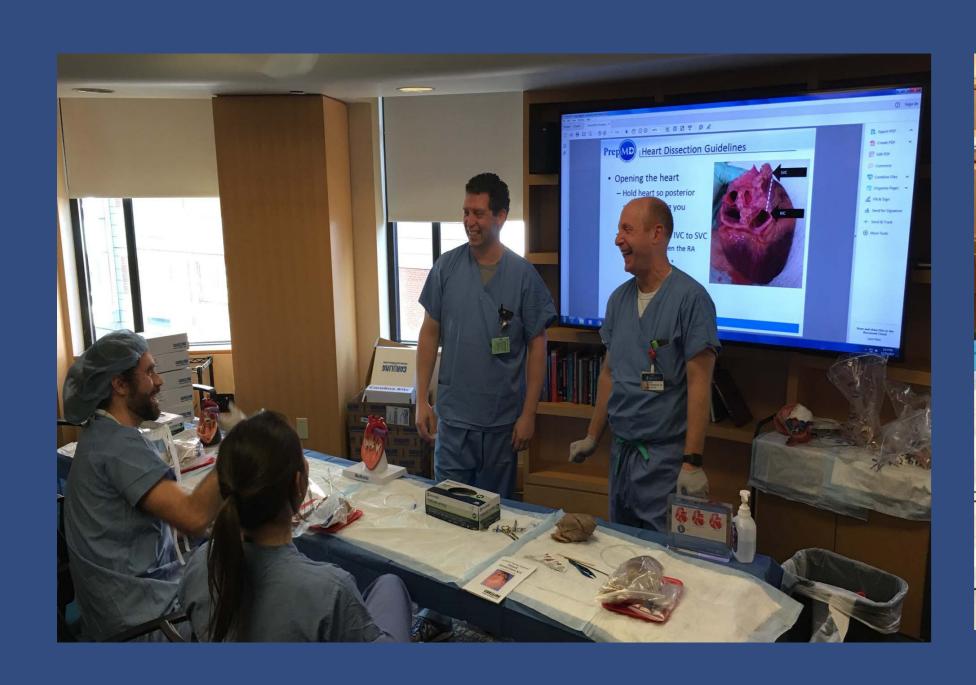


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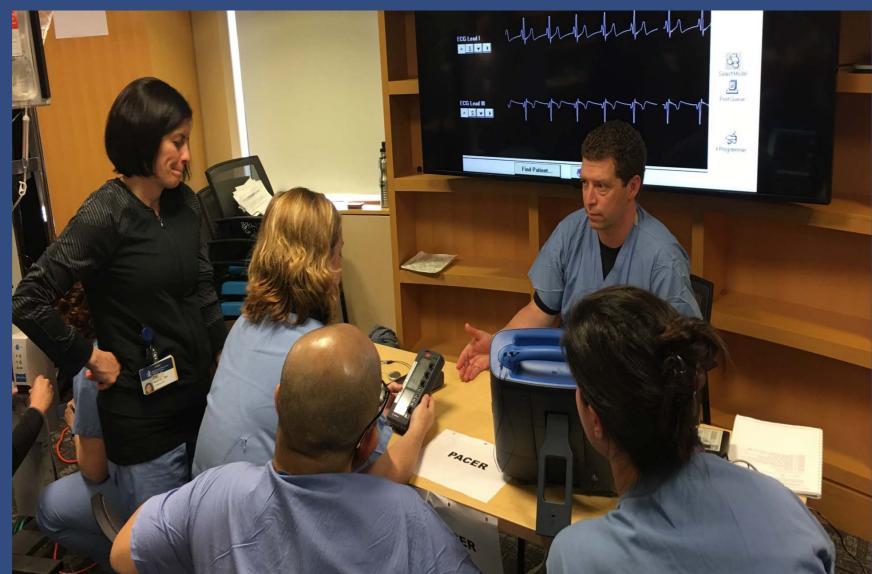
More Results/Progress to Date





December 2017 Program: Pig Heart Dissections
Mike Carlozzi and Eric Harrington- UBEs





EP Grand Rounds Sudden Cardiac Death Evaluation Comments

II Recommendations For Future Activities

VF most common response

HF treatment current trends

Device options

Impella/Balloon pump

VI General Feedback

I am able to identify arrhythmias better

Great overview of recent/new trends of treating SCD

Better understanding of SCD

Strengthens knowledge of topic

Better understanding of EP

Able to share more knowledge with patients

More knowledgeable of warning sign to VF in turn may defib quicker

Teaching staff about rationale for delayed ICD therapy, have included this but will expand in intermediate EKG course

Will include in future teaching

Have a better understanding of the detriments of ICDs and will give better patient education

2017 Nurse Advance Evaluations
21 sessions/1044 respondents
Recommendations for Future Activities
Most requested topics:

- End of life care
- Cardiology topics
- . Self-care
- Management of addictions
- Challenging patients
- Example Staff Evaluation response from EP program: "Sudden Cardiac Death"
- 2017 Nurse Advance evaluation results identified cardiology topics as the second most requested topic for future activities. Requests focused primarily on new and innovative interventions but also included: telemetry, EKG, heart failure, LVAD, TAVRs, acute MI, post-cath complications, cardiac drugs, ablations, and general cardiovascular care updates

Lessons Learned

- Buy in from staff and leadership was essential for program implementation and sustainability
- Nursing staff have enthusiastically welcomed the new education program
- Physicians have recognized benefits of designated education time as it relates to best practice and safe patient care

Next Steps

- Quantify nursing staff experience of educational program
- Expand interventional cardiology education within the hospital and surrounding areas
- > Consider developing a consortium for new procedural nurses

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