Adult Cardiovascular Anesthesia Fellowship
(with option for 2nd year pediatric with cardiovascular focus)

Duration: 1 year (adult only) or 2 years for pediatric option

ADULT 1 YEAR FELLOWSHIP:

Number of positions: 1 to 2 fellows per year
Name of Hospitals involved: Jewish General Hospital; Royal Victoria Hospital, MUHC
Fellowship supervisors: Dr. Bergez Mistry (JGH) and Dr. Vesselina Koeva (RVH)
Type of Fellowship: This is a clinical fellowship. There is opportunity to become involved with research and it is highly encouraged.

Mission statement: To provide clinical training towards comprehensive academic knowledge in the field of adult cardiac anesthesia and transesophageal echocardiography and clinical proficiency in providing the highest standard of anesthetic care for adult cardiac patients. This is a twelve-month clinical cardiac anesthesia fellowship with time equally divided between two hospital sites, the Sir Mortimer B. Davis Jewish General Hospital and the McGill University Health Centre (Royal Victoria Hospital). Approximately 1400 cases are performed annually between the two hospitals. This allows the fellow to have exposure to a wide variety of cases including CABG (both with and without CPB), single or multiple valve replacement or repair, and combined coronary and valve procedures. As well, ascending aortic and aortic arch surgery with deep hypothermic arrest, a cardiac transplantation, and placement of ventricular assist devices round about the fellow’s experience. The fellow will also be exposed to highly specialized procedures including endovascular thoracic aortic repair, percutaneous closure of congenital cardiac defects. The fellow will have sufficient opportunity to acquire the specialized knowledge and technical skills in order to function as an independent consultant cardiac anesthesiologist at the completion of the fellowship. Transesophageal echocardiography plays a prominent role in cardiac anesthesia and during the fellowship the trainee will have sufficient opportunity to acquire the technical skill necessary to perform diagnostic examinations as well as develop expertise using TEE as a monitoring tool. Teaching is under the direction of TEE board-certified cardiac anesthetists and trainees are expected to become TEE board-certified on completion of their training. The primary responsibility of the fellow is to provide expert cardiac anesthetic care to patients presenting for cardiac surgery. The level of responsibility is graded with increasing autonomy as the trainee progresses. The trainee is always paired with a staff cardiac anesthesiologist. There is opportunity to become involved with research and it is highly encouraged. Both hospitals are training locations for residents in anesthesia. There is also the Opportunity to become involved in the teaching of anesthesia residents.

Transesophageal Echocardiography
The cardiac fellow is expected to perform a complete echocardiographic evaluation and report for each patient. During the training period, the cardiac fellow is expected to complete the required number of echocardiographic cases to achieve an advanced level of training in perioperative TEE as defined in the Canadian Guidelines for training in perioperative TEE. It is expected that the trainee will achieve certification by the National Board of Echocardiography in advanced perioperative transesophageal echocardiography by the end of his training.
SECOND YEAR PEDIATRIC OPTION WITH CARDIOVASCULAR FOCUS:

Interested candidates can apply for a 2nd year option to follow the adult year, which is meant to provide pediatric and pediatric cardiovascular experience. Fellows in the two year fellowship will spend their first year performing the adult cardiovascular fellowship as described above. The second year will be spent at the Montreal Children’s Hospital.

**Supervisor (pediatric) Gianluca Bertolizio**

**Length of Pediatric Option:** 1 additional year

**Mission Statement:** This 12 month option is meant to expose fellows to general pediatric practice, with a focus on exposure to cardiovascular procedures in this population. The fellow will spend their time in either a general pediatric room, or in a cardiovascular oriented room. The Montreal Children’s Hospital has a pediatric cardiac surgery program, with roughly one to two procedures per week. In total around 100 cardiac cases are performed per year, 70 of which are pump cases. In addition the hospital has an active cardiac cath lab which performs non-invasive cardiac procedures one to two times per week. This works out to about 80-100 cases per year.

The fellow will participate in cath lab rounds at MCH which includes review of imaging and complex case discussion. The fellow might be able to spend time in the cardiology echo lab, which will provide echocardiography experience with congenital malformations and evaluation post repair. There will be an opportunity to provide anesthetic management for adult cardiac congenital patients who are coming for cardiac surgery as well.

The fellow would be expected to be in the operating room for 4 days during the week. One non-clinical day per week will be granted for academic endeavors.

The trainee is expected to perform call duties with a maximum of 8 calls per month. Call begins at 15:30 on weekdays, and 7:00 on weekends. The fellow will be expected to be on call a maximum of 3 stat holiday weekends in 12 months. Calls will be scheduled to minimize disruption to cardiac exposure.

The fellow will be expected to participate in Thursday morning departmental rounds, Thursday afternoon resident/fellow rounds and the McGill department of anesthesia journal club. Support will be provided to allow the candidate to attend a scientific meeting to present a paper or scientific exhibit if the research was carried out by the fellow whilst in the department of anaesthesia at The Montreal Children’s Hospital and the meeting is approved by the department. The fellows will have access to the McGill University, Montreal Children’s Hospital and Departmental libraries. The fellow will also have access to a computer.