# RCGP Curriculum Supercondensed Curriculum Guide

## CARDIOVASCULAR HEALTH

#### Role of the GP

- Manage the risk factors for cardiovascular disease as an essential part of health promotion activity in primary care. You should be able to describe the key research findings that influence management of cardiovascular risk and disease. A large part of our work in primary care involves working with patients to engage them in making healthy lifestyle choices, and limiting unhealthy behaviours
- Communicate the risk of cardiovascular disease clearly and effectively in a nonbiased manner, and use disease registers and data-recording templates effectively for opportunistic and planned monitoring
- Manage cardiovascular emergencies in primary care
- Accurately diagnose and manage symptoms that may be caused by cardiovascular conditions
- Be aware of the impact that cardiovascular disease may have on disability and
- fitness to work, as well as the legal obligations relating to driving. You should also be able to recognise the cultural significance attached to heart disease
- Be aware of the potential psychological and social impact of cardiovascular conditions
- Advise on cardiovascular screening, such as the UK Aortic Aneurysm screening programme.

## Knowledge and Skills Self-Assessment Guide

#### Symptoms and Signs

- Cardiac murmurs
- Chest pain (including factors suggestive of cardiac origin)
- Circulatory symptoms of ischaemia, thrombosis, chronic arterial and venous insufficiency
- Dyspnoea
- Oedema
- Palpitations and arrhythmias
- Syncope, dizziness, and collapse including non-cardiovascular causes
- Symptoms and signs of stroke/Transient Ischaemic Attack (TIA).

## Knowledge and Skills Self-Assessment Guide

#### **Common and Important Conditions**

- Acute cardiovascular problems including cardiac arrest, acute coronary syndrome, acute myocardial infarct, acute left ventricular failure, dissecting aneurysms, malignant hypertension and lifethreatening arrhythmias, cardiogenic shock, acute ischaemia of limbs and bowel, TIA, and stroke
- Arrhythmias including conduction defects such as atrial fibrillation and flutter, heart block, supraventricular tachycardia, ventricular rhythm abnormalities
- Cardiovascular conditions for which anticoagulation may be relevant such as Atrial Fibrillation (AF), myocardial ischaemia, peripheral vascular disease, and TIA/stroke (including heparin, thrombolysis indications, oral anticoagulation).

## CARDIOVASCULAR HEALTH

## Knowledge and Skills Self-Assessment Guide

#### Common and Important Conditions (continued)

- Cardiomyopathies: primary and acquired, including dilated, hypertrophic obstructive
- Cerebral disease for which cardiovascular risk factors are important e.g., stroke, vascular dementia (see also Neurology Topic Guide)
- Circulation disorders including:
  - Arterial problems such as peripheral vascular disease, vasculitis, aneurysms (cerebral, aortic, and peripheral), arterial ulcers; and
  - Venous problems such as venous thromboembolism, pulmonary embolism, Raynaud's disease, varicose veins, venous ulcers
- Congenital heart disease such as coarctation of the aorta, Ventricular Septal Defect (VSD), Atrial Septal Defect (ASD), Patent Ductus Arteriosus (PDA) and presentation of these both in children and adults
- Coronary heart disease including complications such as mural thrombus, ventricular aneurysm, and rhythm disturbance
- Drug-induced heart disease (e.g., secondary to cancer treatment with chemotherapy/radiotherapy, recreational drugs)
- Heart failure: acute and chronic including left ventricular dysfunction, right heart failure, and cor pulmonale
- Hypertension: essential (and its classification into stages), secondary, and malignant
- Infections such as viral myocarditis, infective endocarditis, pericarditis, rheumatic fever, and complications
- Complications and malfunction of pacemakers relevant to primary care
- Pulmonary hypertension and its causes (for example: fibrotic lung disease and recurrent pulmonary emboli)
- Risk factors for coronary heart disease and other thromboembolic diseases such as lipid disorders, diabetes, hypertension
- Valvular problems such as mitral, tricuspid, pulmonary and aortic stenosis, and regurgitation.

## Knowledge and Skills Self-Assessment Guide

**Examinations and Procedures** 

- Cardiovascular system examination including methods for monitoring blood pressure and pulse oximetry
- Use of emergency equipment, including defibrillator, and oxygen delivery
- Emergency cardio-pulmonary resuscitation.

#### Knowledge and Skills Self-Assessment Guide

#### Investigations

• Knowledge and application of current risk assessment tools such as CHA2DS2VASc and ORBIT for atrial fibrillation, QRISK for cardiovascular risk.

# CARDIOVASCULAR HEALTH

## Knowledge and Skills Self-Assessment Guide

#### Investigations (continued)

- Relevant blood investigations such as cardiac enzymes, natriuretic peptides, or D-dimer
- Investigations including home and ambulatory BP monitoring, electrocardiogram (ECG), exercise ECG, 24 hour and event monitoring ECGs, echocardiography, venous dopplers and Ankle Brachial Pressure Index (ABPI) measurement.
- Additional investigations and interventions such as coronary angiography and stents, perfusion scanning, and CT scans.

## How this might be tested in MRCGP

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- Interpreting ECG tracings
- Medical management of hypertension
- Cardiovascular risk assessment.

## SCA

- Man is concerned that he may have heart disease having experienced chest pain when he exercises at the gym
- Woman with well-controlled heart failure has increasing exertional dyspnoea over the past fortnight
- Father is concerned about sudden death in young athletes and requests a routine ECG for his 12-year-old son who has joined a running club.

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- Having to explain their need for a pacemaker to a patient who has not understood the nature of their condition
- Log entry about the logistics and value of the practice coronary heart disease clinic
- Consultation Observation Tool (COT) about advice for a man requesting a calcium score after a private medical examination when you are unsure about the evidence for this.

# **LEARNING OPPORTUNITIES (Examples)**

## **Core Content**

#### • Communication and consultation

- Person-centred, culturally-sensitive approaches to heart disease and risk factors, including how to explain diagnoses sensitively (e.g., 'heart failure')
- Communicating risk (e.g., QRISK, decisions about anticoagulation)
- Holistic care
  - The impact of cardiovascular disease on the individual (e.g., daily activities, work, driving)
- Being able to differentiate between the normal and abnormal (e.g., heart sounds or interpreting an ECG)
- Prescribing
  - Safety (e.g., DOAC and creatinine clearance)
  - Polypharmacy
- Teamworking
  - Care transition between paediatric and adult specialist services
  - o Multidisciplinary care in the community
- Health promotion and prevention
  - Supporting patients to modulate risk factors.

## **Primary Care**



## Acute Care



- Management of cardiovascular emergencies (e.g., cardiac arrest, stroke, pulmonary embolism)
- Management of acute presentations (e.g., chest pain, palpitations, syncope).

#### **Multidisciplinary Team**

- Coordinating care with community teams (e.g., heart failure, cardiac rehabilitation) and secondary care (e.g., cardiology, stroke, vascular surgery)
- Using the whole primary care team to support the patient to:
  - manage their cardiovascular risk factors (e.g., weight, smoking)
  - $\circ$   $\;$  improve their overall health and wellbeing.



- Systems for managing the cardiovascular disease registers and supporting patient care
- Managing risk and complexity, alongside comorbidities and polypharmacy
- Systems for identifying patients who may benefit from lifestyle interventions, considering the social determinants of health
- Coordination of end-of-life pathways
- Quality improvement (e.g., ensuring eligible patients are offered a statin).

## **Other Specialties**

- A&E
- Cardiothoracic Surgery
- Genetics
- Haematology
- Paediatrics
- Palliative care
- Renal
- Respiratory
- Transplant Medicine.

