



Brian P. Kemp
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Greg Dozier
Commissioner

Instructional Faculty Consortium Committee (IFCC)

Cardiovascular Technology

Date: February 19th, 2021

Time: 9:00 am – 12:00 pm

Location: WebEx

Meeting Facilitator: Sasha Kahiga

Recorder: Isis Zometa

Attendees

- 1) Amy Holloway- VPAA, Atlanta Technical College
- 2) Capre Mitchell- ECHO Instructor, Ogeechee Technical College
- 3) Crista Resch- Clinical Coordinator, GA Northwestern Technical College
- 4) Dawn Irwin-, Instructor, GA Northwestern Technical College
- 5) Isis Zometa- Program Director, Gwinnett Technical College
- 6) Janice Bush- Program Coordinator, Southern Crescent Technical College
- 7) Jessica Smith- Clinical Coordinator, Southern Crescent Technical College
- 8) Jewel Wise- EKG Instructor, Southern Crescent Technical College
- 9) Kathy Johnson- Lead ECHO Instructor, Gwinnett Technical College
- 10) Nina Madden- Program Director, GA Northwestern Technical College
- 11) Rebecca Alexander-VPAA, Gwinnett Technical College
- 12) Regina Kiefer- Program Director, Central GA Technical College
- 13) Sasha Kahiga- Curriculum Program Specialist, TCSG
- 14) Saundra King- Sr. Executive Director of Academic Affairs, TCSG
- 15) Steve Pearce- VPAA, Southern Crescent Technical College

Agenda Topics/Discussion

Welcome

Sasha Kahiga welcomed all participants and asked everyone to sign in using the WebEx chat to ensure their attendance is captured and recorded. Sasha introduced herself and asked each participant to introduce themselves. Sasha provided a few housekeeping points and provided a PowerPoint overview, explaining how to navigate the WebEx button options.



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Review of Agenda

Sasha reviewed the agenda and asked the group if other items needed to be added for discussion. The group agreed that the agenda addressed the topics for discussion.

TCSG AA Department & IFCC Overview

Sasha provided the meaning of the IFCC– Instructional Faculty Consortium Committee and its purpose. She provided the ListServ information to the group explaining that it’s the official line of email communication between the faculty & TCSG. Sasha also discussed the Academic Affairs (AA) webpage as a point of reference for instructors. She explained that the AA link is where instructors can locate the AA Team's contact information, links to the curriculum database (KMS), faculty training opportunities, IFCC agenda, and meeting minutes. She will provide the link within the minutes of the meeting.

AA Webpage Link: http://teched.tcsg.edu/academic_affairs.php

DMS ListServ: SONOCARD-L@LIST.TCSG.EDU

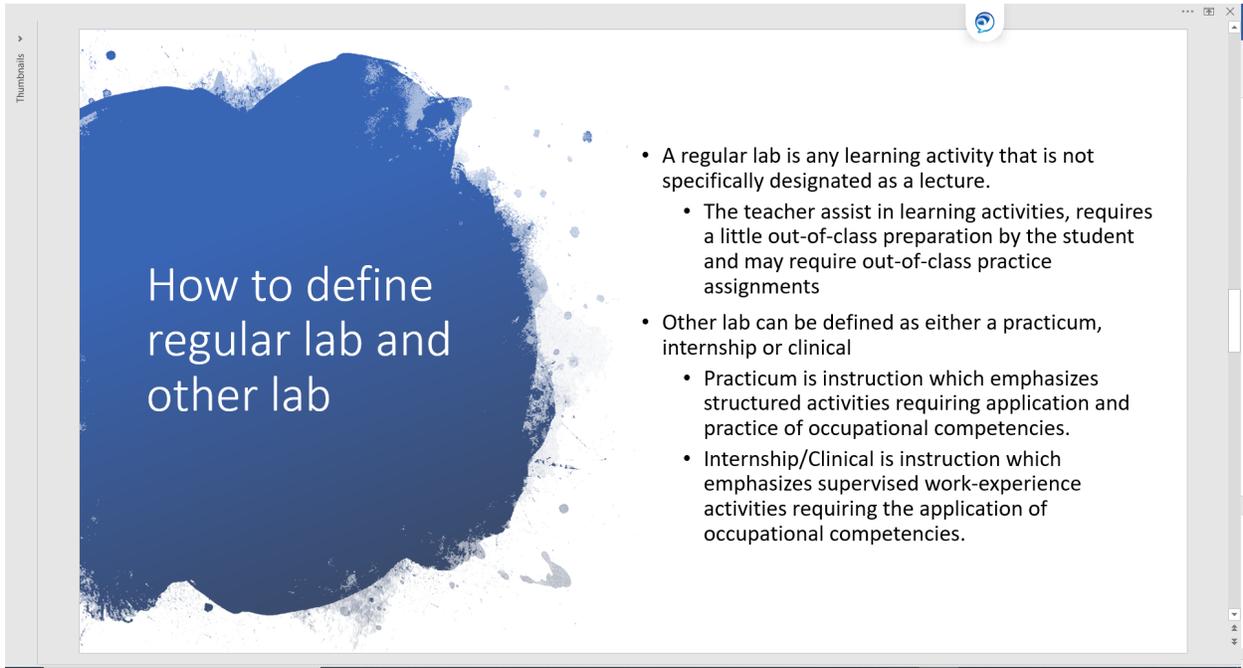
Introduction of IFCC Officers

Sasha introduced IFCC officers and explained their roles to the group. Regina Kiefer from Central GA Tech is the Chair, and Isis Zometa from Gwinnett Tech is the Co-Chair. Sasha stated that if anyone misses a meeting, the Chair and Co-Chair will be the point of contact to get details of items discussed. Additionally, Sasha said that each IFCC meeting is recorded, and once available; she will send it to the group via the listserv. As for the meeting minutes, Sasha explained that she typically retrieves the meeting notes taken by the Chair & Co-Chair and creates the official meeting minutes based on their notes and the WebEx recording. She stated that she typically provides the minutes to the group for review and approval before the next meeting. Once approved during the next meeting, the minutes are uploaded on the AA webpage. If there is no meeting scheduled, the IFCC will review and provide an electronic approval of the minutes. Once approved, Sasha will have the minutes uploaded on the AA web page.

IFCC Webpage Link: http://teched.tcsg.edu/all_forms/aa_IFCCGuides.pdf

Curriculum Review and Updates

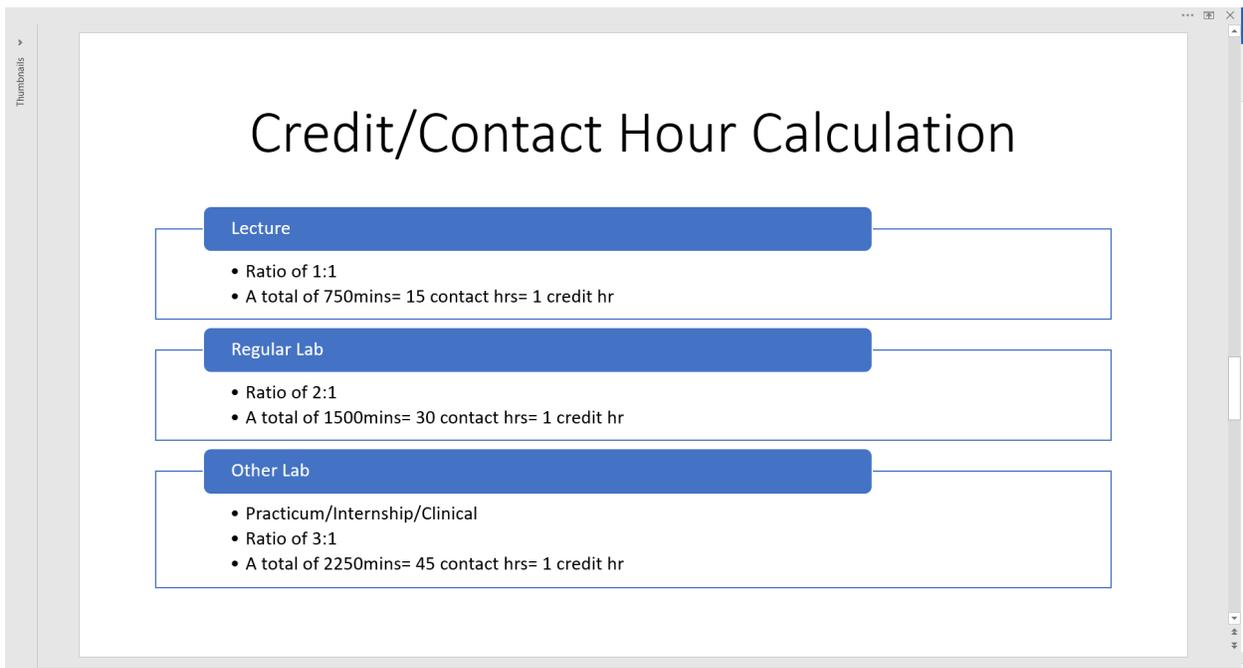
Sasha explained to the group that typically, during an IFCC meeting, the IFCC will review standard programs, which are programs that are offered at more than one college. Sasha stated that institutionally developed programs that belong to only one college are not reviewed at an IFCC meeting. Sasha continued to review the PowerPoint and explained to the group that they must understand how the KMS standards are displayed and the TCSG definitions before reviewing the courses.



How to define regular lab and other lab

- A regular lab is any learning activity that is not specifically designated as a lecture.
 - The teacher assist in learning activities, requires a little out-of-class preparation by the student and may require out-of-class practice assignments
- Other lab can be defined as either a practicum, internship or clinical
 - Practicum is instruction which emphasizes structured activities requiring application and practice of occupational competencies.
 - Internship/Clinical is instruction which emphasizes supervised work-experience activities requiring the application of occupational competencies.

Sasha used this definition as a segway into the TCSG definition of a regular and other lab.



Credit/Contact Hour Calculation

Activity	Ratio	Contact Hours	Credit Hours
Lecture	1:1	750 mins	1 credit hr
Regular Lab	2:1	1500 mins	1 credit hr
Other Lab (Practicum/Internship/Clinical)	3:1	2250 mins	1 credit hr

She further provided within the PowerPoint the hour calculation for a lecture, lab, and other lab.

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- The group agreed that ensuring their students maintain “full-time” status is top priority; the hours should remain as is.
- Pre-Reqs
 - Remove the “All Required” statement
 - Program Admissions will remain as is
- Co-Reqs
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.

CAVT 1020: Cardiac Catheterization I

- Course title and description remain as is.
- Pre-Reqs remain as is.
- Co-Req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
- Course hours remain as is
- Competencies and learning outcomes remain as is.

CAVT 1021: Cardiac Catheterization Clinical I (Introduction to the Clinical Environment)

- Course title and description remain as is.
- Pre-Reqs & Co-Reqs
 - Sasha asked the group if the courses' pre-reqs should be more detailed than “program admission” since the class is a clinical course. Some stated that within their program, their students take CAVT 1020 & 1021 at the same time. Sasha asked the group if they would like to add CAVT 1020 as a co-req to the CAVT 1021 course.
 - Jessica stated that they could be co-reqs of one another since the next sequence of Cardiac Catheterization courses, CAVT 2020 & 2030, is taken together within the same semester after completion of CAVT 1020 & 1021. She further states that these classes are progressive courses and asked the group if they agree with the courses being co-reqs of one another.
 - Sasha explained the difference between co-req & true co-req and suggested that the courses are co-reqs one another. The group agreed, and Sasha stated that she would update CAVT 1020 & 1021 and CAVT 2020 & 2030 as co-reqs to one another as described by the group.
 - Sasha stated that she would remove the “Program Admission” status within the co-req since the group has determined it is a duplication of the pre-req requirements and is not needed.
- Course hours remain as is
- Competencies and learning outcomes

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- Sasha asked the group to ensure that they consider recent standard changes presented by their accrediting agency, National Examinations, etc. Additionally, she asked the group to remove any outdated terminology they may have noticed that is still present within the KMS standards.
- Within the chat, Amy Holloway, VPAA of Central GA Tech, asked those within the group who have gone through a recent accreditation review to provide the group with any feedback related to the curriculum they may have received.
 - Steve Pearce, VPAA of Southern Crescent, stated that their program just received initial accreditation, and there were no findings or comments related to the curriculum.
 - Regina stated that at Central GA, they recently went through accreditation, and there were no findings or comments related to the curriculum.
- The group agreed that the competencies & learning outcomes should remain as is.
- Jessica asked Sasha to revisit the true-co reqs discussion and stated that there is a readmission policy submitted to the accrediting body within their program handbook. She wanted clarification that if the courses are not true co-reqs of one another and a student can retake failed classes, is that going against their readmission policy that stated that they have to reapply for program admission.
 - In response, Rebecca Alexander, VPAA of Gwinnett Tech stated that TCSG has always informed colleges that KMS is the minimum requirement and colleges and established requirements beyond the minimum. She further stated that to address Jessica's concern, it can be addressed at her college and make her courses true co-reqs if she prefers.

CAVT 1030: Electrophysiology and Cardiac Anatomy

- Regina asked the group how much time within the course are they spending on electrophysiology because she feels that the course spends internally too much time teaching EKGs.
 - Capre state that it is too much time designated for EKGs and has tried to mix it up for her ECHO students; so that they can relate the EKGs to the mechanical concepts of the heart such as knowing what is happening mechanically with the heart when there are abnormal rhythms. She further stated that because their program is ECHO and not Cardiovascular, this is a required course within the curriculum; she tries to relate the info for the ECHO students. Others in the group agree and suggest offering this course within a mini-semester, online, or as a hybrid.
 - Capre stated that she does offer it as a hybrid, 405 online and the remaining in class. Dawn asked the group if the offering platform for a course is decided on the individual programs. In response, Sasha answered yes. She stated that how a program would like to offer the course is decided based on their preferences and what is based for their program & students.
 - The group agreed.

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- Sasha explained to the group that based on their discussion, the regular lab description of “internship” is incorrect, and it should state “lab” since they are not sending their students out to a site.
 - Dawn stated that she sends her students to a cardiac rehab at times, but it’s more of a field trip and not an actual internship. Sasha stated that if the students are not performing supervised work-related activities, it will not be considered an internship and more of a lab activity she has designed to be a field trip.
 - Sasha stated the importance of the description for the regular lab & other lab present correctly, and based on what has been said and TCSG policies & producers, the description should state “lab”. She stated that she would update the course to state “lab”; however, in response to Dawn, Sasha explained that the instructor has the discretion on the lab activity design, and Dawn can continue to have her students take a field trip to the rehab clinic if she prefers, but because it is not an actual clinical or internship, the students should not be interacting or performing skills on patients, they should be observing.
 - Sasha suggested that to update the regular lab description changes and leave the hours as is. Dawn and the group agreed to the change.
- Kathy Johnson asked the group if anyone was teaching the course as part of the ECHO program.
 - Regina stated that at Central GA, they teach the ECHO & CARDIO students together within this course. Dawn noted that for the ECHO program, Capre & she are the only two programs that have only the ECHO program offering and not CARDIO, but this course is a requirement within the ECHO program.
 - Capre provided Kathy with more clarification and stated that she is teaching the 16 weeks of EKGs to ECHO students.
- Competencies & Learning Outcomes
 - Dawn asked the group if Competency #4: Physical Heart Defects is a competency that is needed for the course. Regina stated that she teaches heart defects within the CAVT 1100 course. Jessica noted that some of the standards are repetitious and are found in multiple classes, so it could be removed. The group agreed that the material is covered in other areas of the curriculum and can be removed.
 - Competency #4: Physical Heart Defects and its respective learning outcomes were removed.
 - Learning Outcome #1: List the categories of congenital heart defects.
 - Learning Outcome #2: Describe and demonstrate the standard repairs for heart defects.
 - Learning Outcome #3: Using schematic drawings, label types of ventricular and septal defects.
 - Learning Outcome #4: Classify the types of procedures used in congenital heart disease repair.
 - Learning Outcome #5: Describe the limitations of Echocardiography and alternate approaches.
- Course Description remained as is.

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- Course Title remained as is.

CAVT 1080: Advanced Hemodynamics and Cardiac Physiology

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
- Competencies & Learning Outcomes remain as is.

CAVT 1090: Drug Calculations and Administration

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
- Course Hours remain as is.
- Competencies & Learning Outcome
 - Jessica asked the group how they are teaching IV fluid rates learning outcomes to their students. She asked if they are using actual IV machines to calculate rates and etc since the learning domain is psychomotor. Capre stated she usually has a guest nurse instructor come in and teach IV. Isis noted that they use an RN who teaches the course within her program and utilizes the IV pump for instruction and practice.
 - Sasha asked the group if the utilization of the IV pump is needed since the learning outcome is based on the calculation of IV fluid rates. Isis stated that they use it as a teaching tool. In response, Sasha noted that it was a great idea for extra understanding for the students, but the cognitive learning domain & application level of learning may be more suited for the IV fluid rates learning outcomes.
 - Jessica asked the group if the learning outcomes of knowing IV fluid rates should be something the students should know. Regina stated that within their area, the clinical sites they use do not allow the students or the RCIS to administer drugs or start IVs; however, it is in the scope of practice, but some areas do not allow it.
 - Sasha stated to the group that they should think about it and revisit the discussion at another time.
 - Learning Outcome 3.1 revised to state, Discuss reference sources.
 - Learning Outcome 3.2 can be removed since is a duplication of Learning Outcome 3.3
 - In reference to Competency #5: Administering Medications is a Simulated Clinical Environment, Jessica asked the group if they understood Simulated Clinical Environment as a scenario-based concept. Jessica also asked the group if the course is mainly taught

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online since the clinical class that accompanies the course within the same semester is tedious.

- Regina stated that she interprets the simulation as not an actual clinical or patient but something that can be completed within the classroom through word problems, scenarios, etc; similar to how ACLS is presented.
- Capre asked the group why this course is a required course for the ECHO program. In response, Kathy agreed and stated that there is no need for in-depth knowledge of pharmacology for the ECHO students.
- Sasha stated to the group that this course would be place on the next meeting agenda to provide everyone more time to review the course and discuss amongst their faculty who are not present.

CAVT 1100: Cardiac Catheterization Fundamentals

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
- Course Hours remain as is.
- Competencies & Learning Outcomes remain as is.

CAVT 2020: Cardiac Catheterization 2

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
 - From a previous course discussion, CAVT 2030 should be the co-req for this course.
- Course Hours remain as is.
- Competencies & Learning Outcomes remain as is.

CAVT 2030: Cardiac Catheterization Clinical 2

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
 - From a previous course discussion, CAVT 2020 should be the co-req for this course.
- Sasha asked the group if the accreditation agency mandates clinical hour requirements or requires that programs meet the required clinical competencies.
 - Regina stated that an accredited program does not have a minimum amount of clinical hours. Janice agreed that due to COVID they had difficulty meeting those clinical hours

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and spoke with Sasha, who explained how KMS is based on a 50-min interval and not 60-min. She asked Sasha does it matter if programs choose to go with the 50-min or 60-min calculation.

- Sasha explained to the group that for clinical rotations, they could utilize the 60-min calculation as the minimum hour requirement for completion of the course; and the 50-min calculation as the maximum hour requirement for completion. Sasha explained that following this concept allows programs to have flexibility within their clinical hours when unforeseen situations happen throughout the semester.
- Sasha stated that TCSG has been working with programs to meet the requirements set by the accrediting agency, but if the IFCC would like to review the clinical hours within the clinical courses, this would be the time to do so.
- Janice stated that when speaking with CCI, they informed her that for non-accredited programs, they would settle for 600hrs and for accredited programs to obtain the 800hrs. Regina stated that she would contact CCI for further clarification on that; however, her understanding that if the program is accredited, there is no minimum hour requirement, but if the program is non-accredited, there is a minimum of 800hrs within the specialty of the exam is requested.
- Overall, the group is okay with the current clinical hour requirement for the course.
- Competencies & Learning Outcomes remain as is.

CAVT 2050: Cardiac Catheterization Clinical 3

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
 - CAVT 2070 should be the co-req for this course.
- Course Hours remain as is.
- Competencies and Learning Outcomes remain as is.

CAVT 2070: Cardiac Catheterization Registry Review I

- Course title remains as is.
- Course description remains as is.
- Pre-req remains as is.
- Co-req
 - Remove the Program Admission; it is a duplication of the pre-req requirements.
 - The IFCC agrees that a student must meet program admission before taking this class.
 - CAVT 2050 should be the co-req for this course.
- Course Hours remain as is.
- Competencies and Learning Outcomes remain as is
- The group provided the following links as material resources that can use within the course.
 - <https://glowackiandsommersrcis.com/>
 - <https://www.examedge.com/cc/rcis/>

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CT13: Cardiovascular Technology

- Sasha asked the group to review the CT13 program standards and make sure that the information provided is correct. She asked that the group remove the outdated information and etc. The group will provide Sasha with any changes at the next meeting.

Additional Discussions

- Janice asked the group what prep materials they all utilize within the course. Isis stated that within their class, they use the West Todd software installed within their computer lab. Additionally, their instructor takes the RCS every 2 years to help prepare their students and review some of the Glowackia materials available.
- Janice stated she reached out to Glowackia to offer a seminar for their students, but it is costly for their college. She said that it might be more cost-efficient if all the programs work together and offer a state-wide seminar. The group asked Janice to send out the information provided to her, and they would discuss it with their college administration.
- Isis stated that having a system-wide test bank that allows all programs to utilize questions from the exam for pre-testing is a great way to evaluate the students. Janice agreed, and she has been working with reps from the Todd's testing resources to help her students stay above the 60% national pass rate and pass the registry. In response to Isis's statement, Sasha informed the faculty that the GVTC division could provide OER or create a system-wide test bank within Blackboard for them all to use. Sasha noted that she would contact Nikki Stubbs within GVTC to gain guidance on the best approach for the group.
- Regina stated that Todd's is most useful as a comprehensive teaching tool that can be incorporated throughout the program; however, for the final semester, the primary focus should be on the registry, and the Glowackia Sommers materials are a little more focused on the needs compared to Todd's five volumes of material; which is very time-consuming. Regina agreed with the suggestion of having Glowackia Sommers coming to provide a state-wide review for all students and believes that the \$8000 coverage will be cost-effective for all the programs to cover the cost together. The group agreed.
- Regina also stated that it could be open to all individuals trying to take the CAVT registry, which could cost less for their students overall, and asked Sasha if the IFCC could cover the seminar cost. In response, Sasha stated that TCSG does not handle the budgets for colleges and, therefore, does not provide budgets to IFCCs; however, if they are interested in hosting a seminar of that size, they must speak to their administration first, and upon approval, she will be willing to assist the IFCC with locating a central location and etc.
- Regina agreed. She informed the Glowackia open sessions instructors and their ability to take the exam free of charge due to the exam fee waived by CCI. The group asked for Regina to provide the dates once Glowackia announces it.

EC23: Echocardiography

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- Sasha presented the EC23: Echocardiography program standards to the group and asked the ECHO faculty for their input on changes for the program.
 - Capre stated that she would like to see the CAVT 1090 course be removed from the program. Sasha asked the other ECHO instructors if they agree with the removal. Dawn stated that the course should have been removed from the curriculum years back but believed that Augusta Tech wanted to keep it, causing GA Northwestern to create an institutional developed ECHO program.
 - Sasha noted that it seems that the programs are using the CAVT 1090 as an “or” option, although the standards are listed as an “or”.
 - Sasha stated that she would speak with the ECHO instructors after the meeting to get a better understanding of how each college offers its ECHO program, and at the next meeting, the group will review the ECHO program and courses as a whole.

Conclusion/Action Items

Sasha informed the group of the next steps. She stated that since DMSO, CAVT, ECHO, and VAST programs share courses, changes to the CAVT courses will be made once she can meet with each group. Additionally, the changes made within these programs will require each program to go through a PROBE. Based on her experience with PROBEs, it is best to have all the programs go through the PROBE process at one time since each program shares courses. She explained to the group that she hopes to have the PROBE finalized by the start of the Fall semester but it may be mid-fall based on the summer meeting schedules of the President Council, State Board and the IFCCs of the other group; however, she will keep the group informed of each step taken.

Sasha noted that the next meeting is scheduled for Friday, April 30th, and during that meeting, the group will revisit the CAVT courses that were tabled. Additionally, the ECHO program and its accompany courses will be reviewed. Sasha thanked the group for their hard work and informed them that she would create a OneDrive Folder for them to use to place all revised courses within if they prefer. Sasha asked the ECHO instructors to remain within the meeting to help her understand their program and what needs they have that may need to be discussed at the next meeting. Sasha thanked the group again for their hard work, participation, and valued feedback. Sasha concluded the meeting.

Meeting adjourned at 11:50 am.

Meeting Notes submitted by Isis Zometa

Meeting Minutes submitted by Sasha Kahiga