(1) INTRODUCTION

Cardiologists are physicians who are trained in the diagnosis and treatment of conditions of the heart, lungs and blood vessels such as angina, abnormal heart rhythms and rheumatic heart disease. They often perform complicated diagnostic procedures and they consult with surgeons on heart surgery. Cardiology is a subspecialty of Internal Medicine or Pediatrics.*

*Taken February 20th, 2007 from URL http://www.royalcollege.ca/index_e.php

(2) CARDIOLOGY PROGRAMS ACROSS CANADA

<table>
<thead>
<tr>
<th>Dalhousie University</th>
<th>Université de Sherbrooke</th>
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</thead>
<tbody>
<tr>
<td>McGill University</td>
<td>University of Ottawa</td>
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<tr>
<td>University of Ottawa</td>
<td>Queen’s University</td>
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<tr>
<td>University of Toronto</td>
<td>McMasters University</td>
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<tr>
<td>Western University</td>
<td>University of British Columbia</td>
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<tr>
<td>University of Saskatchewan</td>
<td>University of Alberta</td>
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<tr>
<td>Calgary University</td>
<td>Université de Montréal</td>
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(3) THE UNIVERSITY OF MANITOBA PROGRAM

The core training program in Cardiology at the University of Manitoba lasts for three years. **Entry requires completion of at least three years of training in Internal Medicine in an accredited program.** It is anticipated that at the end of this three year period of training, the trainees will become competent Clinical Cardiologists who will be able to adapt to the many changes in the specialty which will occur in their professional lifetime. Upon satisfactory completion of the training, trainees will be qualified to take the Cardiology Subspecialty examination of the Royal College of Physicians and Surgeons of Canada. The four months of elective time allows trainees to develop substantial skill in a subspecialty within Cardiology. **Full training in a subspecialty within Cardiology may require additional time beyond the three year program.** Those wishing to pursue an academic career may elect to carry out several years of research training. Elective time can be spent in research as well.

The **three year training program** in Cardiology comprises **nine compulsory rotations** with a **four month elective rotation and a four month research rotation.** An Ambulatory Care component is integrated longitudinally into the program and Cardiology Clinics are generally attended during Echocardiography, Cardiac Catheterization and research rotations. The compulsory rotations are:

- Cardiac Catheterization (4 periods)
- Echocardiography (4 periods)
- Coronary Care (4 periods)
- Clinical Cardiology (6 periods)
- Pediatric Cardiology (1 period)
- Nuclear Cardiology (2 periods)
- Electrophysiology and Pacemakers (2 periods)
- Cardiac Surgery (1 period)
- Stress Testing, Holter Monitoring and ECG (2 periods)

The **Ambulatory Care experience** comprises a total of three periods. The majority of the compulsory rotations will take place in the first two years of the program. In general, research and elective time will be encouraged to take place in the latter part of the second and third years. One period of vacation is included in each year of the program.

The Section of Cardiology currently has six Cardiology Residents in our three year Fellowship Training course.

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**Program Contacts**

**Judi Dyck**, Program Education Coordinator  
WRHA Cardiac Sciences Program

(204) 258-1000  
FAX: (204) 233-9162

E-mail: jldyck1@sbgh.mb.ca

**Dr. Colette Seifer**, Program Director  
Cardiac Sciences Fellowship Program

(204) 237-1000  
FAX: (204) 233-9162

E-mail: cmseifer@sbgh.mb.ca

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**Program Director**

**Dr. Colette Seifer**,  
Cardiology Fellowship Program,  
Y 3005, Cardiac Sciences Program, St. Boniface General Hospital,  
409 Tache Avenue, WINNIPEG, Manitoba. R2H 2A6

(204) 258-1000  
FAX: (204) 233-9162

E-mail: cmseifer@sbgh.mb.ca

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Potential applicants for July 2008 are required to submit the following to Dr. Seifer by August 1, 2007:

- A cover letter
- Updated curriculum vitae indicating that three years successful training in an accredited Internal Medicine program has been achieved
- Three letters of reference (one of which MUST be from your Program Director)
- A transcript of your marks

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**(4) CARDIOLOGY PHYSICIAN’S SURVEY**

“There are 23 cardiologists in Manitoba. All 23 were sent surveys, of which 9 responded.”
BACKGROUND

How many years have you been practicing for?

Population Setting

Winnipeg 8
Brandon 1
Rural South
North of 53

Where are they predominantly practicing?

Private practice with hospital 5
Private practice without hospital 0
Community clinic 0
Hospital
  -academic hospital 7
  -community hospital 4
Teaching 5
Other 1

Gender

Male 8  Female 1

Marital Status

Single 0
Married 9
Divorced 0
Separated 0
Common-Law 0

Do you have children/ how many?

Yes 7  No 2
1 child 1
2 children 5
3 children 1
4 children 0
5 children 0

How much do you interact professionally with other physicians?

(1-on my own most of the time  10- as a part of a team most of the time)
Are you in a solo practice or group practice?
Solo  3  Group  4

If in a group, how many doctors do you share a practice with?

<table>
<thead>
<tr>
<th>Range</th>
<th>Count</th>
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<tbody>
<tr>
<td>1 to 5</td>
<td>1</td>
</tr>
<tr>
<td>6 to 10</td>
<td>0</td>
</tr>
<tr>
<td>11 to 20</td>
<td>0</td>
</tr>
<tr>
<td>Above 21</td>
<td>2</td>
</tr>
</tbody>
</table>

**AVERAGE DAY**

How many patients do you see on an average per day?

<table>
<thead>
<tr>
<th>Range</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 5</td>
<td>0</td>
</tr>
<tr>
<td>6 to 10</td>
<td>2</td>
</tr>
<tr>
<td>11 to 20</td>
<td>2</td>
</tr>
<tr>
<td>21 to 30</td>
<td>4</td>
</tr>
<tr>
<td>Above 31</td>
<td>1</td>
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</tbody>
</table>

How many hours per week do you work- not including call time?
(I.e. including CME, clinical work, administration, teaching)

<table>
<thead>
<tr>
<th>Range</th>
<th>Count</th>
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<tbody>
<tr>
<td>1 to 20</td>
<td>0</td>
</tr>
<tr>
<td>21 to 30</td>
<td>0</td>
</tr>
<tr>
<td>31 to 40</td>
<td>0</td>
</tr>
<tr>
<td>41 to 60</td>
<td>5</td>
</tr>
<tr>
<td>61 to 80</td>
<td>3</td>
</tr>
</tbody>
</table>

What sort of schedule do you have in your work?
(1- irregular/unpredictable, regular/predictable)

![Chart showing distribution of reported schedules]

Are you ever on remunerated call?
Yes  8  No  0

How many days are you on call? (#days/month)

![Chart showing distribution of reported call days]
How many hours per shift?  (#hours/shift)
24 hours  8

How much routine (similar work) or diversity (different tasks, activities) do you have in your work?  (1-great deal of routine, 10- great deal of diversity)

What type of intellectual approach to problem solving do you need to have to perform your work duties?  (1-specific problem approach 10-theoretical)

Do you have a sharply defined area of expertise or general expertise?
(1-General expertise, 10 - Sharply defined expertise)

How much do you need to use manual/mechanical activities for highly skilled tasks, i.e. doing procedures, performing operations?
(1-never, 10- most of the time)
Overall, how satisfied are you with your career?
(1- Dissatisfied, 10- very satisfied)

What is the most appealing aspect of your job?
- Patient care/ relationships with patients 2
- Teaching
- Seeing the majority get better
- Variety and diversity 2
- Problem solving the patient's complaints
- Freedom
- Professionalism
- Making a significant impact on a patient's life, survival, and quality of life
- The challenge of making a diagnosis 2
- Being respected
- Seeing patients get better
- Interesting cases that are mostly treatable

What is the least appealing aspect of your job?
- Distance medicine by phone
- Bed management and shortages/ insufficient bed numbers 2
- Lack of resources to take care of the patients
- Poor cooperation from other departments, especially emergency
- Overworked
- Waiting lists for investigations 2
- Politics - poor administrators, unresponsive system
- No incentive or rewards for excellence
- Administration
- Long hours
- Physician shortage
- The very small primary care part
- Volume of patients

PATIENT CHARACTERISTICS

Presenting complaints most often seen?
- Chest pain - MI, angina 10
- Shortness of breath 4
- Arrhythmia/ palpitations 7
- CHF 3
- Syncope
- Murmur 2
- Cyanosis
- Fatigue
- Dizziness
- Hypertension
- Acute coronary syndromes
- Respiratory failure
- Abnormal EKG

**Age group most often treated?**

- Infants: 1
- Children: 1
- Adults: 8
- Elderly: 7
- All groups: 0

**General Health Status of Patient Population?**

- Gen. Healthy
- Chronically ill
- Terminally ill
- Acutely ill

**Do you have short-term or long-term relationships with patients?**
(1-short term, 10-long-term)

**How much time do you spend in direct contact with patients?**
(No time at all - 0, most of my time - 10)
How much opportunity to see end results do you have in your work?
(1- little opportunity, 10- great deal of opportunity)

FINANCIAL

What is your income bracket after taxes and overhead, etc?

What income level do you feel you have in comparison to other specialties?
(1-lower, 10- higher)

Are you satisfied with your income?

Very satisfied  3
Satisfied       6
Somewhat       0
Dissatisfied   0

Comments about income:
- A high personal price - no time left for non-professional life
- Too much tax!!

Do you feel your current income compensates your workload?

Yes  6  No  3
What is the Basis of your current income?
Fee-for-service 7
Salary 1
Independent contract 0
Sessional 1
Other 0

FAMILY LIFE/ FREE TIME

How much time does work allow for family/leisure activities?
(1- little free time, 10- ample free time)

Are you satisfied with the amount of free time you have?
Very satisfied 1
Satisfied 0
Somewhat 3
Dissatisfied 3
Extremely dissatisfied 1

Do you have the ability to limit your workload should you need more free time?
Yes 5 No 4

Do you take vacations?
Yes 9 No 0

How much time do you take for vacations annually?

How much time away from work for CME related conferences?
Maximum amount of consecutive days away from work annually?

<table>
<thead>
<tr>
<th>Days</th>
<th>Count</th>
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</thead>
<tbody>
<tr>
<td>0-7</td>
<td>0</td>
</tr>
<tr>
<td>8-14</td>
<td>2</td>
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<tr>
<td>15-21</td>
<td>0</td>
</tr>
<tr>
<td>22-28</td>
<td>0</td>
</tr>
<tr>
<td>29+</td>
<td>2</td>
</tr>
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</table>

PERSONAL

What were your main reasons for choosing your specialty?

- Good experience during residency: 2
- I enjoy seeing patients get better
- Enjoyed the subject matter
- Combination of short term and long term care
- I love cardiology
- Challenging, and fascinating pathophysiology
- High opportunity for research
- The treatment result is obvious
- Rapid decision making and very demanding
- Fascination with the heart - and I still am 30 years later
- Diversity possible
- My father died from coronary heart disease

Are your reasons for being in this specialty now different?

- Yes: 3
- No: 6

If yes, what are your reasons now?

- I like solving patient complaints now
- The practice has become more sub-specialized
- I love the type of patients with heart disease

What were the major factors that guided your decision to choose this specialty?

<table>
<thead>
<tr>
<th>Factor</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friend/family</td>
<td>2</td>
</tr>
<tr>
<td>Clerkship experience</td>
<td>4</td>
</tr>
<tr>
<td>Medical school experience</td>
<td>3</td>
</tr>
<tr>
<td>Doctor’s example</td>
<td>4</td>
</tr>
<tr>
<td>Type of patient</td>
<td>6</td>
</tr>
<tr>
<td>Lifestyle</td>
<td>0</td>
</tr>
<tr>
<td>Residency</td>
<td>0</td>
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</tbody>
</table>

SINGLE MOST IMPORTANT REASON I CHOSE MY SPECIALTY

- Type of patient: 2
- Clerkship experience
- Dynamic preceptors
- Residency experiences
- My mentor

Would you choose the same specialty again?

- Yes: 8 (It is very rewarding!)
- No: 0
- Maybe: 1 (I would sub-specialize deeper into cardiology)
What professional status (in comparison to others) do you feel you have?
(1 - lower, 10 - higher)

Do you feel colleagues in other specialties respect your specialty?
Yes 9  No 0

Do you feel the community at large respects your specialty?
Yes 9  No 0

PRESSURE

How much pressure do you have in your work?

What aspect of your job do you find the most stressful?
- Lack of good secretarial and support staff
- Lack of resources
- Not enough funding to take care of all Manitoban cardiac patients
- Very acute situations
- Post cardiac inquest sequelae
- Referrals that are faxed in - 8 to 12 per day without prior booking
- Politics, poor leadership
- Long waiting lists for tests and procedures putting patients at risk
- The sheer volume of patients
- Decisions regarding critically ill patients
- Nocturnal phone calls
- Running the business part of the practice

Have you ever considered taking a leave of absence due to stress?
Yes 3 No 6

Have you ever taken a leave of absence due to stress?
Yes 1 No 8
Do you feel discrimination in your job based on your gender?

Yes 0  No 9

What qualities do you think a student needs for this specialty or area of practice?

- Quick thinking 2
- Practical/ logical thinking 2
- Rapid decision making 2
- Willing to work hard 2
- Must be devoted to patient care and put their needs above your own 2
- Ability to handle crisis and maintain your composure 2
- Empathy
- Ability to handle death
- Enjoy problem solving
- Talking to patients with long term associations
- Cope with extremely high stress
- Constant learning and keep up
- Work independently
- Discipline
- Ability to interact well with colleagues

What advice would you have for a student considering this specialty or area of practice?

- Be prepared to deal with constantly assessing acute and highly complex patients 2
- It is interesting and rewarding BUT don't practice in Manitoba until the financial situation improves
- Like people
- Do it! / go for it! 2
- Spend time in an acute care setting to see if this type of stress level is tolerable to you
- Accept long training and a high demand for knowledge and good service during residency
- I’d offer as much encouragement as possible
- It is very demanding, and may require lifestyle sacrifices

Planning your future as a doctor in Manitoba