

CARDIOLOGY CLINIC STANDARD OPERATING PROCEDURE				
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1.0 Cardiology Clinic

Cardiology	Consultants	Day	Time	Location	Rooms	Secretary	
New/return patients	Dr Paul Ozlizlok/Adam James	Monday	AM	Med tower 4 th floor	3	Ciara 6613	20
New/return patients/abnormal rhythms	Dr Mark Walsh	Tuesday	PM	Med tower 4th floor	3	Bairbre 2855	20
New/return patients/Cardiomyopathy	Prof Colin Mc Mahon	Tuesday	AM	Med tower 4th floor	3	Ruth 2854	20
New/return patients/Teenagers transitioning to adult services	Dr Pierre Bassareo	Thursday	PM	Med tower 4 th floor	3	Claire 6160	20
New/return patients. Patients with family Cardiac history	Dr Terence Prendeville	Monday Wednesday	PM AM	Med tower 4 th floor	3	Declan 6253	
New/return patients. Infants with congenital conditions	Dr Orla Franklin	Wednesday	PM	Med tower 4 th floor	3	Mary 6337	20
New/return patients. Teenagers with congenital conditions	Prof Kevin Walsh	Thursday	AM	Medical tower 4 th floor		Michelle 6083	20
Cardiothoracic surgery	Mr. Johnathon Mc Guinness. Prof Redmond	Wednesday Thursday	AM AM	Medical tower 4th floor		Louise 6154	
New/return patients	Dr Adam James	Friday	AM	Medical tower 4 th floor		Larise 2625	20
New/return patients	Damien Kenny	Friday	PM	Medical tower 4th floor	3	Larise 2625	

2.0 Location / Available Rooms

Medical Tower - 4th floor Rooms available 4, Consultant Room 3

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3.0 The Team

STAFF

CNSp: Helene Murchan Bleep 8834 / Kathleen Crumlish Bleep 8856 (single ventricles)

Fionnuala Gardiner Bleep 8338 / Jackie O'Donoghue Bleep 8340 / Caroline Donaghy Bleep 8337 / Trisha Lawler Bleep 8339 / Caroline Geary Bleep 8832 / Niamh Bleep 8831/ Yvonne Bleep 8833

ECG / ECHO technicians

HCA: Bernie

4.0 Management of ICAs

- Use room 1 if available
- Where possible check ICAs previous day, investigate if the ICA remains active.
- All ICAs will be flagged on IPMs and clinic print out. Ensure in advance of arrival that a room is available, and place a
- Sign on the door. On patient's arrival they should be shown to isolation room.
- If there are large numbers of ICAs, it may be necessary to contact parents and ask them to come for last appointment.
- If there are empty rooms available, please use them to see patients.
- Remove any equipment that will not be used, prior to the patient being reviewed.
- Contact the janitor to complete a discharge clean when the patient leaves the room, discard any single use equipment.
- There is an infection control alert diary for staff to record all ICAs alerts.
- Please log any patients attending with VRE in diary in suite 1 stating room number

5.0 Clinic Setup

- Ensure computers are turned on and prescription pads out for team.
- High tech. prescription required (locked in press in nurse's station).
- Children have ECG/echo prior to consultation.
- Assess babies in incubator on arrival. Parent/or nurses letter used to check in at desk.
- Use room 1 or stress test/holter room to plug in incubator. Ensure adequate oxygen supply. Attending nurse must stay
- with patient. (Arrange refreshments if required).
- Ascertain weight and observations from accompanying nurse.

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6.0 Safety Checks

- Note where emergency trolley and emergency medication is kept and perform checks daily (including d-fib and suction).
- Emergency intubation medication will be brought by the team from ICU when required.
- Check oxygen, BVM's and suction in all rooms.

7.0 Patient Investigation

- Weight
- Height
- Heart rate
- Sats
- BP right arm all patients>2yrs
- ECG/ECHO

8.0 Equipment

- Weighing scales
- Stadiometer/Rollometer
- Dinamap/sats monitor

9.0 Clinic Closure

- Ensure all patients have been reviewed, discharged, and left the clinic.
- Instructions re; future appointments to be given to receptionists at check-in desk.
- Stamp all DNAs charts, for consultant review and plan.
- Charts and DNA's return to check-in desk.
- Return all prescription pads to locked press in nurse's check-in room.
- Charts and DNA's go into trolley for secretary to collect.

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