Critical Conditions - Cardiothoracic

Each specialty manages a large number of individual conditions as described in the syllabus. Assessment of a trainee's ability to manage these is through the supervision level decisions made when assessing the shared and specialty-specific CiPs. Each specialty also has a list of critical conditions which are felt to be of significant importance for patient safety and to demonstrate a safe breadth of practice. These critical conditions will be assessed individually by means of WBA which will both provide formative feedback to the trainee and feed into the summative assessment of the AES and ARCP.

To ensure that trainees have the necessary skills in the critical conditions, by certification (the end of phase 3) there should be documented evidence of performance at the level of a day-one consultant to level 4 (*Appropriate for certification*) of the CEX or CBD (see CBD/CEX forms for the full list of levels). Please note that there is no requirement for a certain number of CBDs and CEXs), however.

Trainees must be able to demonstrate knowledge and understanding of the management of the following critical conditions:

- 1. Aortic dissection
- 2. Stridor
- 3. Secondary / tension pneumothorax
- 4. Cardiac tamponade
- 5. Acute haemothorax
- 6. Low cardiac output following Cardiac Surgery
- 7. Endocarditis-native or prosthetic valve
- 8. Respiratory failure following Thoracic Surgery
- 9. Myocardial ischaemia / infarction