FURTHER DETAILS REGARDING MAIN TOPICS OF PROGRAMME No. 12/2020 (Item No: 01)

CATH LAB TECHNICIAN

MEDICAL EDUCATION SERVICE

Category Numbers: 202/2019

, II Electrocardiography

- · Basic and Principle
- · Electrode/ Lead Placements
- · Normal ECG: Wave Form
- · Normal ECG: Intervals
- ECG Machined: Functions, Frequency Response, Recording Speed, Sensitivity, Standardisation, Stylus Lag(Heat Stylus)
- · ECG and Chamber Hypertrophy
- · ECG and Arrhythmia
- ECG in Myocardial Infraction, Myocardial

	ECG in Miscellaneous Conditions: Metabolic, electrolyte changes ECG for Technician: Summary
Exercise ECG	 Equipments/ Types of Exercise ECG Indication / Contradiction Lead placement - Rationale, Limitation Monitoring during Ex. ECG: Clinical/ECG/Parameters Exercise ECG Protocol: Indications/ Advantage and Disadvantage Exercise Physiology Exercise ECG: Preparation of Patient / Equipment/ Defibrillators, Emergency Drugs Exercise ECG: Detection of Various Arrhythmais, Ischemia and Plan of action Exercise ECG: Endpoints: Recognition and Action Post Exercise ECG: Observation, Instructions
Echocardiography	 Principle of Echocardiography Transducers Anatomical Planes for viewing in Echocardiography Normal M-Mode Echo Study: Anatomy / Function: Measurements. Echo for Cardiac Function – systolic and diastolic Echo in Heart Disease: Acquired Echo in Heart Disease: Congenital Contrast Echocardiography: Technique and Indications Transesophageal Echocardiography Echo Echocardiography: Technician's Role:
te ingran open to a constant and the con	Disposables Archiving Record Keeping Stock-Indents, Stock Maintenance, Stock Verification
American, My occurdada	Principle of Doppler Measurement of Flows and Gradients • Assessment of gradients, shunts, valve areas, cardiac output

Assessment of valve regurgitations
 Utility of Doppler in Assessment of Cardiac Disease

· Tissue Doppler

Stress Echocardiography: Protocols, 2D Echo Views, Analysis

Trans - esophageal Echo

- Indication/Contraindication
- Patient Preparation
- Transducer: Maintenance, Sterilization, Handling etc.
- Monitoring
- Emergency Drugs
- Utility

8. Intra Vascular Ultrasound, Intracoronary Doppler Wire

Holter Recording

III Year Cardiac
Catheterization
Part I Introductory
Course

- · Principles of Holter
- · Utility and indications
- · Analysis of Holter
- Cardiac Catheterisation: Laboratory Setup / Types Procedures
- Sterile Techniques in Cath Lab / Sterile Areas, Sterile Procedure, Sterile trolley setting, Scrubbing, gowns and Gloves, scrubbing and draping patients, handling sterile disposables etc.
- · Sterilisation and re-use of hardware
- · Equipments: Cath-Lab Equipments
- * Defibrillator / Pacemaker / IABP/ BOYLE's Apparatus / Suction Machine/ Oxygen
- * Infusion Pumps / Programmed Stimulators, Pacing System Analysers
- Equipments in Cath-Lab
- * Hemodynamic Recorders
- *Transducers
- · *Recording of Pressure Wave Form
- Range/ Gain/ Speed/ Systolic/ Diastolic and Mean Pressures in Chambers and Vesseles
- Hazard Management
- * Radiation Protection
- * Infection Prevention
- * Injury Prevention: Electrical/ Mechanical
- · Wastes Management

Cardiac	
Cardiac	

-II

- · * Plastics
- · * Biological Wastes
- · * Glass/ Needle/ Syringes
- Technician's Role
- · * Patient Monitoring
- * Procedure Related: Data Collection
- * Acquisition and entry of Data, Procedure Books, Log Books, Registers etc.
- * Stock of all disposables Eg. Catheters etc.
- * Stores (Disposable Items)
- * Accounting (Used Items)
- Equipment Maintenance
- Cine Angiography: Cine Filiming, Cine Film Processing and Cine Film Viewing, cine film library
- · Contrast Media
- Cardiac Catheterisation Procedure: Diagnostic Studies
- Cardiac Catheterisation Procedures: Therapeutic/ Interventional Procedures
- Acquisition of Cath Data: Cardiac output / Oximetry and Shunts
- Acquisition of Cath Data: Pressures and Wave Forms; Recording Technique, Analysis
- · Angiography: Technique/ Views/ Contrast Media
- Cardiac Catheterisation
- Hardware: Catheters/ Connections/ Sheaths/ Stopcocks/ Wires/ Angioplasty Catheters
- Complication of Cardiac Catheterisaiton: Recognition and management
- · Cardiopulmonary Resuscitation
- Special Procedures:
- * Pericardial Tap
- * Atrial Septostomy
- · * Endomyocardial Biopsy
- * Balloon Angioplasty (Valve)
- * Coronary Angioplasty
- Case Study of Simple Cardiac Disease -
- * ASD, MS, Tetralogy of Fallot
- Hardware of Cardiac Catheterisation And Interventions
- Venus and Arterial Check Flow Sheaths,

		 Mainfolds, 3-way Stock Cocks etc Guide Wires and Dilators Puncture Needles (Vascular Access Needles) Woven Darcon Cathetes: GL, NIH, Lehman, Woven, Dacron Electrode Catheters Flow Directed Catheters(Swan Ganz Type) Balloon Angio Catheters Polyurethane Catheters: Pig Tail, Judkins, Coronary, Amplatz Coronary, Brachial Coronary, Sones Catheters Guide Wires: Short, Normal Lendth, Exchange Length 'J' Tipped Movable Core, Tips, Deflectable Types Valvuloplasty Catheters, Atrial Septostomy Cathetes Coronary Angioplasty: Guide Catheters, Guide Wire, Balloon Dilatation Catheters, Indflators, Y Connectors. * Stents: Bare Stents, Mounted Stents, Other Types of Stents.
7	Cardiac Catheterisation Part III Pacing and Electrophysiology	 Arrhythmias: Brady and Tachy Arrythmias Indication for Temporary / Permanent Pacing Technique: Temporary Pacing Permanent Pacing: VVI AAI Pacing (Single Chamber Pacing) Permanent Pacing: DDD, other Modes of Pacing Pacemaker Clinic: Management of Pacemaker Patients, Programmers Intracardiac Electrogram – Technique Electrophysiological Studies Radio Frequency Ablation for Arrhythmia's Implantable Cardioverter Ddfibrillator
		 Cardiac Arrest Cardio Respirator Resuscitation Hypotension/ Hypertensive Crisis Cardiac Tamponade Anaphylaxis Emer gency Drugs Intra-aortic Balloon Pump Records Keeping: Indents, Stocks, Log Books, Procedure Books etc.

NOTE: - It may be noted that apart from the topics detailed above, questions from other topics prescribed for the educational qualification of the post may also appear in the question paper. There is no undertaking that all the topics above may be covered in the question paper.