

<b>A: ACCREDITED PREVOCATIONAL TRAINING PROVIDER NAME:</b>	WESTMEAD HOSPITAL
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<b>Training Term Based at:</b>	<i>If not at above location, please give off site facility name and location:</i>
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<b>Offsite Term?</b> <i>Includes affiliated private hospitals, general practices, community-based medical services</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <i>If yes, Collaborative Agreement to be attached</i>
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<b>B: TERM NAME</b>	<b>GENERAL SURGERY Team A – Surgical Oncology Head &amp; Neck</b>
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<b>Overview of Unit or Service</b>	<b>Please outline the role of the unit and range of clinical services provided:</b>  The Surgical Oncology team is part of the Department of General Surgery and provides excellent exposure to elective and emergency surgery, focusing on head & neck surgery. The term is of value to JMOs interested in general surgery, but also plastic surgery and ENT.
	<b>Please outline the patient case mix, acuity and turnover and how acutely ill the patients generally are:</b>  The case load of this unit is a mixture of acute & booked admissions. The booked cases comprise a whole range of surgical procedures and include both Head & Neck and Surgical Oncology procedures. Head & Neck includes major head and neck oncological procedures involving free flap reconstruction, direct laryngoscopies, thyroidectomies, parathyroid explorations, tracheostomies and parotidectomies. Surgical Oncology includes Major soft tissue and retroperitoneal sarcoma excisions, neck, axillary and ilio-inguinal block dissections, melanoma and NMSC excisions and sentinel lymph node biopsies.
	Acute cases are a combination of acute surgical admissions through the emergency department, outpatient clinics & patients admitted under the Acute Surgical Unit (ASU) when one of the consultants is on call for the same. Inpatient numbers are not usually great, however the turnover is quite high. A fair number of the patients are complex due to medical comorbidities, surgery they will be having and need for intensive monitoring afterwards. This requires the resident to maintain good coordination between various disciplines in Medicine, Anaesthetics, ICU and Ancillary services.

<b>Term Duration (Weeks)</b>	10 – 11 Weeks
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<b>HETI Term Identifier Number</b> <i>HETI Assigned after accreditation decision</i>	050008
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<b>Date of Accreditation by HETI</b>	19/11/2008
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<b>C: TERM CATEGORY</b> <i>Please identify if the term meets the criteria for a core term or if the term is an 'other' term (Please specify) For information on 'core' terms please see the last page of this document.</i>	Surgery	<b>If other please specify:</b>
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<b>Is the term a PGY1 or a PGY2 term?</b>	<b>PGY1</b> <b>PGY2</b> <input checked="" type="checkbox"/> <i>Please note that a PGY2 ONLY accredited term MUST not be staffed by a PGY1. Specific accreditation must be sought for a PGY1 term</i>
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## D: TERM CAPACITY

<b>Please indicate the term capacity – total number of PGY1s and PGY2 trainees</b>	<b>PGY1</b> <b>PGY2</b> <input type="text" value="1"/> <b>MAXIMUM NUMBER OF TRAINEES IN TERM</b> <input type="text" value="1"/> NOTE: number of PGY1s + number of PGYs=maximum Capacity
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## E: TERM SUPERVISION

<b>Name, Position and Contact Details of Term Supervisor</b> <i>Responsible for trainee term orientation and assessment</i>	<b>Dr Muzib Abdul-Razak</b> <b>Called via Switch Department</b>
<b>Term Supervisor Contact with Trainee</b>  <i>Term Supervisor to provide a plan for contact with the pre-vocational trainee/s during the training term</i>	<b>General Contact:</b> Direct face to face  <b>Orientation:</b> Both electronic and by verbal/personal handover from the previous resident  <b>Mid Term:</b>  Assessment by supervisor  <b>End of Term:</b> Assessment by supervisor
<b>Primary Clinical Supervisor (if not Term Supervisor)</b>  <i>Consultant or senior medical practitioner with experience in managing patients in the relevant discipline (PGY3+)</i>	<b>Name, Position and Contact details</b> As above.
<b>Immediate Supervisor with direct responsibility for day to day supervision (PGY3+)</b>	<b>Position and Contact details</b> As below
<b>Clinical Team Structure</b>  <i>Provide positions of all members of the clinical team who provide supervision and bedside teaching to prevocational trainees including AMO's and Registrars. Please also identify how PGY1 &amp; 2s will</i>	<b>Name, Position and Contact details</b>  <b>Dr Eva Wong, Staff Specialist, via switch</b>  <b>Dr G Morgan, Staff Specialist, via Switch</b>  <b>Dr Muzib Abdul Razak, via Hospital Switch</b>

<i>be distributed amongst the teams</i>	<b>Dr.Gideon Sandler, Staff Specialist , via Hospital Switch</b>  <b>Dr J Howle, Staff Specialist, via Hospital Switch</b>  <b>Team Registrar, Fellow/s, General Surgical Registrar (pager 08452)</b>
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### F: SPECIFIC REQUIREMENTS TO PRACTICE SAFELY DURING THE TERM:

<b>This section may include:</b> <ul style="list-style-type: none"> <li>Courses (e.g. life support, resuscitation)</li> <li>Procedural skills</li> <li>e-Learning requirements</li> </ul> <p>If there are any specific requirements please provide details of how the trainee will receive this training/will be assessed</p>	<p><b>All JMOs should read and fully comprehend Westmead Hospital Department of Surgery's Orientation for Interns, Residents and Registrars BEFORE commencing term.</b></p> <p><b>Unit protocols</b>  <b>RMO Handbook</b>  <b>CIAP site via Intranet</b>  <b>Internet</b></p>
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### G: TERM LEARNING OPPORTUNITIES

<b>Please list top 5 learning opportunities/objectives</b>	<b>1</b>	Understanding how a surgical unit runs
	<b>2</b>	Development of practical procedure skills such as: cannulation, urethral catheterisation, & suturing
	<b>3</b>	Develop an understanding of the physiological changes that occur in the post operative patient, & understand how these changes influence management decisions in fluid management, electrolyte replacement, & the role of nutritional support.
	<b>4</b>	Understand the role of antibiotic use in the surgical patient; especially indications for starting antibiotics
	<b>5</b>	Develop an understanding of the basic pharmacology of commonly used drugs in surgical patients; eg anti emetics, laxatives, & analgesic agents

### XPECTATIONS OF THE PREVOCATIONAL TRAINEE

<b>Please list expectations</b>	<ul style="list-style-type: none"> <li>Daily ward rounds</li> <li>Ordering and retrieving tests</li> <li>Keeping other members of the team informed of test results and condition of patients on the wards.</li> <li>Organising consults for inpatients</li> <li>Some assisting at operations</li> </ul> <p>JMO/s should maintain communication with Registrars and Fellow at all times and consultants if others not available.</p>	
<b>Patient Load</b> <i>(average per shift)</i>	<b>Patient Load per trainee</b> <input style="width: 50px; text-align: center;" type="text" value="8"/>	<b>Patient load total for team</b> <input style="width: 50px; text-align: center;" type="text" value="8"/>
<b>After hours Roster</b>  <i>Does this term include participation in a hospital-wide afterhours roster and if so please advise frequency and the onsite supervision</i>	<p>The JMO participates in the Westmead Hospital evening and weekend ward overtime. Supervision is provided by the following on-site staff:</p> <ul style="list-style-type: none"> <li>Surgical registrar on call p08452</li> <li>Medical registrar</li> <li>Anaesthetic registrar</li> <li>ICU registrar</li> </ul>	

available after hours	
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**I: SIGN OFF**

*Terms will not be considered unless this section is completed.*

<b>Revision date and by who</b> <i>(Name and Position)</i>	Dr Muzib Abdul-Razak                      15/6/2017 Term Supervisor Head & Neck Surgeon and Surgical Oncologist
<b>Endorsement by Term Supervisor</b> <i>(Name, Date and Signature)</i>	
<b>Endorsement by GCTC Chair (or representative)</b> <i>(Name, Date and Signature)</i>	

**HETI OFFICE USE ONLY – Approved by PAC or PAC Member**

<b>Date</b>	
<b>Signature/TRIM DOC number of PAC minutes</b>	

**J: TERM / UNIT TIMETABLE AND INDICATIVE DUTY ROSTER**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
0800 - 0830 Surgical Presentation	0700 - 0800 Surgical Teaching – Castaldi room	0830 – 1230 Dr Abdul Razak Op List	0830 - 1700 Dr Howle Op List	Dr.Howle on call Week 1		
0830-1700 Surgical Oncology clinics	Thyroid MDT monthly	0830-1700 Dr Morgan/ Dr.Wong Op List	0830 – 1230 Dr Abdul Razak Op List	0900-1000 Head & Neck MDT Alternate weeks		
0830-1700 Alt.Mondays Dr.Abdul Razak Op List	0830-1200 Head and Neck Clinics	1200 Trauma Mtg	Dr Eva Wong Op List week 3	1000-1200 Head & Neck MDT clinic		
1200 Soft Tissue/ Sarcoma MDT Meeting	1300-1700 Surgical Oncology Biopsy clinic	Dr.Eva Wong on call Week 3	Dr Muzib Abdul Razak on call Week 4	1300-1400 Intern & Resident Teaching		
1700 M&M Mtg / Surg Grand Rounds	1300-1700 Skin cancer clinic alt weeks					

**Important notes about completing this timetable:**

- Please include the start and finish times of the shifts the trainees will be rostered to
- Please show the activities that the trainee are expected /rostered to attend – these include all educational opportunities (both train facility-wide and term specific), ward rounds, theatre sessions, inpatient time, outpatient clinics, shift handover, morning handover from hospital night team, afternoon handover to hospitals after hours team. Please include approximate time of activities where possible
- If there are extended shifts or evening shifts as part of the term, please attach four weeks of roster for the whole team. If the term includes evening shifts, please ensure it meets the requirement for evening shifts (refer to accreditation procedure)