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| A: ACCREDITED PREVOCAATIONAL TRAINING PROVIDER NAME: | WESTMEAD HOSPITAL |
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| Training Term Based at: | <i>If not at above location, please give off site facility name and location:</i> |
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| Offsite Term? <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: TERM NAME | GENERAL SURGERY – Upper GI |
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| Overview of Unit or Service | <p>Please outline the role of the unit and range of clinical services provided:</p> <p>The Upper GI service will operate as combined service. The JMOs will not be divided among the consultant staff but will share the work of the whole unit, under the direction of the registrars.</p> <p>The term does give the staff the opportunity to learn a great deal about the conditions treated by the unit and to gain insight into the investigation, diagnosis and surgical management of upper GIT pathology.</p> <p>Please outline the patient case mix, acuity and turnover and how acutely ill the patients generally are:</p> <p>The case load is a mix of acute general surgical admissions, elective general surgery and major upper gastrointestinal procedures (including liver resections, partial & total pancreatectomy, gastrectomy and oesophagectomy). There is also a proportion of Transplant, Vascular and Trauma Patients. Many of the patients require quite intensive medical supervision, providing a challenge to the resident staff.</p> |
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| Term Duration (Weeks) | 10-11 Weeks |
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| HETI Term Identifier Number <i>HETI Assigned after accreditation decision</i> | 050011 |
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| Date of Accreditation by HETI | 1/05/2012 |
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| C: TERM CATEGORY <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 | If other please specify: |
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| Is the term a PGY1 or a PGY2 term? | PGY1 <input checked="" type="checkbox"/> PGY2 <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

Please indicate the term capacity – total number of PGY1s and PGY2 trainees

PGY1

2

PGY2

1

MAXIMUM NUMBER OF TRAINEES IN TERM

3

NOTE: number of PGY1s + number of PGYs=maximum Capacity

E: TERM SUPERVISION

Name, Position and Contact Details of Term Supervisor

Responsible for trainee term orientation and assessment

Dr Emma Johnston on mobile through switchboard

Term Supervisor Contact with Trainee

Term Supervisor to provide a plan for contact with the pre-vocational trainee/s during the training term

General Contact:

Orientation:

Meet with Dr Johnston on first day of term. 7am onB3c

Mid Term:

Appointment to be made with Dr Johnston in Week 5

End of Term:

Appointment to be made with Dr Johnston in Week 10

Primary Clinical Supervisor (if not Term Supervisor)

Consultant or senior medical practitioner with experience in managing patients in the relevant discipline (PGY3+)

Name, Position and Contact details

As above

Immediate Supervisor with direct responsibility for day to day supervision (PGY3+)

Position and Contact details

Upper GI SET registrar

Clinical Team Structure

Provide positions of all members of the clinical team who provide supervision and bedside teaching to pre-vocational trainees including AMO's and Registrars. Please also identify and describe how PGY1 & 2s will be distributed amongst the teams

Name, Position and Contact details

Dr Michael Hollands, VMO/Term Mentor, Rooms 9899 7322

A/Prof Vincent Lam, Staff Specialist

Dr Emma Johnston, Consultant

Dr Arthur Richardson, VMO Rooms 9687 0097 (Head of Upper GI Unit)

Prof Henry Pleass, Staff Specialist (pager 04385)

Surgical SRMO

Fellow

Registrar 2

Intern/RMO1 x 2

After Hours:

Surgical Registrar on call (pager 08452)

Consultants should only be contacted a/h after discussion with Surgical Registrar

F: SPECIFIC REQUIREMENTS TO PRACTICE SAFELY DURING THE TERM:

This section may include:

- Courses (e.g. life support, resuscitation)
- Procedural skills
- e-Learning requirements

If there are any specific requirements please provide details of how the trainee will receive this training/will be assessed

Unit protocols
RMO Handbook
CIAP site via Intranet
Internet

In particular Consultants wish to be notified regarding to changes in their patient's condition. They are to be contacted at any time of the day (after discussion with the Surgical Registrar) regarding the following:

1. Significant changes in patients condition especially those requiring transfer to High Dependency or Intensive Care Units.
2. In the event of death.

G: TERM LEARNING OPPORTUNITIES

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| Please list top 5 learning opportunities/objectives | 1 | Become a competent and efficient member of a surgical team. Understand and use appropriate investigations, diagnose complications and initiate management. |
| | 2 | Develop practical skills (e.g. cannulation, catheterisation, intercostal catheter placement and management , wound closure). |
| | 3 | Understand the pathophysiology of major surgery and be able to manage these patients competently (e.g. fluid management, nutritional support, sepsis, invasive monitoring). |
| | 4 | Learn how to communicate with patients, especially those with incurable illness, as well as their relatives |
| | 5 | Understand the use of antibiotics (mechanism of action, indications, complications) , and other medications used in surgery (proton pump inhibitors, laxatives, octreotide, anti-emetics.) |

H: EXPECTATIONS OF THE PREVOCATIONAL TRAINEE

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| Please list expectations | <ol style="list-style-type: none"> 1. Ensure that admissions, discharges and general ward care of patients are carried out according to the Department of Surgery Guidelines for Interns, Residents and Registrars. 2. Make sure operating lists are submitted on time (having been checked by or discussed with the CMO, Fellow or registrar). 3. Submit a list of names to the radiology department on Wednesday morning for the Thursday radiology meeting (due by 1200hrs) and at 4pm check all films have been found. 4. Ensure that all relevant investigations are available in the operating theatre and for ward rounds. 5. Check results daily and record them in the patient's progress notes. 6. Attend Pre-admission Clinic and ensure that relevant pre-operative investigations are attended and results reviewed. 7. Organise films and patient lists etc for MDTG Meeting 8. In the ERCP Meeting, the term residents liaise with the registrars in the audit meeting. <p>After Hours: Surgical Registrar on call (pager 08452) Consultants should only be contacted a/h after discussion with Surgical Registrar</p> |
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| Patient Load <i>(average per shift)</i> | Patient Load per trainee | <div style="border: 1px solid black; padding: 5px; width: 50px; margin: 0 auto;">10-15</div> | Patient load total for team | <div style="border: 1px solid black; padding: 5px; width: 50px; margin: 0 auto;">10-30</div> |
| After hours Roster <i>Does this term include participation in a hospital-wide afterhours roster and if so please advise frequency and the onsite supervision available after hours</i> | <p>The JMOs are rostered to a rotating Upper GI specific after hours roster which covers evenings and weekend days. The roster (attached) is based around being rostered to 5x 8hour shifts per week and every third weekend. In any given week one of the three will be preferentially rostered to afternoon shifts (ie 13:00-21:30), which over the course of the term will average out at just under 2 full weeks of afternoons</p> <ul style="list-style-type: none"> - Surgical Registrar on call (pager 08452) - Medical Registrar - Anaesthetic Registrar - ICU Registrar | | | |

I: SIGN OFF

Terms will not be considered unless this section is completed.

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| Revision date and by who <i>(Name and Position)</i> | |
| Endorsement by Term Supervisor <i>(Name, Date and Signature)</i> | |
| Endorsement by GCTC Chair (or representative) <i>(Name, Date and Signature)</i> | |

HETI OFFICE USE ONLY – Approved by PAC or PAC Member

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|---|--|
| Date | |
| Signature/TRIM DOC number of PAC minutes | |

J: TERM / UNIT TIMETABLE AND INDICATIVE DUTY ROSTER

| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
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| 0700-0830 Team Ward Rounds | 0700-0830 Team Ward Rounds | 0730-0830 Trauma Meeting | 0700-0830 Team Ward Round | 0700-0830 Team Ward Round | | |
| 0745-0900 Upper GI MDT | 0830-1200 Dr.Lam OT Weeks 1 - 3 | 0830-0930 Team Ward Round | 0730 Weeks 2 & 4 Endoscopy Meeting | 0830-1700 Dr Richardson Operating List Weeks 2, 3 & 4 | | |
| 0830-1700 Dr.Hollands OT WK 1-4 0830-1700 Dr.JohnstonOT WK 1&3 0830-1700 Dr Richardson OT Week2 0830-1700 Dr. Lam OT Week 4 | 0830-1700 Dr Ryan Operating List Weeks 2 & 4 | 1200-1300 Surgical JMO Teaching Alt.weeks | 0830-0930 Upper GI Radiology Meeting | 1600-1630 Team Round & review of Pathology Results | | |
| 1600-1630 Team Round & review of Pathology results | 1300-1400 JMO Surgical Seminars (timetable issued each term) | 13:00 Liver & Oesophageal Cancer Clinic | 0930-1200 Dr. Johnston Outpatient Clinic | | | |
| 1700-1800 Dept Surgery Meeting: Monthly Audit, Surgical Grand Rounds | 1600-1630 Team Round & review of Pathology results | 1600-1630 Team Round & review of Pathology Results 1700-1800 Gastroenterology Meeting | 0830-1700 Dr.Pleass OT Wk 1-4 1600-1630 Team Round & review of Pathology Results | | | |

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)