

North Western Foundation School ELHT Programme

Individual Placement Description

<p>Post: FY1 General Surgery; Hepatobiliary and Pancreatic (HPB) Surgery</p>
<p>The department:</p> <p>HPB surgery is the busiest of the general surgical specialties and turns over a very high volume of patients. The team consists of 5 consultant HPB/general surgeons, 5 ST3+ (or equivalent), 1 CT1 doctor, 2 FY2 doctors and 5 FY1 doctors (4 banded 1B and 1 unbanded). The consultants and senior members of the team are primarily based in theatre and clinics whilst the junior members of the team are mainly based across several surgical wards and often have patients as outliers on intensive care and other medical wards. They also have the added responsibility of working on call in the Surgical Triage Unit (STU) on a rotational basis.</p>
<p>Main duties of the post:</p> <p>Ward role The FY1 doctor is responsible with other staff for the general ward care of surgical patients, the population of the surgical patient list and the maintenance of the patient's medical record. During the placement the FY1 will become familiar with regularly assessing a large variety of surgical patients from the following categories:</p> <ul style="list-style-type: none"> -Acute/emergency surgical patients requiring rapid assessment and treatment -Acutely unwell patients (pre and post operatively) -Elective surgical patients -Post operative patients <p>Due to volume of daily ward work, trainees will have very limited time to attend clinic and theatre sessions but providing ward work is manageable/completed opportunities can arise.</p> <p>STU role The FY1 role on STU involves the initial clerking, accurate medical record keeping and assessment of all general surgical patients. The FY1 is also expected to formulate an immediate action plan and effectively hand over to a ST3+ or equivalent or consultant in order to finalise treatment. Out of hours, the FY1 is expected to provide medical cover to all surgical patients within the hospital.</p> <p>During this post, you may be rota'd to attend a week in critical care and anaesthetics and the learning outcomes for this week are also listed below. Please see below for the suggested learning objectives for this post and the critical care week which have been mapped to the curriculum.</p>
<p>Typical working pattern in this post e.g ward rounds, clinics, theatre sessions:</p> <p>See Work Schedule</p>
<p>Where the post is based: Royal Blackburn Hospital</p>
<p>Clinical Supervisor(s) for the post: Mr R Watson, Miss A Kausar, Mr D Chang, Mr D Subar, Mr C Harris</p>

It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.

Specific Learning Objectives for this Post

(Due to the general nature of this placement many other generic aspects of the Foundation Programme curriculum such as 'professionalism' will definitely be encountered and can be mapped accordingly in the trainee's portfolio)

Each objective should be achieved to the standard laid out in the outcomes for F1 and F2 years stated in the curriculum

Learning Outcomes	Foundation Curriculum mapping
<ul style="list-style-type: none"> • To meet the members of the general surgical team and understand their individual roles and how each contributes to the care of surgical patients, particularly the upper gastrointestinal patients 	1, 7
<ul style="list-style-type: none"> • Understand the importance of communication skills especially in difficult situations 	6a, 6b
<ul style="list-style-type: none"> • Observe/contribute to breaking bad news 	6b
<ul style="list-style-type: none"> • Observe the importance of patient understanding in decision making when there is more than one option available to patients 	2a, 2b
<ul style="list-style-type: none"> • Observe how management plans for surgical patients are individualised to take in to account the patient's needs and wishes 	2a
<ul style="list-style-type: none"> • Appreciates how co-morbidity can affect the options available to patients considering surgery 	2a
<ul style="list-style-type: none"> • Appreciate the holistic approach to general surgery 	10a, 10b
<ul style="list-style-type: none"> • Consider the ethical and legal aspects of a patient's care, in particular patients who have limited mental capacity 	3c
<ul style="list-style-type: none"> • Be part of the theatre team and scrub in to assist surgical procedures where possible 	1
<ul style="list-style-type: none"> • Observes patients being consented for surgery and obtains valid consent after appropriate training 	2c
<ul style="list-style-type: none"> • Appreciate the importance of patient safety checks in theatre 	19a, 19c
<ul style="list-style-type: none"> • Follow an aseptic technique 	19e
<ul style="list-style-type: none"> • Subcutaneous injections and suturing (+/- any other procedural skills that arise such as catheterisation) 	14
<ul style="list-style-type: none"> • Contribute to the MDT meeting 	1
<ul style="list-style-type: none"> • Take part in ward rounds reviewing the post-operative patients 	1, 11e
<ul style="list-style-type: none"> • Maintain accurate patient notes, produce discharge summaries in a timely efficient manner 	6d, 11g
<ul style="list-style-type: none"> • Takes part in the discharge planning process 	11f
<ul style="list-style-type: none"> • Participate in an audit project and present it at the surgical audit meeting 	4b, 20
<ul style="list-style-type: none"> • Provide teaching and learning opportunities for medical students/other healthcare professionals within the general surgical team 	4b
<ul style="list-style-type: none"> • Use clinical situations to direct and develop self-directed learning 	4a
<ul style="list-style-type: none"> • Implement and keep up to date with national and local surgical and medical guidelines 	1, 3a

<ul style="list-style-type: none"> • Participate in daily ward round and complete all necessary jobs that arise from it • Assess, triage and treat acutely unwell surgical patients in an on-call/out of hours setting • Participate in/initiate lifesaving treatment/resuscitation to the critically unwell patient • Understand the clinical, ethical and legal implications of a do not attempt resuscitation (DNAR) order and any other advanced directives • Understand how long term conditions and co-morbidities can effect treatment and patient recovery • Work with members of the multidisciplinary healthcare team to provide holistic care to the surgical patient, particularly during the recovery phase • Inform and accurately disseminate medical information to patients and their families in order to promote health and provide knowledge from which informed decisions on treatment can be made. 	<p>1, 9 9, 15 2b, 10 1, 7 2, 6a, 16</p>
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