

Run Description

POSITION:	Junior Registrar	
DEPARTMENT:	Department of General Surgery	
PLACE OF WORK:	Middlemore Hospital	
RESPONSIBLE TO:	Service Manager through their Consultant and the Clinical Head of General Surgery	
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community based healthcare workers	
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Department of	
	General Surgery	
RUN RECOGNITION:	This run is accredited by the Royal Australasian College of Surgeons for the training of	
	Non-Set Registrars	
RUN PERIOD:	6 months	

Section 1: Registrar's Responsibilities

Area	Responsibilities
Clinical Responsibility	 The Registrar will supervise the work of a House Officer, with whom they will organize the investigation and management of patients under the care of the Department The Registrar will be available to attend Consultant ward rounds and will have a current knowledge of the progress of inpatients under their care The Registrar will answer calls by GPs about patients and arrange to assess patients if necessary The Registrar will attend rostered outpatient clinics promptly and will endeavor to see outpatients at their scheduled appointment times. Outpatients not previously seen in the Department or those who are to be discharged will normally be discussed with a Consultant Surgeon. Clinical skills, judgement and knowledge are expected to improve during the attachment. Notwithstanding that formal referrals are made from consultant to consultant, the Registrar may see inpatient referrals on behalf of their consultant. The Registrar will attend calls as part of the trauma team for surgical emergencies. The Registrar will perform or assist with operative procedures as required.
	the house surgeon as to patients fitness/consent for surgery.

Acute Admitting• When rostered on acute call the Registrar will assess and admit acute patients and also respond to ED requests within a timely manner as indicated by the 6 hour initiative at CMDHB Emergency Care Department.Administration• Legible notes will be written in patient charts on admission and whenever management changes are made. The latter may in part be delegated to the House Officer.• The Registrar is responsible for the completion of death certificates (and GP letters informing the GP of the circumstances of death) for patients who have been under their care, although the certification may be delegated to a House Officer.• Letters will be written to the patient's GP after each outpatient visit. The results of all investigations will be sighted and accepted.• The Registrar is responsible for submitting and checking audit entries in respect of their team. Registrars are expected to take an active part in the monthly audit meeting.		
 management changes are made. The latter may in part be delegated to the House Officer. The Registrar is responsible for the completion of death certificates (and GP letters informing the GP of the circumstances of death) for patients who have been under their care, although the certification may be delegated to a House Officer. Letters will be written to the patient's GP after each outpatient visit. The results of all investigations will be sighted and accepted. The Registrar is responsible for submitting and checking audit entries in respect of their team. Registrars are expected to take an active part in the monthly audit 	Acute Admitting	also respond to ED requests within a timely manner as indicated by the 6 hour
 The Registrar is responsible for the organisation of bookings for elective surgery and for planning elective surgery lists. 	Administration	 management changes are made. The latter may in part be delegated to the House Officer. The Registrar is responsible for the completion of death certificates (and GP letters informing the GP of the circumstances of death) for patients who have been under their care, although the certification may be delegated to a House Officer. Letters will be written to the patient's GP after each outpatient visit. The results of all investigations will be sighted and accepted. The Registrar is responsible for submitting and checking audit entries in respect of their team. Registrars are expected to take an active part in the monthly audit meeting. The Registrar is responsible for the organisation of bookings for elective surgery

Section 2: Training and Education

Education	 Through example and supervision the Registrar will actively contribute to the education of House Officers. On occasion, the Registrar may be requested to assist with the teaching of other healthcare workers and medical students. Registrars present case summaries and/or topic reviews on a weekly basis. Registrars will actively contribute to departmental teaching and audit sessions.
Research	 A research project may be undertaken during the attachment A research project at some point in the Registrars training is a requirement for fellowship training for the RACS.

- Note: dates and times for the sessions above may change.
- There is a minimum of 4 hours per week medical learning, which includes the weekly tutorial, and pathology session

Section 3: Roster:

Hours of Work			
Ordinary Hours	Monday to Friday	0730-1530	
Acute Week	Monday to Friday	0730 - 1730	
Acute Call Long day duty	Monday to Friday	0730-2230	
Acute Call Long day duty	Saturday to Sunday	0730 - 2230	
Night duty	Monday to Sunday	2200-0800	

RMO's may be asked to attend Saturday Ward Rounds, this is not a requirement; however, there are a number of unrostered hours included in the run category to cover such occurrences.

Section 4: Cover:

Other Resident and Specialist Cover

There are 8 Junior General Surgery registrars and 4 relievers. The Relievers will be rostered to cover the Registrar on leave or night duty.

Night duty is shared amongst the Junior registrars. All the Registrars are rostered to do acute call on weekdays and weekends.

Leave

Applications for leave are treated on a "first-come-first-served" basis and should be submitted as early as possible to facilitate cover arrangements for duties. Cover for leave is generally provided by a leave reliever.

Registrars within the department are asked to cover short-term sick absence of colleagues - additional duty payments are made for any after hours cover provided.

Applications for medical education leave should be submitted early to allow for co-ordination and planning of multiple requests.

Section 5: Performance appraisal

Performance

Performance will be assessed using the criteria above and will be discussed at formal meetings at the beginning of the attachment and again at 3 months and 6 months. If deficiencies are identified during the attachment the Consultant Surgeon will bring these to the Registrar's attention and discuss how they may be corrected.

Section 6: Hours and Salary Category

Average Working Hours		Service Commitments
Basic hours (Mon-Fri)	40	
Rostered additional hours (inc. nights, weekends & long days ₎	16.11	The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters.
All other unrostered hours	10.62	
Total hours per week	66.73	
Total hours per week	66.73	

Salary: This attachment is a Category A run.

The salary for the reliever/night reliever will be remunerated at Category A++