

# RUN DESCRIPTION

<b>POSITION:</b>	House Officer – PGY1
<b>DEPARTMENT:</b>	Obstetrics and Gynaecology – Women’s Health
<b>PLACE OF WORK:</b>	Middlemore Hospital and Manukau Super Clinic (CM Health)
<b>RESPONSIBLE TO:</b>	General Manager Women's Health and the Clinical Director of Obstetrics and Gynaecology.
<b>FUNCTIONAL RELATIONSHIPS:</b>	Health care consumers Hospital and community based health care workers
<b>PRIMARY OBJECTIVE:</b>	To facilitate the management of patients under the care of the service. To provide basic training in Obstetrics and Gynaecology.
<b>RUN RECOGNITION:</b>	This run is recognised as Category E for the purposes of registration by the Medical Council of New Zealand
<b>RUN PERIOD:</b>	3 months

## Section 1: House Officer Responsibilities

<i>Area</i>	<i>Responsibilities</i>
<b>Clinical Duties:</b>	<ul style="list-style-type: none"> <li>• Follow the HO roster for hours worked and after-hours duties.</li> <li>• Follow the daily timetable for rostered duties. The HO reports clinically to the supervising Registrar or Consultant rostered with them for the session.</li> <li>• Ensure complete hand-over of unfinished work, or patients that need review, or patients who are of concern at the end of each shift to the on-coming HO, or registrar or Consultant, as appropriate.</li> <li>• Duties include: <ul style="list-style-type: none"> <li>○ Routine ward work, including attending patients urgently as requested by nursing, midwifery or other medical staff from Women’s Health.</li> <li>○ Attending acute admissions in emergency care (EC) in close liaison with the gynaecology registrar. On discussion, this will include assessing the patients’ problems and initiating or reviewing investigations and management plans</li> <li>○ Gynaecology ward round with the acute gynaecology team of the day</li> <li>○ Pre-admission clinics, working in close liaison with the clinic nurse</li> </ul> </li> </ul>

Area	Responsibilities
	<p>and the surgeon responsible for the list.</p> <ul style="list-style-type: none"> <li>○ Theatre assistant, including elective and urgent caesarean sections.</li> <li>○ Other training opportunities / clinical duties as they arise and directed by the supervising Registrar/ Consultant</li> </ul>
<b>Administration</b>	<ul style="list-style-type: none"> <li>• Legible notes will be written at all times, dated, timed and signed along with the personal stamp including the MCNZ registration number and a contact phone number. This includes inpatient notes, in outpatient clinics, on admission, daily ward rounds and particularly whenever management changes are made.</li> <li>• Complete hand-written clinical summaries in the notes at the time of patient discharge.</li> <li>• On discharge, an electronic discharge summary should be completed for all gynaecology patients. Ideally these should be completed before the patient goes home. If the HO is at all unsure what to write they should contact the supervising Registrar or Consultant. They should ensure that all investigations have been requested, that a prescription is written, if required, and follow-up arrangements have been made.</li> <li>• RMOs are expected to familiarise themselves with all patient record systems used for their patient group in the DHB. In Maternity this includes Maternity Clinical Information System (MCIS) (however systems may change in future), and to document all information within the system for patients registered in MCIS (or in future replacement systems). This will include clinic letters, admission notes, discharge summaries and intrapartum care and procedures.</li> </ul>

## Section 2: Training and Education

<i>Details</i>
<p>There will be normally a 2-3 hour education session each week specifically for HOs in O&amp;G. Diagnosis and treatment of common O&amp;G problems will be discussed. HO will be expected to take part in presentations to lead these discussions. HOs are invited to join the Wednesday morning departmental clinical/ education meetings (as possible depending on clinic duties); a list is provided in advance by one of the senior registrars.</p> <p>Research is not applicable to this post; however an audit topic for a 6 month run is expected.</p>

### Section 3: Roster

#### *Roster*

There are 9 House Officers employed on the roster and 1 additional reliever. The PGY1 House Officer is rostered to 1 weekday long day per week which will alternate between Monday to Friday. This is their only after hours duty. The remaining House Officers share night and long day duties equally at a frequency of 1:7 over the run.

The ordinary hours of work will be 8 hours per day between 08.00 and 16.00 Monday to Friday.

When rostered to a week day long day the PGY 1 HO will be in addition to the usual HO. Two Registrars and an SMO will also be resident in the hospital at all times. They should be consulted when there are any concerns and following review of patients in Emergency Care before admission or discharge.

Key		
	Normal Hours	0800 - 1600
<b>L</b>	Long Day	0800 - 2230
x	Rostered Off	-
PH	Public Holiday	-

### Section 4: Cover:

#### *Other Resident and Specialist Cover*

In general, no more than 1.5 weeks of annual leave should be taken in a 3 month period.

All requests for educational leave are subject to approval by their Clinical Director and to authorisation by the General Manager of Women's Health.

### Section 5: Performance appraisal

#### *Performance*

Performance will be assessed by Senior Medical Staff of the Department and a report forwarded to the Intern Supervisor after discussion with the HO. If deficiencies are identified during the attachment, the Consultant to whom the HO is responsible will bring these to the HO's attention and discuss how they may be corrected.

As per MCNZ requirements, the HO will meet with their Intern Supervisor at the beginning of the run to discuss learning objectives using the RP1 Form. The HO will meet again mid run to discuss performance and establish that the agreed learning objectives are being met and to provide feedback. The HO and their Intern Supervisor will meet again at the end of the run to complete the RP2 Form.

## Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40	The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters.
Rostered additional hours (inc. nights, weekends & long days)	6.5	
All other unrostered hours	5.40	
Total hours per week	51.90	

**Salary:** The salary for this attachment will be as detailed for a Category D run