

RUN DESCRIPTION

POSITION:	Registrar – Cardiology Echo
DEPARTMENT:	Cardiology
PLACE OF WORK:	Waitemata District– North Shore Hospital and Waitakere Hospital
RESPONSIBLE TO:	Clinical Director of Cardiology, Cardiology Operations Manager
FUNCTIONAL RELATIONSHIPS:	Consultants and Registrar in the cardiology service, health care consumers and multidisciplinary healthcare team
PRIMARY OBJECTIVE:	- To play an active role in performance and reporting of echocardiographic procedures - To play an active role in outpatient clinics and cardiology service in Collaboration with specialist consultants - To participate as an active member of the team promoting effective management of the cardiology patients. - To provide a high standard of clinical practice and clinical expertise in the assessment, investigation, diagnosis and treatment of patients. - To provide supervision, instruction and support for junior medical staff. - To provide after hours on-call duties covering cardiology and medical patients.
RUN RECOGNITION:	That the run is accredited for the training of basic and advanced Cardiology trainees
RUN PERIOD:	6 months

Section 1: Responsibilities

<i>Area</i>	<i>Responsibilities</i>
Clinical Duties & Work Schedule	Cardiac Echo - There are 2 echocardiography laboratories one at North Shore and the other at Waitakere Hospital. Both are general hospitals and referrals are expected from cardiology, general medicine and other services. The trainee is expected to review their reports with one of the cardiologists before release. There are 9 qualified and two full time trainee sonographers. The echocardiography service is well established. The 2 laboratories perform around 10,000 echo studies per year, including transoesophageal echocardiograms, and stress echocardiograms.. - On weekly basis the registrars are expected to be involved in the following: - At least eight stress echocardiographic studies (2 sessions)

Area	Responsibilities
	2. There are three transthoracic echocardiographic (TTE) lists and the expectations are that the registrars perform and report no less than 8 studies per week(3 sessions) 3. The transoesophageal (TOE) list is dependent on the referrals, the average is no less than 3 studies per week (one session) 4. The total number of sessions is; 2 stress echo, one TOE and three TTE lists which comprise 0.6FTE for the registrar • The expectations are that at the end of the run the registrar will have performed 160-180 transthoracic studies, no less than 50 TOEs and has reported them all under the supervision of one of the cardiologists in our laboratory. This is based on an average of 6-8 TTE studies and 2-3 TOEs per week on an average of 20 weeks per run. Research Duties • There is a 0.2FTE dedicated research component. The registrar will be expected to liaise with his/her supervisor in advance of the commencement of the run to discuss potential research projects he/she can participate in or design and execute. It is expected that by the end of the run the registrar has written up at least one project worthy of submission for publication. The registrar will be assigned to a research supervisor at the beginning of the run and that supervisor will continue to provide supervision and guidance throughout. Clinical Duties • This will be in the cardiology outpatient clinics and assisting with ward referrals. • The registrar is responsible for the clinical assessment, investigation, diagnosis and treatment of patients under the supervision of the cardiology specialist. • To facilitate the safe and efficient management of patients in the care of the 1. Cardiology service, under the supervision of the Consultant. 2. To undertake outpatient clinics weekly in North Shore hospital providing clinical management of outpatients with cardiology disorders. Clinics will be conducted during ordinary hours under the supervision of a consultant. 3. In the event of a consultation being requested by another service, arrange for the patient to be seen either by the Registrar and/or the on call Cardiologist. 4. Where necessary interpret Exercise ECG's for patients in Coronary Care/Step-down unit and discuss these with the cardiologist where appropriate. 5. Any other duties that may be required in the interest of the department, such as organizing clinics, and lunchtime presentations. 6. Participate in weekend and rostered night call in the acute medical wards as stated below Expected Results • Achieve proficiency in performing and interpreting transthoracic and transoesophageal echocardiograms and be able to show good understanding of the fundamentals of echocardiography • Achieve a basic understanding of stress echocardiography, indications, limitations and technique. • A high standard of clinical care, including assessment, investigation, diagnosis and treatment will be provided for patients. • The clinical well-being of patients is assured at all times, and care is delivered in a sensitive fashion, taking into account ethnic and other interests, and recognition of patient rights. • Actively promote early, effective and appropriate discharge of patients within the job role • Maintain a high quality of clinical management of Outpatients in collaboration with Cardiologist.

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	- Documentation will be sent to the patient's practitioner at the time of their procedure as appropriate. - Maintain effective interpersonal relationships with members of the multidisciplinary team, patients and relatives/whanau. - Provide supervision, instruction and support to junior medical staff as required. - Participate in the Registrar medicine on call roster.
Administration	- Maintain a satisfactory standard of documentation in the files of patients. All prescriptions and notes are to be signed, with a printed name and locator number legibly recorded; - Be responsible for certifying death and complete appropriate documentation; - At the direction of the Clinical Director, assist with operational research in order to enhance the performance of the Service; - Dictate discharge summaries on patients that are discharged by their team and letters to General Practitioners following outpatient visits in a timely fashion; - Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: "The practitioner who is providing treatment is responsible for obtaining informed consent beforehand for their patient. The Medical Council believes that the responsibility for obtaining consent always lies with the consultant – as the one performing the procedure, they must ensure the necessary information is communicated and discussed." "Council believes that obtaining informed consent is a skill best learned by the house surgeon observing consultants and experienced registrars in the clinical setting. Probationers should not take informed consent where they do not feel competent to do so. - If absent due to unexpected circumstances (e.g. health, other), contact the RMO Support Unit or Duty Manager directly as well as the Consultant to which the registrar is clinically responsible in the absent duty. - As an RMO working at WDHB you will be provided with a Clinical Portal login and a WDHB email account which will be used for all work related communication. It is your responsibility to ensure you check this regularly.

Section 2: Training and Education

<i>Nature</i>	<i>Details</i>
Protected Time	The Registrar will attend weekly (unless attendance is required for an emergency) the: - Cardiology Journal Club Monday 0815-0900 - Cardiology Advanced Trainee core lecture series 0730-0900 Auckland City Hospital via online - NSH Medical Grand Round NSH Tuesday 1230 – 1330 Conference Room 1 Cardiology Registrar Clinics Wednesday morning and Friday afternoon They will also : - Participate in clinical audit within the Department. - Assist when required with junior medical staff teaching programmes. - Registrars present case summaries and topic reviews on a regular basis. - To attend other meetings/sessions designated by the Clinical Leader of Cardiology (e.g. cardiosurgical (CTSUS) case conference at Auckland City Hospital via online).

Nature	Details
	Performance - Two nominated WDHB Cardiologists who are accredited supervisors for RACP Advanced Training will assess performance using the criteria above. - Performance 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 will bring these to the Registrar's attention and discuss how they may be corrected (e.g. cardiosurgical case conference). Expected results - Provides clinical teaching sessions for Resident Medical Officers, nursing and other related health professionals, Wednesday 1330-1400 - Evidence of continuing self-education, including appropriate use of continuing medical education leave, so that up to date knowledge and practice is maintained. - Applications for annual leave are treated on a "first-come-first-served" basis and should be submitted as early as possible to - facilitate cover arrangements for employee's duties. - 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 – This will be discussed in advance with the Cardiologist on call for the period involved and agreed to if there is sufficient coverage. - Applications for medical education leave should be submitted early to allow for co-ordination and planning of multiple requests. Additional Service Coverage: - There are 5 Registrars on this run. The On Call Cardiology Registrar provides cover on public holidays. - The Cardiology House officers will be under the supervision of both the cardiology registrar and the on-call cardiologist. In any situation when the cardiology Registrar is off-site or unavailable the cardiology House officers should contact the on call Cardiologist or if unable to contact the Cardiologist, the on call Medical Registrar. - Annual Leave, Study Leave, Sick Leave etc will be covered internally, bearing in mind the registrar's role in the echo lab is a training role that may not require cover at times of absence

Section 3: Cover

Other Resident and Specialist Cover
The Cardiology Echo Medical Registrar will combine with the Medical Specialty Registrars to provide cover for the General Medicine Service between the hours of 2200 to 0800 Monday to Thursday. Saturday and Sunday weekend shifts (KW) to cover Cardiology and assist in General Medicine if required. Cover for any leave requested by the Cardiology Registrar positions is not generally required, however can be provided by the Cardiology reliever position or General Medicine relief pool when required.

Section 4: Roster

Hours of Work

Ordinary Hours of work

- 08:00 – 17:00 Monday to Friday, 9 hours
- 22:00 – 18:00 Nights, Monday to Thursday
- 08:00 – 18:00 Saturday & Sunday Weekend Shifts (KW)

	1 x RMO - AT (Cath Lab/ Echo)						
	M	T	W	T	F	S	S
Week 1							
Week 2						KW	KW
Week 3							
Week 4	N	N	N	N	Z	Z	Z
Week 5							
Week 6							
Week 7						KW	KW
Week 8							
Week 9							
Week 10							
Week 11							
Week 12						KW	KW
Week 13							
Week 14							
Week 15							
Week 16							
Week 17						KW	KW
Week 18							
Week 19							
Week 20							
Week 21							
Week 22						KW	KW
Week 23							
Week 24							
Week 25							
Week 26							

- Registrars will be required to work 1:5 weekends Approx 5-6 weekends over 26 weeks.
- Registrars will be required to work 1 set of 4 Nights over 26 weeks.

Overnight from 2200 – 0800 there will be a consistent workload across the WDHB General Medicine and Medical Specialties:

- A consistent workload for 2 Registrars overnight 2200 – 0800 Monday – Thursday for 15 weeks per run over summer
- A consistent workload for 3 Registrars overnight 2200 – 0800 Monday – Thursday for 11 weeks per run over winter
- A consistent workload for 3 Registrars overnight 2200 – 0800 Friday – Sunday all year

Staffing levels for weekday long days and weekends do not vary in summer and winter and will instead remain consistent across the year.

Weekly Responsibilities

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	08:00 Journal Club Stress echo	07:30 Cardiology Core Lecture via online (ACH) Stress echo 12:30 Medical grand Rounds	CTSU Meeting via online ACH Cardiology OP Clinic	Echo/WTH	TOE list Referrals 11:00 Cardiology Clinical Conference
PM	Referrals	Referrals	Echo list/NSH Research	Echo/WTH Research	Cardiology OP Clinic

Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<i>The Registrar will:</i> - Ensure they arrange a formal meeting with their supervising consultant to assess and discuss their performance at the beginning of the attachment, and again at three and six months. - If deficiencies are identified, the Consultant will identify these with the Registrar who should implement a corrective plan of action under the advice of their Consultant.	<i>The service will provide:</i> - an initial meeting between the Consultant and Registrar to discuss goals and expectations for the run, review and assessment times, and one on one teaching time. - an interim assessment report on the Registrar three (3) months into the run, after discussion between the Registrar and the Consultant responsible for them; - the opportunity to discuss any deficiencies identified during the attachment. The Consultant responsible for the Registrar will bring these to the Registrar's attention, and discuss and implement a plan of action to correct them; - a final assessment report on the Registrar at the end of the run, a copy of which is to be sighted and signed by the Registrar. - The Director of Basic Physician Training will be available to discuss problems and progress.

Section 6: Hours and Salary Category

Average Working Hours		Service Commitments
Basic hours	40.0	The Service together with RMO Support Unit will be responsible for the preparation of any rosters.
Rostered additional hours (inc. nights, weekends & long days)	10.88	
Note: this includes rostered Monday to Friday 1600-1700 and 0730 – 0800 Tuesday Teaching		
All other unrostered hours <i>To be confirmed by a run review</i>	TBC	
Total hours per week	50.88	

Salary: The Salary for this attachment will be as detailed as a Category C run.

Totals hours fall above the middle of the salary band and the service expect the unrostered hours to be above 8 hours on average per week therefore the run will be remunerated as a C until confirmed by a run review.