

RUN DESCRIPTION

POSITION:	Immunology/Rheumatology Registrar
DEPARTMENT:	Immunology/Rheumatology
PLACE OF WORK:	Auckland City Hospital and Greenlane Clinical Centre
RESPONSIBLE TO:	Clinical Directors and Business Managers of Immunology and Rheumatology, through a nominated Consultant/Physician.
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the Immunology and Rheumatology Services.
RUN RECOGNITION:	This run is recognised by the RACP and RCPA as a training position for specialist qualification
RUN PERIOD:	6 months

Section 1: Registrar's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
General	<ul style="list-style-type: none"> • Manage the assessment and admission of acute and elective patients under the care of his/her team. Undertake clinical responsibilities as directed by the Consultant. Also organise relevant investigations and ensure the results are followed up, sighted and signed; • Responsible for patient referrals and day to day ward management of patients under their team's care, in consultation with others involved in the care of the patient where appropriate; • Work closely with medical specialists in provision of assessment and investigations of new patients and follow-ups in outpatient clinics • Undertake diagnostic and treatment procedures appropriate to the subspecialty • Maintain a high standard of communication with patients, patients' families and staff; • Inform consultants of the status of patients especially if there is an unexpected event; • Attend hand-over, team and departmental meetings as required.
Acute admitting	<ul style="list-style-type: none"> • Assess and admit Clinical Immunology and Rheumatology patients referred by ED or from the community and other medical and medical subspecialty patients when required

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<i>Area</i>	<i>Responsibilities</i>
	by the attached roster
On-Duty	<ul style="list-style-type: none"> • Provide advice to and liaise with GP's and other hospital medical staff on Clinical Immunology matters; • Authorise patients to be transferred to and be seen by the Clinical Immunology service when appropriate
Inpatients	<ul style="list-style-type: none"> • When allocated ward duties within the service undertake regular examination management of, and updating of management plan of admitted patients for whom the Rheumatology service is responsible on a frequency agreed with the clinical director; • Ensure x-rays are organised for weekly team radiology session; • Ensure relevant documents, e.g. discharge summary, medication card and follow-up appointments are given to patient on discharge as necessary. • Ensure weekend plans for patient's management are documented in the notes; • When not on duty on Friday evening or the weekend, inform the on-duty medical staff about patients whose condition requires monitoring and review; • Complete documentation on Friday prior to known or likely weekend discharges.
Outpatients	<ul style="list-style-type: none"> • Assess and manage patients referred to outpatient clinics and run the clinics on behalf of senior staff where appropriate • Communicate with referring person following patient attendance at clinics; • Arrange and perform outpatient investigations • Regularly review immunodeficiency patients attending daystay for IVIG to ensure that there are no acute problems that the IVIG dose is adequate and that 6 monthly follow-up is organised. • Supervise Immunology Day Ward venom and drug desensitisation, food and drug challenges in association with an Immunology nurse.
Administration	<ul style="list-style-type: none"> • 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: <ul style="list-style-type: none"> • 1. "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." • 2. "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.

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Section 2: Training and Education

	Mon	Tues	Wed	Thurs	Fri
am	<p>Shared</p> <p>Rheumatology ward consults and ACH cover</p> <p>Immunology Ward Consults on day the other Reg is away.</p>	<p>Immunology ½ Day</p> <p>Supervise Day Ward/Ward consults/GP calls</p>	<p>Rheumatology ½ day</p> <p>Rheumatology clinic GCC 0830 - 1230</p>	<p>Immunology ½ Day</p> <p>Ward consults</p> <p>Rheumatology 1100-1200 Radiology conference</p>	<p>Shared</p> <p>Rheumatology ward consults and ACH cover</p> <p>Immunology Ward Consults on day the other Reg is away.</p>
pm	<p>Rheumatology ½ day</p> <p>Immunology CME 1-2pm</p> <p>1600-1800 UPROAR meeting GCC</p>	<p>Immunology ½ Day</p> <p>Immunology OP Clinic ACH 13.30-16.30</p>	<p>Immunology ½ Day</p> <p>Immunology OP Clinic ACH 13.30-16.30</p>	<p>Rheumatology ½ day</p> <p>Rheumatology clinic GCC 13.30 – 16.30</p>	<p>Rheumatology ½ day</p> <p>Ward referrals/ GP calls on day that other reg is away</p>

Monday am: Shared to catch up after weekend
Monday pm: Rheumatology

Tuesday all day: Immunology (ACH)

Wednesday am: Rheumatology clinic GCC with Dr Fiona McQueen
Wednesday pm: Immunology (ACH)

Thursday am: Immunology (ACH)
Thursday pm: Rheumatology clinic GCC currently using room allocated to HO (to try and get room at ACH with Dr Dalbeth)

Friday am: Shared to catch up before weekend
Friday pm: Rheumatology.

Flexibility on Friday i.e. if full time registrar is on Gen Med roster then the 0.5 Registrar covers that team.

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Section 3: Training and Education

<i>Nature</i>	<i>Details</i>
<ul style="list-style-type: none"> Protected Time 	<ul style="list-style-type: none"> The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster) Orientation at the beginning of the run Clinical Immunology training – Monday 1300-1400 location TBA Medical Science lecture and Grand Rounds – Thursday 11:30-1300 Education Centre Rheumatology CME – Monday 1600-1800 General Medicine– Friday AM Case discussions Clinical Immunology – Monday PM or Fri AM Specialty training – combined Rheumatology meeting, xray conference and pain team meeting. <p><i>Timing of educational sessions is subject to change</i></p>
<ul style="list-style-type: none"> The Registrar is expected to contribute to the education of nursing, technical staff and medical staff when requested 	

Section 4: Cover:

<i>Other Resident and Specialist Cover</i>
<p>The registrar will be required to work between 0800 and 1700 Monday to Friday inclusive.</p> <p>The registrar shall also participate for the 6 months of the run in a 104-week Medical Subspecialty duty roster. This roster is asymmetric and requires the registrar to work between the hours of 1600 and 2230 on average six times in six months. Night duties Friday and Saturday 2200-0800 for General Medicine on average 3 or 4 sets over six months. Weekend ward rounds for General Medicine Saturday and Sunday 0800-1600 (0800-1200 ward cover, 1200-1600 assisting in APU) on average 3 or 4 sets over six months.</p> <p>When on duty 1600-2230 on the Subspecialty roster, registrars are responsible to their own service but also support the General Medical registrar in the Admission and Planning Unit and Older Peoples Health from 1900.</p>

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Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<ul style="list-style-type: none"> • The Registrar will: • At the outset of the run meet with their designated consultant to discuss goals and expectations for the run, review and assessment times, and one on one teaching time • After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant; 	<ul style="list-style-type: none"> • The service will provide, • 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.

Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40.00	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)	11.04	
All other unrostered hours	3.00	
Total hours per week	54.04	

Salary The salary for this attachment will be as detailed as a D Category to be confirmed by a run review.

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