

RUN DESCRIPTION

POSITION:	Registrar	
DEPARTMENT:	Ophthalmology	
PLACE OF WORK:	CMDHB - Manukau SuperClinic™	
RESPONSIBLE TO:	Clinical Director and Service Manager of Ophthalmology through a nominated Consultant	
FUNCTIONAL RELATIONSHIPS:		
PRIMARY OBJECTIVE:	/E: To facilitate the management of patients under the care of Ophthalmology	
RUN RECOGNITION:	This run is recognised by RANZO as a training position for specialist qualification	
RUN PERIOD:	3 months	

Section 1: Registrar's Responsibilities

Area	Responsibilities			
Clinical Duties	• Implement treatment of assigned patients (including ordering and following up of any necessary investigations) under the supervision of the Consultant.			
	• Perform required procedures and seek supervision of consultant where appropriate.			
	• Perform operating lists as required under direct or indirect supervision of Consultant.			
	Liaise with other staff members, departments and General Practitioners in the management of the patients			
	Respond to General Practitioner calls, arranging assessment as necessary.			
	Clinical skills, judgement and knowledge are expected to improve during the attachment.			
	• 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 team and departmental meetings as required.			
	Day to day management of any ward patients and facilitation of communication			

Outpatients	• Perform outpatient clinics under direct or indirect supervision of Consultant. Outpatients not previously seen by the service or who are to be discharged, will be discussed with a Consultant.
	• Attend scheduled outpatient clinics promptly and liaise with clinic staff and management to maintain an effective appointment schedule.
	Communicate with referring person following patient attendance at clinics;
	Arrange and perform outpatient investigations
Administration	• Keep adequate and legible records in accordance with the hospital requirements and good medical practice, including dictation of discharge summary as appropriate. Entries to Clinical Record will be made daily on weekdays and whenever management changes are made.
	• Dictation of letters and electronic discharge summaries will be dictated within 24 hours of attending clinic or theatre.
	• Communicate with patients and their families about patients' illness and treatment in an appropriate and timely manner.
	• A letter to the patient's General Practitioner will be dictated after each Outpatient Visit if appropriate.
	Results of investigations will be sighted and accepted.
	• Obtain informed consent for procedures within the framework of the Medical Council guidelines which state:
	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.
	• The Registrar is responsible for referral of patient deaths to the Coroners Office in compliance with Company Policy and medico- legal requirements.
	• The Registrar is responsible for the completion of death certificates for patients who have been under their care.
Admitting	• When on call at ADHB assess and admit Ophthalmology patients referred by ED or from the community.
	• Assess patients who are referred to the ADHB service for admission including taking a history, performing a physical examination and formulating a management plan and discuss with Consultant as appropriate.
On-Call at ADHB	• Provide advice to and liaise with GP's and other hospital medical staff on Ophthalmology matters;
	• Authorise patients to be transferred to and be seen by the Ophthalmology service when appropriate
Inpatients at ADHB	• In the event there is an patient requiring an overnight admission undertake regular examination management of, and updating of management plan on a frequency agreed with the supervising consultant;
	Respond to requests by Nursing Staff and other members of Medical Staff to assess and treat inpatients
	• Ensure relevant documents, e.g. discharge summary, medication card and follow-up appointments are given to patient on discharge as necessary.
	Complete documentation on Friday prior to known or likely weekend discharges.

Section 2: Training and Education

Nature	Details	
Protected Time	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	
	Other Education sessions TBA	
	NB: Timing of educational sessions is subject to change	
Perform teaching of medical students as directed by Consultant.		

Registrars are encouraged to undertake a research project during the attachment. Initial submission of the project for approval will be to the Clinical Director, Ophthalmology.

Section 3: Cover:

 Other Resident and Specialist Cover

 The ordinary hours of work will be 0800 to 1600 hours Monday to Friday.

 The Registrar will participate in the Ophthalmology Regional Registrar after hours roster.

 (a) The number of registrars working on the regional roster will be 7. Regional on call responsibilities will be 1:7 - always with consultant back-up.

 (b) When participating in the regional on call roster ADHB Consultants will be available on call from 1600 - 0800 to attend the work place if necessary available by telephone, cellphone or telepage and can attend the hospital within 30 minutes.

 If the Resident Medical Officer who was to perform any of the above duties is unavailable to perform those duties than the amplever will errored appropriate cover if restared outside ordinary hours of work. Polief need

If the Resident Medical Officer who was to perform any of the above duties is unavailable to perform those duties then the employer will arrange appropriate cover, if rostered outside ordinary hours of work. Relief need not be provided for other duties.

Section 4: Performance appraisal

Registrar	Service
The Registrar will:	The service will provide:
• 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	• 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.
• After any assessment that identifies deficiencies, implement a corrective plan of action in consultation with their Consultant;	• An assessment report on the Registrar at three (3) months, 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 5: Hours and Salary Category

Average Working Hours		Service Commitments
Basic hours (Mon-Fri)	40	 The Service, together with RMO Support will be responsible for the preparation of any Rosters.
Rostered additional hours (inc. nights, weekends & long days)	8	
All other unrostered hours	4	
Total hours per week	52	

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