



RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Anaesthesia, Level 4 OR
PLACE OF WORK:	Auckland City Hospital
RESPONSIBLE TO:	Director of Anaesthesia & OR's through the Clinical Director or a nominated Consultant.
FUNCTIONAL RELATIONSHIPS:	Healthcare consumer, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of ADHB, including pre- and post-operatively.
RUN RECOGNITION:	This run is recognised by the Australian and New Zealand College of Anaesthetists as a training position for specialist qualification
RUN PERIOD:	4, 8, or 12 months

Section 1: Registrar's Responsibilities

Area	Responsibilities
General	<ul style="list-style-type: none"> • Pre-operative assessment of elective surgical patients • Provision of appropriate anaesthesia for elective and acute patients under the direct or indirect supervision of the Anaesthesia Co-ordinator or Consultant anaesthetist on-call. This includes Endoscopy Unit, Radiology, Coronary Care Unit, Emergency Department, Obstetric HDU, Labour and Delivery Unit. High dependency areas, and Intensive Care services (CVICU and DCCM). • The Registrar will be expected to work in operating rooms in Auckland City Hospital and the Greenlane Clinical Centre short stay surgical unit. • Responsible for post-operative visits as deemed necessary • Work closely with medical specialists and surgeons 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. All ASA 3 patients should be discussed with a consultant • Attend hand-over, team and departmental meetings as required

ADHB Anaesthesia GLH/level 4 ACH run description- Effective 13 December 2010

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Area	Responsibilities
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 outpatients investigations
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. A correctly filled in anaesthetic chart should be filled out for every anaesthetic • Be responsible for certifying death and complete appropriate documentation • At the direction of the Clinical Director, assist with operational research & audit in order to enhance the performance of the Service • Obtain informed consent for procedures within the framework of the Medical Council guidelines which state: <ol 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.

Section 2: Training and Education

Nature	Details
<i>Protected Time</i>	<p><i>The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster)</i></p> <ul style="list-style-type: none"> • Orientation at the beginning of the run • Part 1 candidates: one ½ day per week protected teaching (Part 1 course) • Part 2 candidates: one ½ day per week protected teaching (Part 2 course) • Senior registrars: one ½ day per week non-clinical time • Weekly didactic lectures as scheduled

The Registrar is expected to contribute to the education of nursing, technical staff and medical staff when requested

Section 3: Roster

Roster
<p>Registrars' normal hours of work are 0800-1800. A long day occurs once or twice a week, from 0800-2200. A weekend duty is comprised of two long days, 0800-2200. Rarely a registrar will be required to stay after 2200 due to emergency case over-runs. Night shifts are worked in a set of either three or four nights, 2200-0800. The nights and weekends are shared equally amongst the registrars participating in the roster.</p>

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Section 4: Cover

Other Resident and Specialist Cover

There is one Registrar on a long day each day and one Registrar on night duty. There is an anaesthetic coordinator SMO available on site during working hours Monday to Friday. After hours and on weekends and public holidays a 1st and 2nd SMO will both be on call off site.

The Registrar can be required to assist outside of their home theatre block when on night duty. The areas that they may be asked to facilitate in include but are not limited to; the Endoscopy Unit, Radiology, the Coronary Care Unit, Obstetric HDU, Labour and Delivery Unit, Emergency Department, High dependency areas, and Intensive Care services (CVICU and DCCM).

Section 5: Performance appraisal

<i>Registrar</i>	<i>Service</i>
<p><i>the Registrar will:</i></p> <ul style="list-style-type: none"> at the outset of the run meet with their Supervisor of Training 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 Supervisor of Training and if necessary the Clinical Director or their nominee. 	<p><i>The service will provide,</i></p> <ul style="list-style-type: none"> an initial meeting between the Supervisor of Training 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 midway into the run, may be required, after discussion between the Registrar and the Supervisor of Training responsible for them the opportunity to discuss any deficiencies identified during the attachment. The Supervisor of Training 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 a Mentor will be assigned to allow another means of communication and advocacy

Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40.0	<ul style="list-style-type: none"> The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters. The Service will be previously responsible for the preparation of rosters with assistance from the RMO support unit.
Rostered additional hours (inc. nights, weekends & long days)	28.26	
All other unrostered hours	2.88	
Total hours per week	71.14	

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

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