



RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Clinical Haematology
PLACE OF WORK:	Auckland City Hospital/Greenlane Clinical Centre
RESPONSIBLE TO:	Clinical Director and Business Manager of Clinical Haematology through a nominated Consultant
FUNCTIONAL RELATIONSHIPS:	Healthcare consumers, Hospital and community based healthcare workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of Clinical Haematology
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

Area	Responsibilities
General	<ul style="list-style-type: none"> • Work closely with the team's house officer, provide supervision and share responsibilities where appropriate. • 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 and nursing staff in provision of assessment and investigations of new patients and follow-ups in outpatient clinics • Undertake diagnostic and treatment procedures appropriate to Clinical Haematology. • 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;

Haematology Registrar Run Description – Effective 14 June 2010

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<i>Area</i>	<i>Responsibilities</i>
	<ul style="list-style-type: none"> • Hand-over patient management at end of day to on-call medical staff. • Attend team and departmental meetings as required.
Admitting	<ul style="list-style-type: none"> • Assess and admit Clinical Haematology patients referred by ED or from the community and other medical and medical subspecialty patients when required by the attached roster
On-Call	<ul style="list-style-type: none"> • When on call be available on long –range locator to attend the hospital within 30 minutes. • On weekend days review all haematology inpatients daily (by ward round) • See and manage patients presenting to the ward acutely for assessment. • Discuss with the on-call house officer all acute admissions/assessments performed by the house officer. • Provide advice to and liaise with GP's and other hospital medical staff on Clinical Haematology matters; • Authorise patients to be transferred to and be seen by the Clinical Haematology 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 haematology patients for whom the team is responsible on at least a daily basis when rostered to be at work; • 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 patients' management are documented in the notes; • When not on duty 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. • Perform timely inpatient haematology consultations to other teams including APU.
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. Urgently review acute patients in Haematology Day Stay, Accident and Emergency/admission Planning Unit. Complete admission and discuss with appropriate staff. • Communicate with referring person following patient attendance at clinics; • Arrange and perform outpatient investigations • Chart appropriate chemotherapy treatments which need to be countersigned by another Haematology registrar/consultant or experienced Day Stay 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;

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Area	Responsibilities
	<ul style="list-style-type: none"> • At the direction of the Clinical Director, assist with operational research in order to enhance the performance of the Service; • Dictate or write discharge summaries in cooperation with the house officer (if appropriate) 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: <ol style="list-style-type: none"> 1. <i>“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.”</i> 2. <i>“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.</i>

Section 2: Weekly Schedule – Ward Registrar

Consultant ward round times vary depending on consultant rotation

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	Daily consultant Procedures as	or registrar ward required	round Blood Club 11:30-12:30	Med Science lecture and Grand rounds 11:00- 1:00	Xray meeting 11:30 – 12:30
p.m.	Lymphoma meeting 1:00 – 2:00	Ward meeting 12:00 – 1:00	Clot Club 12:30 – 1:00		Infectious Diseases meeting 12:30-1:00

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Weekly Schedule – Bone Marrow Transplant Registrar

Consultant ward round times vary depending on consultant rotation

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	Daily consultant Procedures as Outpatient. Haematology	or registrar required transplant inpatient	BMT WR patients review consultation Blood Club 11:30-12:30	Med Science lecture and Grand rounds 11:00- 1:00	Xray meeting 11:30 – 12:30
p.m.	Haematology Hospital BMT Unit cover Lymphoma meeting 1:00 – 2:00	Day Stay inpatient Ward meeting 12:00 – 1:00	Acute/booked consultations Clot Club 12:30 – 1:00	patients	Infectious Diseases meeting 12:30-1:00

Weekly Schedule –Day Stay Registrar

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	Haematology Management of Bone marrow	Day Stay acute haemophilic and biopsies/other Haemophilia meeting 9:00-11:00	and booked thrombosis procedures as Blood Club 11:30-12:30	patient review/ patients appropriate Med Science lecture and Grand rounds 11:00- 1:00	management Xray meeting 11:30 – 12:30
p.m.	Lymphoma meeting 1:00 – 2:00	Ward meeting 12:00 – 1:00	Clot Club 12:30 – 1:00		Infectious Diseases meeting 12:30-1:00

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Section 3: Training and Education

Nature	Details
Protected Time	<p>The following educational activities will be regarded as part of normal duties (unless attendance is required for other duties as per roster)</p> <ul style="list-style-type: none"> • Orientation at the beginning of the run • Blood Club (currently Wednesday 11:30-12:30) • Ward meeting (currently Tuesday 12:00-1:00) • Xray meeting (currently Friday 11:30-12:30) • Lymphoma meeting (currently Monday 1:00-2:00) • General medical (RACP) training as appropriate <p>Timing of educational sessions is subject to change</p>
<p>The Registrar is expected to contribute to the education of nursing, technical staff and medical staff when requested</p>	

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>Four Clinical and two Haematology Pathology registrars participate in the Clinical Haematology registrar roster (1:6 frequency).</p> <p>The Clinical Haematology registrars 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 5pm and 10:30 pm on average eight times in six months and to work 26 nights in 4 sets of 5 weeknights and 5 sets of 2 weekend nights over the 104 weeks of the roster between 10pm and 8:30am. This means that the registrars will be required to work an average of 6.5 nights during the 6 months of the run.</p> <p>When on night duty the registrar</p> <ul style="list-style-type: none"> • Coordinates the activities of the medical house officers; • Covers Clinical Haematology, Dermatology, Diabetes, Gastroenterology/Hepatology, Immunology, Infectious Diseases, Oncology, Neurology, Older People's Health, Renal, Respiratory, and Rheumatology inpatients (Note: some of these services have few, if any inpatients); and • Supports the General Medical Registrar in the Admission and Planning Unit and if time permits, the General Medical wards <p>When on duty between 5pm and 11pm on the Subspecialty roster, registrars are responsible to their own service but will support the General Medical registrar in the Admission and Planning Unit whenever clinically possible and cover Older Peoples Health from 7pm.</p>

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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 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; 	<p><i>The service will provide,</i></p> <ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> The Service, together with the RMO Support Unit will be responsible for the preparation of any Rosters.
Rostered additional hours (inc. nights, weekday long days)	7.85	
Call Back	0.0	
All other unrostered hours	5.0	
Total hours per week	52.85	

Salary The salary for this attachment will be as detailed as a Category D run. The run will continue to be paid at a C Category, which includes all call back as per clause 14.3 of the RMO MECA, until confirmed by a run review.

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