

RUN DESCRIPTION

POSITION:	Registrar
DEPARTMENT:	Obstetrics & Gynaecology
RESPONSIBLE TO:	General Manager, Kidz First & Women's Health through O&G SMO under supervision of at the time and the Clinical Director Women's Health.
FUNCTIONAL RELATIONSHIPS:	Health care consumers Hospital and community based health care workers
PRIMARY OBJECTIVE:	To facilitate the management of patients under the care of the O&G Consultants.
RUN RECOGNITION:	This attachment is recognised as a training position for specialist qualification MRANZCOG for those with registrar appointments and enrolled in the RANZCOG ITP.
RUN PERIOD:	6 Months

Section 1: Registrar's Responsibilities

<i>Area</i>	<i>Responsibilities</i>
General	<p>Clinical Duties:</p> <ul style="list-style-type: none"> The Registrar in conjunction with their senior medical staff will supervise the work of a House Officer, with whom they will organise the investigation and management of inpatients under the care of the Senior Medical Officers. The Registrar will be available to attend Consultant & Registrar ward rounds (unless detained by a clinical emergency) and will have a current knowledge of the progress of patients under their care. The Registrar will attend the sessions detailed in the timetable distributed on a weekly basis by the women's health rosterer unless redirected to other sessions by the Service Manager, Tutor Specialist or Clinical Director, or their representative. The Registrar will attend timetabled outpatient clinics promptly and will endeavour to see outpatients at their scheduled appointment times. Outpatients not previously seen, or who are to be discharged, or to be placed on a theatre list will be discussed with the clinic Consultant and any other cases the Registrar requires senior input with. When rostered to acute work, GP calls are usually managed by the SMO on acute duty. If they are unavailable, or at night, the Registrar may answer calls by GP's about patients and should arrange to assess them if necessary. When rostered to acute work, the Registrar will attend Delivery Suite handover ward rounds at 0800 and 2200 hours, or at any other time the Registrar rostered to acute work changes. Patients in Delivery Suite under hospital care will be reviewed at least 4 hourly, or more often as indicated, (this can be by formal clinical review or by discussion with the Charge Midwife if midwifery patient). Patients deemed to be low risk by the charge midwife do not need to be seen. The Registrar rostered to acute

CMDHB O&G Registrar Run Description- Effective 12 December 2011

Disclaimer: Please note that this run description is current at the time of publication, but is currently under review and may be subject to change. It is your responsibility to ensure that you have the most up to date version if you will be relying on the information enclosed. Please contact RMO Support for further information.

Area	Responsibilities
	<p>work must always consult with a senior registrar or SMO if any concerns and remain in contact with their supervisors throughout the duty.</p> <ul style="list-style-type: none"> The Registrar is required to participate in audit activities as discussed with the Audit Co-ordinator. However, Registrar sitting Membership College exams are not expected to take part in the audit programme. Topics of audit must be identified within two weeks of commencing the rotation and be completed within six months.
Administration	<ul style="list-style-type: none"> Notes written in patient charts will be legible and clearly signed with an identifiable signature. Preferable to use personal stamp with signature. Ensure the discharge summary is completed for gynaecology patients to their General Practitioner after their discharge from hospital. When patients of LMCs are discharged appropriate communication with that LMC will be made and a discharge summary completed for complicated patients. Histology results need to be sighted and clearly, identifiably electronically signed and accepted by a Registrar, SHO or Consultant only. If the Registrar has any uncertainties about the result they should discuss with the relevant senior registrar or SMO. Letters will be written to the patient's GP after each Gynaecology and first antenatal outpatient visit. The results of all investigations will be cleared electronically in a timely manner. All requested investigations will be reviewed in a timely manner. The Registrar is responsible for the completion of death certificates for patients who have been under their care, although this duty may be delegated to a House Officer. The Registrar is responsible for completing the Final Diagnosis Sheet on discharged patients within two weeks.

Section 2: Training and Education

<i>Details</i>
<p>Through example and supervision, the Registrar will actively contribute to the education of House Officers.</p> <p>The Registrar will be required to teach other health care workers and medical students.</p> <p>There are two clinical meetings held monthly, in addition to teaching on Consultant ward rounds and in Theatre and Delivery Suite. There is also weekly registrar teaching organised by the tutor specialist. The Registrar is expected to attend these meetings when available and not rostered to clinical duties.</p> <p>In-house teaching occurs Wednesday am week 4 and 8 of the run. Registrars not rostered on duty are encouraged to attend these sessions.</p> <p>A research project may be undertaken during the attachment subject to clinical supervision by SMO's and financial approval of the General Manager, Kidz First & Women's Health</p>

Section 3: Roster

Roster

There are 17 registrars employed on the roster.

The ordinary hours of work will be 8-hours per day between 08.00 and 16.00 Monday to Friday. Two Registrars are timetabled on acute call daily, one covering gynaecology and the other obstetrics (One senior registrar and one junior registrar). Night duties are shared equally at a frequency of 1:6 over the run configured in a 3:4 split of nights. Two Registrars do weekend long days, one doing obstetrics and the other gynaecology.

A Consultant will always be available for consultation on clinical problems. There are 2 SMOs on site on acute duties weekdays 08.00-17.00. After hours, there is an SMO on site between 1700 & 2200 hrs weekdays. All nights 22.00-08.00 (7 nights) there is an SMO on site. On Saturdays the SMO is on site from 0800 – 1300 hrs and on-call until 22.00. On Sundays the SMO is on site until the ward rounds are completed and then on-call until 22.00.

Average weekly hours of work:

Week days:

Normal hours 0800 – 1600

Long Day 0800 – 2230

Weekends:

Long day 0800 – 2230

Nights:

Nights 2200 – 08.30

Nights are divided with a 3:4 split.

Annual Leave:

In general, no more than 3 weeks annual leave should be taken in any 6 month run. Two Registrars can take leave at one time providing the leave relievers are available to work within their contract. This will require approval from the RMO Support roster co-ordinator. Additional leave may be approved in exceptional circumstances as approved by the General Manager, Kidz First & Women's Health. It is advisable to make leave requests as early in the run as possible to assist with rostering and approval of leave.

Section 4: Cover

Other Resident and Specialist Cover

The Department employs a Reliever to cover absence from work on planned leave. Annual leave cover is arranged on a "first come first served" basis and applications for annual leave should be submitted as early as possible to provide the reliever reasonable notice of his/her roster. Cover for annual leave will be negotiated prior to leave being approved. Sick absence is covered within the Department or through the reliever if available.

Section 5: Performance appraisal

Performance

Performance will be assessed by the relevant Consultant in the Department, using the RANZCOG criteria and RANZCOG documentation for those RANZCOG trainees, and through the ARRMOs **format for non-RANZCOG trainees**. Performance will be discussed and documented at formal review meetings held at 3 months and 6 months. If deficiencies are identified during the attachment, the Consultant will bring these to the Registrar's attention, and together they will set objectives to be achieved.

Section 6: Hours and Salary Category

<i>Average Working Hours</i>		<i>Service Commitments</i>
Basic hours (Mon-Fri)	40	
Rostered additional hours (inc. nights, weekends & long days)	17.16	
All other unrostered hours	2	
Total hours per week	59.16	

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