**Essex, Beds and Herts Foundation School**



**Luton & Dunstable University Hospital – individual placement description and training opportunities**

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| **Placement** | F1,Upper GI / HpB (4-month placement) |
| **Departmental training opportunities** | The upper GI/ HpB department comprises of 6 Consultant Surgeons who perform complex Upper GI surgery with emphasis on minimally invasive surgery. This is a National Centre of Excellence for Bariatric surgery. Within the department there are Specialists in Bariatric surgery, Upper GI & HpB cancers, Paediatric surgery and Laparoscopic surgery. Diagnostic and therapeutic endoscopies including ERCP’s are performed. There is an emergency commitment for Upper GI surgery during the week.  There are daily Upper GI theatres, clinics and a weekly cancer MDT.  **Acute & Ward work:**  ·     Organise daily ward rounds of your patients and be up to date on their most recent investigations and clinical developments  ·     Arrange investigations and procedures as directed by your seniors  ·     Be first port of call for acutely sick inpatients and be able to competently assess and manage them  ·     Write electronic discharge letters  ·     Simple invasive ward procedures: phlebotomy, IV cannulation, urinary catheterisation, NG tube placement  ·     More complex ward procedures under supervision: lumbar puncture, pleural and ascitic taps  ·     Competently perform basic data interpretation and apply them to the clinical context, adjusting management as appropriate, e.g. blood results, plain X-rays  ·     Take part in effective handover to out of hours on call team at the end of your shift  ·     Safe and effective electronic prescribing  ·     Teaching medical students |
| **Generic training opportunities** | F1s are expected to attend 70% of the weekly F1 teaching programme and required to undertake an ALS course. F1s will have the opportunity to attend an in-house simulation session, encouraged to attend the weekly Grand Round lectures, departmental teaching, Swartz Rounds and Clinical Governance sessions.  At your induction meeting with your named clinical supervisor you will have the opportunity to review and discuss the outcomes that can be achieved in each placement. |
| **Location** | The surgical block at Luton & Dunstable Hospital was opened in 1983. There are three surgical wards and a Surgical admissions unit with a total of 100 beds. The main theatre suite contains six theatres which are well equipped for laparoscopic surgery. There are eight other theatres in the hospital covering Ophthalmology, Orthopaedics, Obstetrics & Gynaecology and Emergency Surgery. The endoscopy unit comprises of 3 suites on the ground floor. |
| **Supervisor(s)** | All Foundation Trainees are allocated an Educational Supervisor for the training year and a named clinical supervisor for each 4-month placement. |
| **Main duties of the placement and type of work to expect** | Typical day ward work:    **08.00** Update patient list and look up investigation results, prepare notes for ward round. Take hand-over from night FY1 if any problems with your patients overnight.    **08.30** Start ward round with SpR (and take hand-over from on-call team if your team is post-take)    **Remaining day**: Do jobs generated by Ward Round and react to problems with your patients during the day.  May also need to:       Undertake another (consultant) ward round       Go to theatre to assist       Attend teaching       Help other busy firms    **End of day**: Look up investigation results for your patients, update the list and book bloods for patients the following day. Hand-over of any jobs to night FY1 and sick patients to be aware of    **Typical on-call day**:       Take referrals from the GP liaison nurse (out of hours, direct to GP) – may need to gather further information and give advice on initial management over the phone       No CST/F2 on call until 1700 hours so also hold their bleep and respond to trauma calls before 1700       Clerk in surgical patients in SAU, EAU when they arrive or A&E as directed by your seniors, arrange investigations, start treatment and arrange for senior review of all patients you have seen       Update all patients you have seen on the on call list and hand over to next shift / post-take team    **Typical out-of-hours ward work**:       Take handover of sick patients and outstanding jobs at the beginning of the shift       Circulate the wards under your care and do routine jobs, keep patients stable until their usual team takes over the care       Handover any significant events to the day team at the end of your shift       Prioritise and escalate issues as needed, to your seniors / ITU SpR / Medical on call team    **Rotas***:*  A full- shift rota is in operation. |