

Innovative Posts - Details

The Innovative Posts currently offered by the scheme consist of:

- **ITP in RHEUMATOLOGY/DERMATOLOGY**
- **ITP in PALLIATIVE CARE**
- **ITP in WOMEN'S HEALTH**

These posts include three sessions in General Practice, and from the administrative viewpoint are considered to be based in primary care.

In addition the scheme offers two further "mixed" posts offering a range of experience in:

- **SHO in OPHTHALMOLOGY / ENT**
- **SHO in UROLOGY / ORTHOPAEDICS**

Exciting opportunities to achieve new skills and training. The trainee is mainly exposed to out patient and some day surgery patient care, which enhance the training and prepare the GP trainee for the twenty first century General Practice.

Rheumatology/ Dermatology & Minor Surgery

RHEUMATOLOGY COMPONENT

Rheumatological symptoms are the commonest reason to seek advice in the Primary Care. General Practitioners are the first port of call for arthralgias, myalgias, rashes and regional pain syndromes. Early diagnosis and intervention in Rheumatological Diseases is critical (delay in treatment of inflammatory arthritides can result in irreversible erosive changes). Equally prompt recognition/referral to Specialist is obligatory in conditions such as suspected vasculitis or temporal arteritis. Exposure to Rheumatology in a Specialist setting with a Primary Care perspective, therefore, could be of immense value. The GP VTS Rheumatology post at The Princess Alexandra Hospital, Harlow, will provide a unique opportunity for the trainee GP's to learn practical diagnostic and treatment skills in the speciality.

Curriculum:

Supervised Training in:

GENERAL:

- History and clinical examination of a patient with musculoskeletal disorder
- Selection and interpretation of appropriate laboratory tests (including ESR, CRP, CK, RF, ANA, dsDNA, ENA and Serum Electrophoresis).
- Knowledge of the place of imaging (X-rays, MRI and DEXA scan).
- Core theoretical knowledge of the rheumatic disease
- Journal Review (twice during the post)

- Rheumatological Emergencies

SPECIAL SKILLS

- Aspiration and/or injection of Shoulder, Knee and Wrist (inc carpal tunnel) joints.
- Soft Tissue Injections: tennis/golfer's elbow; trigger finger; trochanteric bursitis; plantar fasciitis
- Counselling and communication skills with respect to chronic disease and its overall impact on life
- DMARD'S (Disease Modifying Anti Rheumatic Drugs) Treatment and monitoring issues

Consultant: Dr. Khaled Ahmed MBBS; PhD; MRCP

DERMATOLOGY COMPONENT

SHO will be able to gain experience in general dermatology and Dermatology Minor Surgery in these Clinics.

AIMS AND OBJECTIVES OF DERMATOLOGY TRAINING

1. To learn the essentials of dermatological diagnosis and to recognise the dermatoses which require urgent referral and hospital dermatology intervention.
2. To become proficient in the use of cryotherapy and curettage and cautery.
3. To become proficient in techniques of punch biopsy, incisional ellipse biopsy and excision biopsy.
4. To be familiar with all types of topical treatment.
5. To become skilled in the management of common dermatoses such as
 - Acne vulgaris
 - Atopic dermatitis
 - Contact dermatitis
 - Psoriasis

and to recognise cases which require hospital specialist management.
6. To become proficient in diagnosing skin cancers and distinguishing them from common benign tumours.
7. To appreciate the role of specialist nurses in the management of skin diseases.
8. To become familiar with
 - Infections and
 - Infestations of the skin and their treatment.

9. To acquire skills in the collection of specimens from the skin for

- Mycology
- Virology
- Bacteriology and Cytology

Consultants: Dr H Dodd & Dr Wolpert

PALLIATIVE CARE POST

Place of work: Based at St Clare Hospice, Hastingwood, Harlow

Job Summary:

- To gain experience in all aspects of palliative care.
- To work with other members of the multi professional team within the hospice to provide the highest possible standard of holistic care for patients and their families and friends.
- To give advice to other hospice staff and external health care professionals about the management of patients in their care

By the end of the post the trainee should be competent in:

- Recognising and managing physical aspects of patient care
- The holistic management of common symptoms
- Pharmacological palliation
- Psychosocial aspects of care of patient and carers
- Multi-professional team work
- Recognising the bereavement process
- Communication skills
- Recognising ethical dilemmas

PROVISIONAL TIMETABLE

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Ward Round Teaching	Day Hospice	Ward work Tutorials	General Practice (Jenner House)	Community Palliative care
PM	Day Hospice	GP VTS	Community Palliative care	General Practice (Jenner House)	General Practice

Medical Director/ Consultant: Dr John Zeppetella

Associate Specialist: Dr Qumar Abbas

Ophthalmology / Ear Nose & Throat Experience

Workload & services provided:

90% of workload for the General Practice VTS Senior House officers will be OPD based. The service is Consultant led.

The GPVTS SHO will be a supernumerary in the department

The GPVTS SHO will be involved in the on call roster with the other SHOs

Each GPVTS SHO post is done over a period OF Six months

Each SHO will be shared in ENT / Ophthalmology department during the six months attachment.

TRAINING OBJECTIVES FOR GP SHO'S

Ophthalmology

Ophthalmology training at this level is intended to enable the SHO

- To gain a good working knowledge of the anatomy, physiology and pathology of the eye, adnexae and visual pathways.
- To be able to take a directed ophthalmological history.
- To be able to undertake an ophthalmological examination assessing both structure and function, including:
 - Measuring visual acuity
 - Pinhole testing
 - External examination of the eye (including the use of stains and the use of the slit lamp)
 - Pupil examination and assessing the red reflex
 - Measurement of intra-ocular pressure
 - Assessment of ocular movements (and cover testing)
 - Direct Ophthalmoscopy and Indirect Ophthalmoscopy
 - Visual field testing by confrontation and colour vision testing.
- To be able to recognise and manage common and important eye problems (see below).
- To know the indications for referral to an ophthalmologist and the elements of a good referral letter.
- To understand the principles of team-working with the optometrist and ophthalmologist, including areas such as the measurement of intra-ocular pressures and more formal methods of visual field assessment.

- To be aware of the roles of other health professionals and the overlap with other relevant specialities.
- To be able to employ appropriate consultation skills to elicit the history (including understanding the patient's perspective) and inform, explain or clarify the diagnosis and treatment options for patients presenting with common eye conditions.

Out Patient Department

The SHO 's should see patients and discuss them with the Consultant whenever necessary. History and examination should be appropriate and clearly recorded on paper and tape. Letter writing skills will be reviewed three monthly.

WARD MANAGEMENT

SHO will attend ophthalmic inpatients ward rounds. This will allow the SHO to make decisions and think through options, while safeguarding patient care. The SHO should be seeking results of relevant investigations and recordings made by nurses.

TEACHING/AUDIT

- BST programme
- Monday Journal club meeting 12.30 - 13.30
- Monthly Audit
- Opportunity to participate in various ongoing research projects.

Consultants

Mr I Fawcett, Mr M Vempali Miss D Flaye

ENT JOB DESCRIPTION

ENT training at this level is intended to enable the SHO to make a clinical assessment of new problems; to initiate and interpret basic investigations, and to have an appreciation of the need for follow up in common situations.

Curriculum:

- Knowledge of basic anatomy, physiology and pathology of the Ear, Nose & Throat
- Be able to use a head mirror, nasal and aural speculae, and tuning fork, indirect mirror examination of the larynx and postnasal space, audiometer.
- Be competent to examine and recognise normal and abnormal ears, noses, throats and necks.
- Be able to recognise and manage the following common conditions:
 - Neck & Throat: Neck lumps, Tonsillitis Epiglottitis & croup, Hoarseness & Allergies of the throat
 - Otology: Otitis media, Otitis externa, Discharging ears, Ear wax, Glue ear Deafness Foreign bodies ears, Vertigo

- Rhinology: Nasal polyposis, Epitaxis, Sinusitis, Allergies of the nose, Foreign bodies in noses
- Be able to perform:-
 - Nasal packing, anterior and posterior
 - Nasal cautery
 - Aural toilet and dressing
- Be able to relate and communicate with:-
 - Patients Colleagues and co-workers
 - The deaf & post laryngectomy patients
 - Patients with treatment for malignancy to the head & neck

Out Patient Department

The SHO 's should see patients and discuss them with the Consultant whenever necessary. History and examination should be appropriate and clearly recorded on paper and tape. Letter writing skills will be reviewed three monthly

WARD MANAGEMENT:

Though majority of the work will be carried out in the OPD, the daily morning ward-round by the SHO, Staff grade, and Specialist Registrar with Consultant supervision at least once a week. This will allow the SHO to make decisions and think through options, while safeguarding patient care. The SHO should be seeking results of relevant investigations and recordings made by nurses.

Consultants: Mr A. Amen, Mr N Flower