**Eastern and Greater Southern Surgical Skills Training Network**

**Surgical Prevocational Training Term Description**

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| 1. **ACCREDITED TRAINING PROVIDER** | **Eastern and Greater Southern Surgical Skills Training Network** |
| **Training Term Based at:** | ***St Vincent’s Public Hospital, Darlinghurst*** |

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| 1. **TERM NAME** | **SVH ENT** |
| **Overview of Unit or Service** | Head and Neck MDT Built Service for both regional and metro NSW  Head and Neck MDT co-ordination and care  Neurotology  Rhinology  Outpatient ENT clinics |
| **Term Duration *(Weeks)*** | 13 |

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| 1. **TERM CATEGORY** | Surgical SRMO |

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| 1. **TERM SUPERVISION** | |
| **Name, Position and Contact Details of Term Supervisor**  ***Responsible for trainee term orientation and assessment*** | Dr Richard Gallagher  [Richard.Gallagher@svha.org.au](mailto:Richard.Gallagher@svha.org.au)  (Can contact via SWITCH) |
| **Term Supervisor Contact with Trainee**  ***Term supervisor to provide a plan for contact with the prevocational trainee/s during the training term*** | General Contact: ENT registrar  Orientation: ENT registrar  Mid Term – Term Supervisor  End of Term – Term Supervisor  *Term supervisors have busy timetables between SVH and SVPH based on a 4 week rotating roster so please let them know early if you need to set aside time to go through term assessments.* |
| **Primary Clinical Supervisor (if not Term Supervisor)**  ***Consultant or senior medical practitioner with experience in managing patients in the relevant discipline*** | ENT SET Registrars (X2) and the fellow(s) |
| **Immediate Supervisor with Direct Responsibility for Day to Day Supervision** | ENT SET Registrars (X2) |

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| 1. **CLINICAL TEAM STRUCTURE**   ***Provide positions of all members of the clinical team who provide supervision and bedside teaching including AMOs and Registrars. Please also identify how the Surgical SRMO/Registrar will be distributed amongst the team/s*** | **AMO**   * N. BIGGS * R. BOVA * J. CRAWFORD * R. GALLAGHER * R. HARVEY * T. MATTHEWS * LEAVERS * S. FLANAGAN   **SET Trainees X 2**  **SRMO** |

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| 1. **Expectations of the Prevocational Surgical Trainee** | |
| **Please List Expectations** | * MDT approach to patient care * Procedural skills-IV cannulation, IDC insertion, rapid rhino insertion, suturing and suture removal etc. * Comprehensive understanding and knowledge of patients on ward and co-ordination of care * Preparation of head and neck round tasks such as bloods * Attending and participating in outpatient clinics * Assisting in OT when able |
| **Patient Load *(average per shift)*** | 10 |
| **After Hours Roster**  ***Does this term include participation in a hospital wide after hours roster and if so, please advise frequency and the onsite supervision available after hours*** | Hospital afterhours resident roster shift  2 weekday afterhours and 1 weekend afterhours shift per fortnight |

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| **G: TERM LEARNING OPPORTUNITIES** | |
| **Please list 5 learning opportunities/objectives** | 1. Advanced understanding of airways  2. Management of ENT emergencies such as epistaxis  3. MDT approach to patient care  4. Exposure to high volume head and neck, otology and rhinology cases in both clinic and theatre  5. Organisation |

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| **H: SIGN OFF** | |
| **Revision Date and by Who** | ***Dr David Evans***  ***Site Director of Training, SVH*** |
| **Endorsement by Term Supervisor** | ***Dr Richard Gallagher*** |
| **Endorsement by Network Director of Surgical Training** | ***Dr Mark Muhlmann*** |

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| **I: TERM/UNIT TIMETABLE AND INDICATIVE DUTY ROSTER**  ***Important notes about completing the timetable:***   * ***Please include the start and finish times of the shifts the trainee will be rostered to;*** * ***Please show the activities that the trainee are expected/rostered to attend – these include all education opportunities (both training facility wide and term specific), ward rounds, theatre sessions, inpatient time, outpatient clinics, shift handover, morning handover from hospital night team, afternoon handover to hospital’s after hours team. Please include times of activities where possible;*** * ***If there are extended shifts or evening shifts as part of the team, please attach an indicative roster.*** |
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