A Career in Acute Internal Medicine (AIM) in the West Midlands

Developing people for health and healthcare

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Contents

• Acute Internal Medicine Overview
• Career Pathway
• Advantages / Disadvantages
• Recruitment
• Further Information

(Please click on topic for direct link)
What is Acute Internal Medicine?

• Specialty that focuses on the care of adult medical patients from their admission to hospital up to 72 hours of their stay

• This can involve acute unwell patients in monitored areas or well patients in ambulatory care areas

• Usually takes place on Acute Medical Units (AMUs)
What is Acute Internal Medicine?

- The presence of Acute Physicians in hospitals with unscheduled care has been shown to reduce mortality and length of hospital stay without increasing readmission rates.
The future of Acute Internal Medicine

- With a drive towards consultant led acute services 7 days a week there will be an increasing number of AIM physicians delivering high quality care at the front door
- Working evenings and weekends will mean compensatory days off in the week.
- The number of conditions managed by Ambulatory care will increase as will the number of complex medical admissions, thus the skills of an Acute Physician will continue to be in high demand
Desirable Qualities

• Enjoyment of a wide range of medical problems
• Problem-solving, ability to think on your feet
• Desire to manage acutely unwell patients
• Ability to interface with other specialties
• Good team-working and communication skills with patients, carers and the MDT
• Leadership qualities and a desire to innovate are desirable
Career Path

- You can apply for AIM via several routes
  - Core Medical Training (CMT) – 2 years
  - Acute Care Common Stem (ACCS) – 3 years
  - Broad based training (BBT) - 3 years
- As with all medical specialties – MRCP is to be achieved for entry into ST3 and the Specialty certificate Examination is to be completed during your 5 years as a registrar
- During ST3-ST7 there is the opportunity to take an out of programme experience should you wish to pursue teaching, leadership, management or research interests.
General Internal Medicine (GIM) Component

- Dual training: Acute & General (internal) medicine
- After completing Foundation and Core/ACCS training years, on medical registrar rota for all 5 years to CCT. During training will gain experience in outpatient medicine
- Organised training days for both acute and general medicine
- Some AIM trainees choose to dual CCT with Intensive Care Medicine as opposed to GIM, but this requires additional training time
Advantages & Disadvantages

- Variety of medical presentations
- Variety of intensity of work: Working in Ambulatory care is very different to working on-call
- Trains you to feel comfortable with medical emergencies
- ‘Special skill’ allows you to develop a personal interest
- Mandatory placements in other medical specialties
- Fastest growing medical specialty
- Flexible working patterns

- Unable to develop long-term patient relationships
- Limited ability to manage chronic disease
- Weekend working (although no more than most other medical specialties and compensated time off in the week)
LTFT Trainees

• Normal working day involves regular hours that fit in with childcare or other outside commitments
• Rarity of clinics and other sources of admin mean that you are unlikely to bring work home with you
• Flexible working patterns are easy to build around your commitments, especially at consultant level
## Typical Day

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 – 8:15</td>
<td>Handover from the night team on AMU – discussion of sick patients and problems from night shift</td>
</tr>
<tr>
<td>8:15 – 10:45</td>
<td>Ward Round – I conduct the ward round with the team, supervised by AIM Consultant who at the end of the round offers feedback and SLE</td>
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<tr>
<td>10:45 – 11:30</td>
<td>Board Round – review of all patients on AMU, medical plans and discharge plans are reviewed by the MDT</td>
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<tr>
<td>11:30 – 12:30</td>
<td>Supervision of juniors performing procedures from the ward round or Echo teaching</td>
</tr>
<tr>
<td>12:30 – 13:30</td>
<td>AMU teaching / lunch</td>
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</tbody>
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| 13:30 – 16:00| 1. Ambulatory care – reviewing patients, supervising the team  
2. Or AMU review clinic – review of patients post discharge from AMU  
3. Or Special interest session |
## Recruitment – Round 1

<table>
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<th>2014</th>
<th>2015</th>
<th>2016</th>
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<tbody>
<tr>
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<td>106</td>
<td>95</td>
<td>115</td>
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<td>HEE</td>
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<tr>
<td>Percentage posts</td>
<td>67%</td>
<td>61%</td>
<td>54%</td>
</tr>
<tr>
<td>filled</td>
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Where to go for more information…

- **West Midlands AIM** – developed by trainees
- **Take AIM**
- **Society for Acute Medicine**
- **Talk to trainees**
- **JRCPTB specialty page and curriculum**
- **NHS health careers**
- **ST3 recruitment**
- **RCP (London), Specialty spotlight**
- **Health Education England, West Midlands**