**1. General Medicine/Infectious Diseases**

**Placement:** Royal Stoke University Hospital  
**Location:**  
**Type of Work to Expect and Learning Opportunities:**  
This post involves the clinical management of all areas of Infectious Diseases: sepsis, community and hospital-acquired infection, tuberculosis, HIV and tropical diseases including fever in the returning traveller. There is the opportunity to attend weekly journal club, X-ray meeting and MDT meetings in HIV, TB and to gain experience of an Outpatient Parenteral Antimicrobial Therapy service. You will be trained in antimicrobial stewardship at an individual and organisational level and in all aspects of infection control. There is good exposure to acute medicine when on call giving you experience in most acute medical emergencies.

**Main Duties of the Placement:**  
Day-to-day care of patients in the 14-bedded unit which has 4 negative-pressure areas for the care of patients with suspected tuberculosis, influenza and other aerosol transmissible diseases. Clerking of new admissions from the community and from other areas within secondary care. Presenting during the weekly joint GU/ID ward round and during the weekly teaching round. Opportunity to gain experience in tumbler puncture and long line insertion. Teaching of 3rd and 5th year medical students. Active participation in audit.

**Day-to-day Working Pattern:**  
Monday to Friday with on call 10:00-18:00hrs Weekdays (no weekends) 08:00-16:00hrs or 0900-2100 & 0900-2130 based on AMU. 

**Empowering:**  
University Hospital of North Midlands NHS Trust 

**Placement Department:** General Medicine/Infectious Diseases  
**Clinical Educational Supervisor:** Dr N Bidwell  
**Type of Work:**  
**Employer Information:**

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<tr>
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<td>15/WMD/RJE/D0/01/001</td>
<td>Royal Stoke University Hospital</td>
<td>General Medicine/Infectious Diseases</td>
<td>Dr N Bidwell</td>
<td>Royal Stoke</td>
<td>This post involves the clinical management of all areas of Infectious Diseases: sepsis, community and hospital-acquired infection, tuberculosis, HIV and tropical diseases including fever in the returning traveller. There is the opportunity to attend weekly journal club, X-ray meeting and MDT meetings in HIV, TB and to gain experience of an Outpatient Parenteral Antimicrobial Therapy service. You will be trained in antimicrobial stewardship at an individual and organisational level and in all aspects of infection control. There is good exposure to acute medicine when on call giving you experience in most acute medical emergencies.</td>
<td>Day-to-day care of patients in the 14-bedded unit which has 4 negative-pressure areas for the care of patients with suspected tuberculosis, influenza and other aerosol transmissible diseases. Clerking of new admissions from the community and from other areas within secondary care. Presenting during the weekly joint GU/ID ward round and during the weekly teaching round. Opportunity to gain experience in tumbler puncture and long line insertion. Teaching of 3rd and 5th year medical students. Active participation in audit.</td>
<td>Monday to Friday with on call 10:00-18:00hrs Weekdays (no weekends) 08:00-16:00hrs or 0900-2100 &amp; 0900-2130 based on AMU</td>
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</table>

**2. General Surgery/Upper GI**

**Placement:** Royal Stoke University Hospital  
**Location:**  
**Type of Work to Expect and Learning Opportunities:**  
An editing post helping to look after regional referrals with complex oesophagogastric and Hepatobiliary and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate specialist. The post will also include rotation around onto emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care.

**Main Duties of the Placement:**  
The main duty of the FY doctor is assessing and treating a wide range of emergencies requiring immediate medical care. This is done under direct supervision of a consultant/AS grade doctor. This duty includes the need to interpret investigations such as ECGs, x-rays and blood tests. The FYs supervise care using the broad range of practical procedures outlined previously, under direct supervision. In addition the FY1s are responsible for assessing the social impact of illness/injury. After discussion with senior staff they liaise with paramedical and social services to ensure patients on-going care needs are met. The FY doctors assist with the co-ordination of care in the departments CDU (clinical decision unit) where they assist with ward type work, including writing discharge letters and ordering medications. FYs are also encouraged to assist senior doctors in managing the more severely ill injured resuscitation room cases.

**Day-to-day Working Pattern:**  
Monday to Friday with on call 10:00-18:00hrs Weekdays (no weekends) 08:00-16:00hrs or 10:00-18:00hrs  

**Employer Information:**  
University Hospitals of North Midlands NHS Trust

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<tr>
<td>3 Emergency Medicine</td>
<td>Royal Stoke University Hospital</td>
<td>General Surgery/Upper GI</td>
<td>Mr C Cheruvu, Mr W Crisp, Mr M Dealen, Mr D Durkin &amp; Mr M Khan</td>
<td>Royal Stoke</td>
<td>An editing post helping to look after regional referrals with complex oesophagogastric and Hepatobiliary and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate specialist. The post will also include rotation around onto emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care.</td>
<td>The main duty of the FY doctor is assessing and treating a wide range of emergencies requiring immediate medical care. This is done under direct supervision of a consultant/AS grade doctor. This duty includes the need to interpret investigations such as ECGs, x-rays and blood tests. The FYs supervise care using the broad range of practical procedures outlined previously, under direct supervision. In addition the FY1s are responsible for assessing the social impact of illness/injury. After discussion with senior staff they liaise with paramedical and social services to ensure patients on-going care needs are met. The FY doctors assist with the co-ordination of care in the departments CDU (clinical decision unit) where they assist with ward type work, including writing discharge letters and ordering medications. FYs are also encouraged to assist senior doctors in managing the more severely ill injured resuscitation room cases.</td>
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<tr>
<td>15/WMD/RJE/05/F1004</td>
<td>General Medicine/Elderly Care</td>
<td>Dr A Kumar</td>
<td>County Hospital</td>
<td>The Elderly Care Department, comprising Dr T Cole and Dr Kumar, provides a Consultant led Elderly Care Service to the Trust. These recent services include an Acute Stroke Unit and a Stroke Rehabilitation Ward. They are supported by a multidisciplinary team on both sites. They also provide outpatient services for the elderly affected by Parkinson’s Disease and Dementia as well as an Acute TIA service.</td>
<td>The main duty of the FY doctor is assessing and treating a wide range of chronic conditions in older people (Giants of Geriatrics Medicine).</td>
<td>At the end of the formal attachment you would have had experience of diagnosing and treating acute illnesses and managing a wide range of chronic conditions in older people (Giants of Geriatrics Medicine).</td>
<td>You would be expected to be proactive in managing patient flow, in particular around safe discharge planning.</td>
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</tr>
<tr>
<td></td>
<td>General Surgery/Urology</td>
<td>Dr A Taylor</td>
<td>University Hospitals</td>
<td>A wide range of urological procedures are done in this hospital including some tertiary referrals for radical prostatectomy, cystoscopy and complex renal cancers, and they can expect to learn more about the whole topic of urology. They also get experience in dealing with emergency general surgical cases. There is an X-ray meeting and MDT weekly. They are encouraged to attend. A grand round occurs on many Fridays on the urology ward. An evening teaching meeting with meals occurs approximately once a month.</td>
<td>The doctors are based on the firm and will do a ward round each morning with more senior doctors. They are expected to participate in maintenance of notes, e-discharge and other administration. There is also a weekly Pre-Ams clerk session. They will be encouraged to take turns at attending out-patient clinics, theatres etc. to get a wider view of the specialty. They will also have sessions on SaU seeing general and urology emergency admissions when they will not be on the urology ward.</td>
<td>Monday to Friday with on call duties.</td>
<td>University Hospitals of North Midlands NHS Trust</td>
<td></td>
</tr>
<tr>
<td></td>
<td>General Surgery/Urology</td>
<td>Mr M Saxby, Mr S Liu, Mr C Luxcombe &amp; Mr A Golahi</td>
<td>Stoke University</td>
<td>A wide range of clinical procedures are done in the department including some tertiary referrals for radical prostatectomy, cystoscopy and complex renal cancers, and they can expect to learn more about the whole topic of urology. They also get experience in dealing with emergency general surgical cases. There is an X-ray meeting and MDT weekly. They are encouraged to attend. A grand round occurs on many Fridays on the urology ward. An evening teaching meeting with meals occurs approximately once a month.</td>
<td>The main duty of the FY doctor is assessing and treating a wide range of chronic conditions in older people (Giants of Geriatrics Medicine).</td>
<td>At the end of the formal attachment you would have had experience of diagnosing and treating acute illnesses and managing a wide range of chronic conditions in older people (Giants of Geriatrics Medicine).</td>
<td>You would be expected to be proactive in managing patient flow, in particular around safe discharge planning.</td>
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<td>Emergency Medicine</td>
<td>Dr A Taylor</td>
<td>Royal Stoke University</td>
<td>FY doctors work under direct supervision of senior doctors in the assessment and treatment of undifferentiated emergency medicine (medical, surgical, gynaecological, and psychiatric) presenting to a University Teaching Hospital Emergency Department. FYs gain experience in a wide range of practical procedures. Venepuncture, IV cannulation, administering IV fluids, arterial blood gas sampling, blood culture (peripheral sites), IV infusion and fluid prescription, IV infusion of blood/blood products, use of local anaesthetics, wound closure techniques, perform and interpret ECGs, perform and interpret peak flow, urethral catheterisation (male and female), use of simple airway adjuncts, performance of basic and advanced life support, assistance in fracture or dislocation manipulation. All FY doctors receive regular appraisal and are expected to complete a series of on-line learning modules in order to gain the knowledge required for Foundation level emergency medicine. All FY doctors are required to complete an audit during their post. Each Wednesday lunchtime 1 hour of teaching is provided to all junior grades and practitioners (whilst the senior doctors cover the departments). In addition a weekly timetable of departmental multi-professional learning events is distributed to all FY doctors, which they are encouraged to attend (examples include: Domestic violence training, use of IO needles, alcohol liaison, MAM meetings etc.).</td>
<td>The main duty of the FY doctor is assessing and treating a wide range of emergency cases requiring immediate medical care. This is done under direct supervision of a consultant/AS grade doctor. This role includes the need to interpret investigations such as ECGs, X-rays and blood tests. The FYs are responsible for assessing the social impact of illness/injury. After discussion with senior staff they liaise with paramedical and social services to ensure patients on-going care needs are met.</td>
<td>Weakdays (no weekends) 08:00-16:00hrs or 10:00-18:00hrs</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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The Elderly Care Department, comprising Dr T Oke and Dr A Kumar, provides a Consultant led Elderly Care Service to the Trust. These neonatal services include an Acute Stroke Unit and a Stroke Rehabilitation ward. They are supported by a multidisciplinary team on both sites. They also provide outpatient services for the elderly affected by Parkinson’s Disease and Dementia as well as an Acute TIA service. Daily troubleshooting ward round by Consultants to see new patients, very sick patients and patients being discharged. These ward rounds are on top of formal ward rounds of all the other patients by Consultants on a daily basis. Participating in multidisciplinary team meetings lead by Consultant twice per week. Participation in the Acute Medical on-call rota admitting unselected adult patients with a wide range of medical conditions. Opportunities to discuss management plans for these patients (helps to complete CBDs for your portfolio). Attendance at Grand Round weekly on a Friday afternoon.

2 General Surgery/Vascular
Miss A Walsh, Mr R Morgan, Mr L Papp & Mr S Rajagopalan
Royal Stoke University Hospital
FY1’s will be working with one of the biggest Vascular units in the Country and a Regional Trauma Centre! There are 11 Consultants, 4 x SpR level doctors, 2 x CT doctors and 2 x Clinical Nurse Specialists as well as the 4 x F1 doctors. FY’s work mainly with the Vascular in-patients but there are duties also in the Pre-Assessment clinic as well as opportunities to attend theatre and out-patient clinics. There are monthly Mortality and Mortality meetings to which FY’s will have an opportunity to present and there is active support in audit, journal club and case report writing. All F1 doctors will have an experienced, named Educational Supervisor. The main duties will be to the Vascular in-patients but FY1’s will also in the course of the 4 months placement have spells (1 week at a time) dealing with patients admitted via the acute surgical portal - SUU under the care of the Surgeon of the week. During those weeks they will get to see, assess and treat patients with a broad range of surgical disease including upper and lower GI tract problems as well as urology and any acute breast surgical patients presenting.

3 Emergency Medicine
Dr A Taylor
Royal Stoke University Hospital
FY doctors work under direct supervision of senior doctors in the assessment and treatment of undifferentiated emergencies (medical, surgical, orthopaedic, gynaecological and psychiatric) presenting to a University Teaching Hospital Emergency Department. FY1’s gain experience in a wide range of practical procedures: Venepuncture, IV cannulation, administering IV drugs, arterial blood gas sampling, blood culture (peripheral sites), IV infusion and fluid prescription, IV infusion of blood/blood products, use of local anaesthetics to skin, wound closure techniques, perform and interpret ECGs, perform and interpret peak flow, urethral catheterisation (male and female), use of simple airway adjuncts, performance of basic and advanced life support, assistance with fracture or dislocation manipulation. All FY doctors receive regular appraisal and are expected to complete a series of on-line learning modules in order to gain the knowledge required for Foundation level emergency medicine. All FY doctors are required to complete an audit during their post. Each Wednesday lunchtime 1 hour of education is provided to all junior grades and practitioners (whilst the senior doctors cover the department). In addition a weekly timetable of departmental multi-professional learning events is distributed to all FY doctors, which they are encouraged to attend (examples include: Domestic violence training, use of IO needles, alcohol liaison, M&M meetings etc.).

The main duty of the FY doctor is assessing (including ordering of investigations), resuscitating and treating a wide range of emergencies requiring immediate medical care. This is done under direct supervision of a consultant/AS grade doctor. This duty includes the need to interpret investigations such as ECGs, x-rays and blood tests. The FYs provide immediate care using the broad range of practical procedures outlined previously, under direct supervision. In addition the FY1s are responsible for assessing the social impact of illness/victim. After discussion with senior they liaise with paramedical and social services to ensure patients ongoing care needs are met. The FY doctors assist with the co-ordination of care in the departments CDU (clinical decision unit) where they assist with ward type work, including writing discharge letters and ordering medications. FY’s are also encouraged to assist senior doctors in managing the more severely ill/ injured resuscitation room cases.
There is the opportunity to look after patients with a wide range of respiratory conditions. There are two respiratory wards, each with their own sub-specialty areas. There will be opportunities to sit in on general and sub-specialty clinics. The learning opportunities include ward based teaching, regular journal club and clinical presentations as well as weekly radiology meeting.

At the end of the formal attachment you would have had experience of diagnosing and treating acute illnesses and managing a wide range of chronic conditions in older people (Giants of Geriatrics Medicine).

• Learning to manage the whole person rather than a disease condition.
• Experience of multidisciplinary team ward (learning to appreciate and make use of skills of the nurse, OT, physiotherapist, social worker, speech therapist and palliative care team).
• Learning about services available for old people in the community (home care, residential care and voluntary agencies).

You would know when and how to refer to the members of the multidisciplinary team.

• You would have had opportunities to talk with older people and their relatives about some ethical situations.
• You would know when and how to use the Liverpool Care Pathway for people who are dying.

You would be expected to learn and do LPs (CCH based job).

15/WMD/RJE/05/F1/013

1 General Medicine/Gastro
Dr F Leslie, Dr A Brind & Dr A Ramakrishnan
Royal Stoke University Hospital

Unconscious patients are a particular challenge, and you will be involved in the diagnostic and management of these patients. You will be encouraged to take a lead in these patients and will often be the senior attends on call. You should work towards completing your GP core training in gastroenterology.

Duties including general care, assessment and management of patients and communication with patients and relatives. Daily consultant ward rounds.

University Hospitals of North Midlands NHS Trust

15/WMD/RJE/05/F1/010

1 General Medicine/Respiratory
Dr T Jordan & Dr I Hussain
Royal Stoke University Hospital

University Hospitals of North Midlands Weekdays 0900-2130 - 0900-1700 based on own ward, 1700-2130 out of hours cover on medical wards.

2 General Medicine/Elderly Care
Dr A Kumar
County Hospital

University Hospitals of North Midlands Weekdays 0900-2130 & 0900-2130 based on AMU

3 Paediatrics
Dr A Kumar
Royal Stoke University Hospital

University Hospitals of North Midlands Weekdays 0900-2100 & 0900-2130 based on AMU

University Hospitals of North Midlands NHS Trust
### Rotation Reference: 2 General Surgery/Vascular

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<td>Miss A Walsh, Mr R Morgan, M-L Papp &amp; Mr S Rajagopalan</td>
<td>Royal Stoke University Hospital</td>
<td>F1's will be working with one of the biggest Vascular units in the Country and a Regional Trauma Centre! There are 11 Consultants, 4 x SpR level doctors, 2 x CT doctors and 2 x Clinical Nurse Specialists as well as the 4 x F1 doctors. F1's work mainly with the Vascular in-patients but there are duties also in the Pre-Assessment clinic as well as opportunities to attend theatre and out-patient clinics. There are monthly Mortality and Mortality meetings to which F1's will have an opportunity to present and there is active support in audits, journal club and case report writing. All F1 doctors will have an experienced, named Educational Supervisor.</td>
<td>The main duties will be to the Vascular in-patients but F1's will also in the course of the 4 months placement have spells (1 week at a time) dealing with patients admitted via the acute surgical portal - SAU under the care of the Surgeon of the week. During those weeks they will get to see, assess and treat patients with a broad range of surgical disease including upper and lower GI tract problems as well as urology and any acute breast surgical patients presenting.</td>
<td>Monday to Friday with on call</td>
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### Rotation Reference: 3 Paediatrics

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<td>Dr A Kumar &amp; Professor W Lenney</td>
<td>Royal Stoke University Hospital</td>
<td>Clinical management of all aspects of acute general paediatrics including respiratory, gastrointestinal, infectious, cardiac, neurological and musculoskeletal presentations of acutely unwell children. In addition to the general paediatric work we are also a tertiary referral centre for many specialties and the named shared care paediatric oncology centre for Staffordshire. UHNS also has one of the two PICUs in the West Midlands and whilst the FY1's do not work shifts on the unit they are encouraged to spend time there as supernumerary staff if they wish. There are daily Consultant led ward rounds and a weekly teaching programme.</td>
<td>The FY1 doctors are active members of the acute paediatric team and will often be the first people to clerk an admission before discussing the case with a senior and starting management under their guidance. We have a significant Consultant presence in general paediatrics with resident consultants at 11pm weekdays and 9 - 6pm on weekends/bank holidays. The trainees are very well supported and encouraged. In addition to on call duties they help on the wards with rounds and jobs, pre-clerk for procedures and are encouraged to attend the GA LP list. They get the opportunity to attend a variety of outpatient clinics, do audits and identity potential patients for MRCN research studies (seniors do consenting). Expected to actively contribute to the departmental teaching programme.</td>
<td>Academic FY1 post is unbanded and no on calls. The other 2 FY1 posts are part of a 1 in 7 full shift on call rota (EWTD compliant). Ordinary day time shifts are from 0845 to 1645 with long days, nights, long day weekends and and days built in to the rota on a rolling basis.</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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### Rotation Reference: 15/WMD/RJE/05/FY1/016

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<td>Dr N Munyanyi, Dr M Mukherjee &amp; Dr M Iqbal</td>
<td>Royal Stoke University Hospital</td>
<td>Hands on clinical management of a wide variety of acute medical conditions providing F1 doctors with the highest level of experience. This helps to facilitate the development of their history taking and clinical examination skills. Biggest opportunity to develop a wide variety of clinical skills ranging from generic skills to practical skills. Stoke on Trent is well known to have one of the biggest variety of medical conditions and F1 doctors in our department get to see all varieties of medical conditions as most of these patients are admitted to hospital through our department. &quot;If you don't see it in Stoke you are unlikely to see it elsewhere.&quot; Plenty of opportunities to perform practical procedures such as: USS-guided intercostal drain insertion; Lumbar puncture and paracentesis. We deliver medical education and teaching of the highest quality which is delivered by highly motivated consultants and other team members which facilitates career development for F1 doctors. We have weekly journal club meeting in the department at which F1 doctors are given first opportunity to make a presentation. F1 doctors are given opportunity to perform an audit in the department.</td>
<td>Clerking and presenting patients to the consultants in AMU and performing procedures as appropriate. In our AMU there is continuous consultant presence between the hours of 0800hrs and 2200hrs and F1 doctors are always directly supervised by the consultant during these hours. All patients seen by F1 during these hours will be reviewed by the consultants immediately and feedback will be given regarding their performance. After 2200hrs F1 doctors will be directly supervised by the medical registrar. All F1 doctors will be allocated to a consultant educational supervisor prior to arrival and will meet within the first week for induction appraisal and to agree a PDP. Therefore in our department the main duties for F1 doctors are to gain clinical experience, clinical knowledge and skills, team working skills and to make the most of this opportunity to achieve all the relevant competences because the set up of our department provides the best opportunity for this.</td>
<td>0900-1900 and nights they are based in AMU. 0900-2130 - 0900-1700 based on AMU own ward, 1700-2130 out of hours cover on medical wards. Weekends/Bank Holidays 0900-2100 &amp; 0900-2130 based on AMU</td>
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### Foundation Year One Rotations 2015
#### University Hospitals of North Midlands

It is important for applicants to note that due to NHS Trust service reconfigurations, all FP2015 programmes are subject to change (sometimes at short notice), in relation to placement order, specialty, banding, site and Trust. The rotation order displayed may not be the same order as the post rotates through on-appointment.

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<td>2 General Surgery/Colorectal</td>
<td>Mr R Dawson, Mr M Farmer, Mr R Kirby, Mr S Sangal &amp; Mr A Tiasmi</td>
<td>Royal Stoke University Hospital</td>
<td>Clinical management of general surgical and colorectal elective and emergency patients including tertiary referrals from other hospitals. There will be a mix of pre and post-operative patients or those requiring diagnostic input. Some patients will require complex and multi-speciality input. There will be opportunity to engage with Radiologists, Pathologists, Oncologists, Stoma Nurses, Physiotherapists, Pharmacists and other experts in their field at a variety of clinical meetings held throughout the week including MDT and presenting at the monthly morbidity and mortality meeting. F1’s are actively encouraged and supported to fulfil clinical projects like audit. In addition there will be opportunity encouraged to attend theatre, endoscopy and outpatients to gain additional experience if wishes. Scheduled acute sessions on the Surgical Assessment Unit will provide breadth of exposure to see presentations other than colorectal within general surgery, including urology and vascular conditions.</td>
<td>Management of elective colorectal in patients under a consultant(s) team. Prescribing intravenous fluids, analgesia and appropriate antibiotics by recognising the indication for each of these. F1’s are supported in recognising, diagnosing and treating post-operative problems such as wound infection, anastomotic breakdown and thromboembolic events. They are required to support the consultant in ward duties such as ward rounds, note keeping, phlebotomy, ordering clinical tests and constructing discharge summaries. Part of this role will involve pre-operative assessment in Pre-Ams. There will be opportunity to observe, assist and perform bedside procedures to augment your clinical competence. F1’s will also be expected to engage in clinical management of acute colorectal emergency admissions including clerking. As medicine is a rich team working environment, as workload allows, they will be expected to assist other teams.</td>
<td>Monday to Friday with on call</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>3 General Psychiatry</td>
<td>Dr B Udeze, Dr S Sridharan, Dr J Makala &amp; Dr R Nogi</td>
<td>Harplands</td>
<td>The Foundation Doctor is attached to Dr Udeze, Consultant Psychiatrist for inpatient older adult services. The Foundation Doctor is based at the Harplands Hospital and will attend ward 6 and ward 7, these wards providing services for older adults with complex dementiaing conditions and functional psychiatric illness. The Foundation Doctor will attend weekly ward rounds and be responsible for reviewing patients throughout the week. This will include attending to both mental health and physical health needs. The Foundation Doctor will receive 1 hour of supervision from the Consultant per week and have the opportunity to attend weekly academic meetings at the Harplands Hospital. The Foundation Doctor will supervise and provide bedside teaching to undergraduate medical students. There is no on-call attached to this post.</td>
<td>The Foundation Doctor will be responsible for clerking new admissions and preparing discharge summaries in addition to liaising with primary care and other agencies regarding discharge. The Foundation Doctor will review patients throughout the week so as to update at weekly ward rounds. The Foundation Doctor has additional responsibilities regarding the physical health of patients.</td>
<td>Monday-Friday, 9.00am-5.00pm</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>15/WMD/RJE/05/F1/019 1 General Medicine/ Respiratory</td>
<td>Dr T Jordan &amp; Dr I Hussain</td>
<td>Royal Stoke University Hospital</td>
<td>There is the opportunity to look after patients with a wide range of respiratory conditions. There are two respiratory wards, each with their own sub-specialty areas. There will be opportunities to sit in on general and sub-specialty clinics. The learning opportunities include ward based teaching, regular journal club and clinical presentations as well as weekly radiology meeting.</td>
<td>Day to day care of respiratory in-patients on wards 222 and 233.</td>
<td>Monday to Friday with on call</td>
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<td>2 General Surgery/Vascular</td>
<td>Miss A Walsh, Mr R Morgan, M-L Papp &amp; Mr S Rajagopalan</td>
<td>Royal Stoke University Hospital</td>
<td>F1’s will be working with one of the biggest Vascular units in the Country and a Regional Trauma Centre! There are 11 Consultants, 4 x SP4 level doctors, 2 x CT doctors and 2 x Clinical Nurse Specialists as well as the 4 x F1 doctors. F1’s work mainly with the Vascular In-patients but there are duties also in the Pre-Assessment clinic as well as opportunities to attend theatre and out-patient clinics. There are monthly Morbidity and Mortality meetings to which F1’s will have an opportunity to present and there is active support in audits, journal club and case report writing. All F1 doctors will have an experienced, named Educational Supervisor.</td>
<td>The main duties will be to the Vascular In-patients but F1’s will also in the course of the 4 months placement have spells (1 week at a time) dealing with patients admitted via the acute surgical portal - SAU under the care of the Surgeon of the week. During those weeks they will get to see, assess and treat patients with a broad range of surgical disease including upper and lower GI tract problems as well as urology and any acute breast surgical patients presenting.</td>
<td>Monday to Friday with on call</td>
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<td>15/WMD/RJE/05/F1/022</td>
<td>General Medicine/Diabetes &amp; Endocrinology</td>
<td>Dr O Varughese</td>
<td>Royal Stoke University Hospital</td>
<td>Acute management of metabolic disturbance - e.g. hypoglycaemia, calcium imbalance, other electrolyte abnormalities, DKA, HHS: Treatment of diabetic nephropathy: AKI on CKD, heart failure - acute/chronic, bronchopneumonia, severe cellulitis, sepsis, rarely pre-op pulmonary disease. There are occasional patients with Cushing's disease, Phaeochromocytoma and Conn's disease. There is a weekly departmental meeting for CPD for the whole team. All the FY1 doctors in the last 3 years except two who preferred Anaesthetics have done audits and presented as 1st author abstracts at national or international conferences.</td>
<td>Clerking of new patient admissions to the ward, examination andarrival at a differential diagnoses and initial management plans. Management of cohort of in-patients under designated consultant team with daily morning Consultant ward rounds. Liaising with various MDT's and presenting patients at these meetings e.g. upper/lower GI, lung, Urology, Neuro, Neuroendocrine, Plasticity. Initiating the discharge planning process and linking in with community teams as well as hospital specialist nurses (anaesthesia, diabetes, lung CNS, palliative care, etc) &amp; other specialties.</td>
<td>Monday-Friday, 9.00am-5.00pm</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<td>2 General Surgery/Urology</td>
<td>Mr M Sadby, Mr S Liu, Mr C Luscombe &amp; Mr A Golash</td>
<td>Royal Stoke University Hospital</td>
<td>A wide range of urological procedures are done in this hospital including some tertiary referrals for radical prostatectomy, cystectomy and complex renal cancers, and they can expect to learn more about the whole topic of urology. They also get experience in dealing with emergency general surgical cases. There is an x-ray meeting and MDT weekly they are encouraged to attend. A grand round occurs on many Fridays on the urology ward. An evening teaching meeting with meal occurs approximately once a month.</td>
<td>The doctors are based on the firm and will do a ward round each morning with more senior doctors. They are expected to participate in maintenance of notes, e-discharge and other administration. There is also a weekly Pre-Ams clerking session. They will be encouraged to take part at attending out patient clinics, theatres etc to get a wider view of the specialty. They also will have sessions on SAU seeing general and urology emergency admissions when they will not be on the urology ward.</td>
<td>Monday-Friday, 9.00am-5.00pm</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>3 General Psychiatry</td>
<td>Dr B Udiza, Dr S Sridharan, Dr J Makala &amp; Dr R Negi</td>
<td>Harplands Hospital</td>
<td>The Foundation Doctor is attached to Dr Makala, Consultant Psychiatrist for inpatient adult services. The Foundation Doctor is based at the Harplands Hospital and will attend ward 2, the inpatient ward for adult male patients. The Foundation Doctor will attend weekly ward rounds and be responsible for reviewing patients throughout the week. This will include attending to both mental health and physical health needs. The Foundation Doctor will work alongside a dedicated Nurse Practitioner. The Foundation Doctor will receive 1 hour of supervision from the Consultant per week and have the opportunity to attend weekly academic meetings at the Harplands Hospital. The Foundation Doctor will supervise and provide bedside teaching to undergraduate medical students. There is no on-call attached to this post.</td>
<td>The Foundation Doctor will be responsible for clerking new admissions and preparing discharge summaries in addition to liaising with primary care and other agencies regarding discharge. The Foundation Doctor will review patients throughout the week so as to update at weekly ward rounds. The Foundation Doctor has additional responsibilities regarding the physical health of inpatients.</td>
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<tr>
<td>15/WMD/RJE/05/F1025</td>
<td>1 General Medicine/Elderly Care</td>
<td>Dr J Morgan, Dr C Waerner &amp; Dr G Jacob</td>
<td>Royal Stoke University Hospital</td>
<td>The foundations doctors in elderly care are based on FEAU ward 78 or ward 76A. FEAU is a busy unit where the junior doctors have exposure to acute medical problems in elderly care. There is daily consultant ward rounds on all the wards in FEAU there is consultant cover from 9am-6pm. The junior doctors get experience in assessing and managing elderly patients with multiple comorbidities, gain insight into services available in the community an discharge planning. The majority of the junior doctors are involved in teaching medical students as well as they do audit during their attachments. There is departmental meeting every week and the junior doctors are encouraged to present once in their 4 months attachments; They are encouraged to attend all educational meetings.</td>
<td>Junior doctors on FEAU. Clerking patients who are admitted to FEAU, we get direct admission from GIP/PE and AMU. They present to the consultant covering FEAU, they learn/improve practical skills i.e. ABU, Lumbar puncturepleural aspiration. Their main duties will be clerking patients daily and attend consultant ward rounds, involved in board ward rounds and MDT. They summarize the history/examination for every patient. All junior doctors are involved in teaching 3rd year medical students as well as they assist 5th year students to develop the skills required for foundation years.</td>
<td>Monday-Friday, 9.00am-5.00pm</td>
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<td>15/WMD/RJE/05/F1028</td>
<td>2 General Surgery/Upper GI</td>
<td>Mr C Cheruvu, Mr W Crisp, Mr M Deakin, Mr D Durkin &amp; Mr M Khan</td>
<td>Royal Stoke University Hospital</td>
<td>An exciting post helping to look after regional referrals with complex oesophagogastroduodenal and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate Specialist. The post will also include rotation around our emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care.</td>
<td>Ward work with theatre and outpatient opportunities.</td>
<td>Monday to Friday with on call</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>3 General Psychiatry</td>
<td>Dr B Udabe, Dr S Sridharan, Dr J Mahala &amp; Dr R Nagi</td>
<td>Harplands</td>
<td>The Foundation Doctor is attached to Dr Nagi Consultant Psychiatrist for inpatient old age services. The Foundation Doctor is based at the Harplands Hospital and will attend ward 7 the inpatient ward for older adult patients. The Foundation Doctor will attend weekly ward rounds and be responsible for reviewing patients throughout the week. This will include attending to both medical health and physical health needs. The Foundation Doctor will receive 1 hour of supervision from the Consultant per week and have the opportunity to attend weekly academic meetings at the Harplands Hospital. The Foundation Doctor will supervise and provide bedside teaching to undergraduate medical students. There is no on-call attached to this post.</td>
<td>The Foundation Doctor will be responsible for clerking new admissions and preparing discharge summaries in addition to liaison with primary care and other agencies regarding discharge. The Foundation Doctor will review patients throughout the week so as to update at weekly ward rounds. The Foundation Doctor has additional responsibilities regarding the physical health of inpatients.</td>
<td>Monday-Friday, 9.00am-5.00pm</td>
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<tr>
<td>15/WMD/RJE/05/F1028</td>
<td>1 General Medicine/ Respiratory</td>
<td>Dr T Jordan &amp; Dr I Hussain</td>
<td>Royal Stoke University Hospital</td>
<td>There is the opportunity to look after patients with a wide range of respiratory conditions. There are two respiratory wards, each with their own sub-specialties areas. There will be opportunities to sit in on general and sub-speciality clinics. The learning opportunities include ward based teaching, regular journal club and clinical presentations as well as weekly radiology meeting.</td>
<td>Day to day care of respiratory in-patients on wards 222 and 223.</td>
<td>1200-2200 and nights they are based in AMU. Weekdays 0900-2130 - 0900-1700 based on own ward, 1700-2130 out of hours cover on medical wards. Weekends/Bank Holidays 0900-2130 &amp; 0900-2130 based on AMU</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>2 Vascular Surgery</td>
<td>Miss A Walsh, Mr R Morgan, Mr L Papp &amp; Mr S Rajagopalan</td>
<td>Royal Stoke University Hospital</td>
<td>F1’s will be working with one of the biggest Vascular units in the Country and a “Regional Trauma Centre”. There are 12 Consultants, 4 x SpR level doctors, 2 x CT doctors and 2 x Clinical Nurse Specialists as well as 4 x F1 doctors. F1’s work mainly with the Vascular in-patients but there are duties also in the Pre-Assessment clinic as well as opportunities to attend theatre and out-patient clinics. There are monthly Mortality and Morbidity meetings to which F1’s will have an opportunity to present and there is active support in audit, journal club and case report writing. All F1 doctors will have an experienced, named Educational Supervisor.</td>
<td>The main duties will be to the Vascular in-patients but F1’s will also in the course of the 4 months placement have spells (1 week at a time) dealing with patients admitted via the acute surgical portal - 5CU under the care of the Surgeon of the week. During those weeks they will get to see, assess and treat patients with a broad range of surgical diseases including upper and lower GI tract problems as well as urology and any acute breast surgical patients presenting.</td>
<td>Monday to Friday with on call</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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Foundation Year One Rotations 2015
University Hospitals of North Midlands

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<tr>
<td>1 Cardiology</td>
<td>Dr M Gunning / Dr Rhys Beynon and other designated consultants in cardiology</td>
<td>Royal Stoke University Hospital</td>
<td>Clinical management of acute cardiological emergencies including life threatening arrhythmias, acute coronary syndromes including myocardial infarction, heart failure, critical valvular heart disease, acute myocarditis. The foundation doctors actively participate in this arena getting first hand experience. The unit is also a tertiary referral centre offering procedural therapy including percutaneous coronary intervention, pacing and device implantation, ASD and PFO closure, electrophysiology and ablation, as well as TAXI. There are departmental meetings every day. There is a post-take consultant ward round every day.</td>
<td>Clerking of emergency admissions when on-call and instituting first line treatment. Management of cohort of in-patients under designated consultant team as well as assisting other teams depending on workload distribution. Ample opportunities to accompany patients to catheter laboratory or echo department to observe procedures. Participation in vibrant programme of departmental meetings. Active participation in audit. Supervision of rapid access chest pain clinics. Attendance at cardiology clinics. Cardioversions. Bedside procedures.</td>
<td>F1 is attached to a firm (4 Consultants), primary responsibility is ward based but also help other teams. They participate in acute on-call for cardiac admissions approximately 1:8 and 1:8 split weekends. F1 does not do nights, therefore when on-call works the long day to around 9.00pm. Attendance at the ward rounds on Monday to Friday with on call completion of an on-call period is mandatory.</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>2 General Surgery/Colorectal</td>
<td>Mr R Dawson, Mr M Farmer, Mr R Kirby, Mr S Sangal &amp; Mr A Tsiamis</td>
<td>Royal Stoke University Hospital</td>
<td>Clinical management of general surgical and colorectal elective and emergency patients including tertiary referrals from other hospitals. There will be a mix of pre and post-operative patients or those requiring diagnostic input. Some patients will require complex and multi-specialty input. There will be opportunity to engage with Radiologists, Pathologists, Oncologists, Stoma Nurses, Physiotherapists, Pharmacists and other experts in their field at a variety of clinical meetings held throughout the week including MDT and presenting at the monthly morbidity and mortality meeting. F1’s are actively encouraged and supported to fulfil clinical projects like audit. In addition there will be opportunity encouraged to attend theatre, endoscopy and outpatients to gain additional experience if wishes. Scheduled acute sessions on the Surgical Assessment Unit will provide breadth of exposure to see presentations other than colorectal within general surgery, including urology and vascular conditions.</td>
<td>Management of elective colorectal in-patients under a consultant(s) team. Prescribing intravenous fluids, analysis and appropriate antibiotics by recognising the indication for each of these. F1’s are supported in recognising, diagnosing and treating post-operative problems such as wound infection, anastomotic breakdown and thromboembolic events. They are required to support the consultant in ward duties such as ward rounds, note keeping, phlebotomy, ordering clinical tests and constructing discharge summaries. Part of this role will involve pre-operative assessment in Pre-Ams. There will be opportunity to observe, assist and perform bedside procedures to augment your clinical competence. F1’s will also be expected to engage in clinical management of acute colorectal emergency admissions including clerking. As medicine is a rich team working environment, as workload allows, they will be expected to assist other teams.</td>
<td>Monday to Friday with on call management plans on ward rounds (opportunities for DOPs and CBDs).</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>3 General Medicine/Elderly Care</td>
<td>Dr A Kumar</td>
<td>County Hospital</td>
<td>The Elderly Care Department, comprising Dr T Oko and Dr A Kumar, provides a Consultant led Elderly Care Service to the Trust. These inpatient services include an Acute Stroke Unit and a Stroke Rehabilitation ward. They are supported by a multidisciplinary team on both sites. They also provide outpatients services for the elderly affected by Parkinson’s Disease and Dementia as well as an Acute TIA service. Daily troubleshooting ward round by Consultants to see new patients, very sick patients and patients being discharged. These ward rounds are on top of formal ward rounds of all the other patients by Consultants on a daily basis. Participating in multidisciplinary team meetings lead by Consultant twice per week. Participation in the Acute Medical on-call rota admitting unselected adult patients with a wide range of medical conditions. Opportunities to discuss management plans for these patients (helps to complete CBD’s for your portfolio). Attendance at Grand Round weekly on a Friday afternoon.</td>
<td>At the start of the formal attachment you would have had experience of diagnosing and treating acute illnesses and managing a wide range of chronic conditions in older people (Giants of Geriatrics Medicine). Learning to manage the whole person rather than a disease condition. Experience of multidisciplinary team ward (learning to appreciate and make use of skills of the nurse, OT, physiotherapist, social worker, speech therapist and palliative care team). Learning about services available for old people in the community (home care, residential care and voluntary agencies). You would know when and how to refer to the members of the multidisciplinary team. You would have had opportunities to talk with older people and their relatives about some ethical situations. You would know when and how to use the Liverpool Care Pathway for people who are dying. Opportunity to learn and do LPs (OCT based job).</td>
<td>You would be expected to present cases and management plans on ward rounds (opportunities for DOPs and CBDs).</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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Clinical/Obstetrics and Gynaecology

Mr R. Trott, Mr G. Minne, Miss R. Inoue

Royal Stoke University Hospital

Good experience in the setting of a busy delivery suite, attending ward rounds, assessing patients in labour, on the maternity assessment unit, antenatal and postnatal wards and antenatal clinic. Assisting in obstetric theatre in caesarean sections, instrumental deliveries, perineal tears etc. Good surgical exposure to these procedures. F2 trainees do first on-call for obstetrics including cover for obstetric emergencies. In gynaecology, both F1 and F2 assess admissions on SAU, attend gynaecology clinics, both general and specialised clinics; urogynae, oncology, menopause, premenstrual syndrome. They assist in major gynaecological procedures and get good surgical exposure. They attend the weekly Friday afternoon teaching programme, monthly perinatal mortality morbidity meetings and the clinical cases revision meetings.

Gynaecology

Dr A. Kirby, Mr S. Sangal & Mr A. Tsiamis

Royal Stoke University Hospital

Doctors are actively engaged in the perioperative care of surgical patients. They get to learn airway management and perform procedures including tracheal intubation, LMA insertion, peripheral and central venous access, arterial line insertion and spinal anaesthetics/CSF sampling. They join the acute pain leam on their morning rounds and learn postoperative acute pain management. They are rotated to the emergency theatres and intensive care where they learn how patients are managed in these settings. Weekly half day FY1 tutorials are conducted where a broad spectrum of topics are covered.

Foundation Year One Rotations 2015

University Hospitals of North Midlands

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Placement

3 Obstetrics and Gynaecology

Type of Work to Expect and Learning Opportunities

Royal Stoke University Hospital

Good experience in the setting of a busy delivery suite, attending ward rounds, assessing patients in labour, on the maternity assessment unit, antenatal and postnatal wards and antenatal clinic. Assisting in obstetric theatre in caesarean sections, instrumental deliveries, perineal tears etc. Good surgical exposure to these procedures. F2 trainees do first on-call for obstetrics including cover for obstetric emergencies. In gynaecology, both F1 and F2 assess admissions on SAU, attend gynaecology clinics, both general and specialised clinics; urogynae, oncology, menopause, premenstrual syndrome. They assist in major gynaecological procedures and get good surgical exposure. They attend the weekly Friday afternoon teaching programme, monthly perinatal mortality morbidity meetings and the clinical cases revision meetings.

Typical Working Pattern in the Placement

Junior doctors on FEAU. Clerking patients who are admitted to FEAU, we get direct admission from OP/A&E and AMU. They present to the consultant covering FEAU, they learn/improve practical skills i.e. ABG, Lumbar puncture pleural aspiration

Main Duties of the Placement

Junior doctors on ward 78 assess patients daily attend consultant ward rounds, involved in board ward rounds and MDT, they summarize the history/examination for every patient. All junior doctors are involved in teaching 3rd year medical students as well as they assist 5th year students to develop the skills required for foundation years.

Employer Information

University Hospitals of North Midlands NHS Trust

Monday to Friday with on call 1200-2200 and nights they are based in AMU. 1700-2130 out of hours cover on medical wards. Weekends/Bank Holidays 0900-2130 based on AMU.

University Hospitals of North Midlands NHS Trust
**Foundation Year One Rotations 2015**  
**University Hospitals of North Midlands**

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<td>General Medicine/Stroke Medicine</td>
<td>Dr. Intha Naanjan</td>
<td>Royal Stoke University Hospital</td>
<td>Clinical Management of all areas of Stroke Medicine: Stroke Prevention, Acute and hyper acute stroke, stroke rehabilitation with day to day clinical experience in all aspects of stroke care. All round experience in the management of post stroke complications and working with MDT team to working towards secondary prevention and safe discharge of patients with stroke. Gives a good all round experience of General Medicine as well. Good exposure to Core acute medicine when on call giving opportunity to gain experience in most acute medical emergencies.</td>
<td>Cl parking of emergency admissions when on-call and instituting first line treatment. Management of cohort of in patients under designated consultant team as well as assisting other teams depending on workload distribution. Ample opportunities to take responsibility and presenting patients to the Consultants and doing neurological examination. Participation in vibrant programme of departmental meetings. Active participation in audit. Supervision of rapid access TIA clinics.</td>
<td>1200-2200 and nights they are based in AMU. University Hospitals of North Midlands NHS Trust Weekdays 0900-2130 - 0900-1700 based on own ward. 1700-2130 out of hours cover on medical wards. Weekends/Bank Holidays 0900-2100 &amp; 0900-2130 based on AMU University Hospitals of North Midlands NHS Trust</td>
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| 2 | General Surgery/Upper GI | Mr C Cheruvu, Mr W Crisp, Mr M Deakin, Dr D Durkin & Mr M Khan | Royal Stoke University Hospital | An exciting post helping to look after regional referrals with complex oesophagastroduodenal and Hepatobiliary and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate Specialist. The post will also include rotation around onto emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care. | Ward work with theatre and outpatient opportunities. | Monday to Friday with on call | University Hospitals of North Midlands NHS Trust |

| 3 | Trauma and Orthopaedic Surgery | Mr D Emery & Mr N Neal | Royal Stoke University Hospital | T & O is a busy specialty. The department treats full gamut of orthopaedic conditions, as well as trauma/emergency patients. We have 3 wards, elective, frail elderly/frailty fractures and general trauma as well as beds on the paediatric ward (2G) and spinal patients on the neuro/spinal ward. UPHS is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients. | Ward management of orthopaedic and trauma in-patients. These can range from children through the young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as musculoskeletal ones. The Foundation doctors work as teams with the core trainees rotating through the wards. The F2s also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and aptitude. | Normal working days, 5 days a week Mon-Fri, no weekends | University Hospitals of North Midlands NHS Trust |

| 15/WM/RI/E5/F1041 | General Medicine/Diabetes & Endocrinology | Dr G Varughese | Royal Stoke University Hospital | Acute management of metabolic disturbance - e.g. hypoglycaemia, calcium imbalance, other electrolyte abnormalities, DKA, HHS. Treatment of diabetic nephropathy, AKI on CKD, heart failure - acute/chronic, bronchopneumonia, severe cellulitis, sepsis, rare pre-op pituitary disease. There are occasional patients with Cushing disease, Phaeochromocytoma and Crik's disease. There is a weekly departmental meeting for CPD for the whole team. All the FY1 doctors in the last 3 years except two who preferred Anaesthetics have done audits and presented as 1st author abstracts at national or international conferences. | Cl parking of new patient admissions to the ward, examination and arranging at a differential diagnoses and initial management plans. Management of cohort of in-patients under designated consultant team with daily morning Consultant ward rounds. Liaising with various MDTs and presenting patients at these meetings e.g. upper lower GI, Lung, Urology, Neuro, Neuroendocrine, Pituitary. Initiating the discharge planning process and linking in with community teams as well as hospital specialist nurses (anticoagulation, diabetes, lung CNS, palliative care team) & other specialties. | 1200-2200 and nights they are based in AMU. University Hospitals of North Midlands NHS Trust Weekdays 0900-2130 - 0900-1700 based on own ward. 1700-2130 out of hours cover on medical wards. Weekends/Bank Holidays 0900-2100 & 0900-2130 based on AMU University Hospitals of North Midlands NHS Trust |

| 2 | Neurology | Dr J Chembala | County Hospital | Excellent opportunity to acquire wide experience in basics of neuro rehab in 18 bedded neurosciences unit. This also includes daily ward rounds with stroke consultants / neurologists, attending specialised clinics such as MS clinic, Parkinson's clinic and TIA clinics. This placement also gives unique opportunity to gain clinical skills in managing various chronic neurological conditions including challenging neurobehavioral problems, hypoxic brain injuries and traumatic brain injuries. There will be regular weekly departmental educational meetings / presentations and MDT to present and interact with whole MDT. | Junior doctors are expected to accompany consultants on daily ward rounds and carry out daily ward duties including vena puncture, cannulation, catheterisation, NG tube insertion, chasing and interpreting investigation results and clerking any new patient transfer to the unit. They are also given the opportunity to present cases and do presentations on weekly departmental educational meetings. Junior doctors will be allowed to attend certain number of specialised clinics. | Week days 9:00 to 17:00 hours. | University Hospitals of North Midlands NHS Trust |
**Foundation Year One Rotations 2015**

University Hospitals of North Midlands

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<td>Royal Stoke</td>
<td>Mr R Dawson, Mr M Farmer, Mr R Kirby, Mr S Sangal &amp; Mr A Tziamis</td>
<td>University Hospital</td>
<td>Excellent opportunity to acquire wide experience in basics of neuro rehab in 18 bedded neurosciences unit. This also includes daily ward rounds with stroke consultants / neurologists, attending specialised clinics such as MS clinic, Parkinson’s clinic and TIA clinic. This placement also gives unique opportunity to gain clinical skills in managing various chronic neurological conditions including challenging neurobehavioral problems, hypoxic brain injuries and traumatic brain injuries. There will be regular weekly departmental educational meetings / presentations and MDT to present and interact with whole MDT.</td>
<td>Junior doctors are expected to accompany consultants on daily ward rounds and carry out daily ward duties including venepuncture, cannulation, catheterisation, NG tube insertion, chasing and interpreting investigation results and clerking any new patient transfer to the unit. They are also will get opportunity to present cases and do presentations on weekly departmental educational meetings. Junior doctors will be allowed to attend certain number of specialised clinics.</td>
<td>Monday to Friday with on call</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<td>15/WMD/RJE/05/FF1/042</td>
<td>1 Neurology</td>
<td>Dr J Chembala</td>
<td>County Hospital</td>
<td>Local management of general surgical and colorectal elective and emergency patients including tertiary referrals from other hospitals. There will be a mix of pre and post-operative patients or those requiring diagnostic input. Some patients will require complex and multi-specialty input. There will be opportunity to engage with Radiologists, Pathologists, Oncologists, Stoma Nurses, Physiotherapists, Pharmacists and other experts in their field at a variety of clinical meetings held throughout the week including MDT and presenting at the monthly morbidity and mortality meeting. F1’s are actively encouraged and supported to fulfil clinical projects like audit. In addition there will be opportunity encouraged to attend theatre, endoscopy and outpatients to gain additional experience if wishes. Scheduled acute sessions on the Surgical Assessment Unit will provide breadth of exposure to see presentations other than colorectal within general surgery, including urgent and vascular conditions.</td>
<td>Ward management of general surgical and colorectal patients under a consultant(s) team. Prescribing intravenous fluids, analgesia and appropriate antibiotics by recognising the indication for each of these. F1’s are supported in recognising, diagnosing and treating post-operative problems such as wound infection, anaesthetic breakdown and thromboembolic events. They are required to support the consultant in ward duties such as ward rounds, note keeping, phlebotomy and constructing discharge summaries. Part of this role will involve pre-operative assessment in Pre-As. There will be opportunity to observe, assist and perform bedside procedures to augment your clinical competence. F1’s will also be expected to engage in clinical management of acute colorectal emergency admissions including clerking. As medicine is a rich team working environment, as workload allows, they will be expected to assist other teams.</td>
<td>Week days 9:00 to 17:00 hours.</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<td>15/WMD/RJE/05/FF1/042</td>
<td>2 General Medicine/Diabetes &amp; Endocrinology</td>
<td>Dr G Varughese</td>
<td>Royal Stoke</td>
<td>Acute management of metabolic disturbance - e.g. hypoglycaemia, calcium imbalance, other electrolyte abnormalities, DKA, HHS. Treatment of diabetic nephropathy, AKI on CKD, heart failure - acute/chronic, bronchopneumonia, sepsis, rare pre-op pulmonary disease. There are occasional patients with Cushings disease, Pheochromocytoma and Cushing’s disease. There is a weekly departmental meeting for CPD for the whole team. All the FY1 doctors in the last 3 years except two who preferred Anaesthetics have done audits and presented as 1st author abstracts at national or internal conferences.</td>
<td>Clerking of new patient admissions to the ward, examination and arriving at a differential diagnoses and initial management plans. Management of cohort of in-patients under designated consultant team with daily morning Consultant ward rounds. Liaising with various MDT’s and presenting patients at these meetings e.g. upper/lower GI, lung, Urology, Neuro, Neuroendocrine, Pulmonary. Initiating the discharge planning process and linking in with community teams as well as hospital specialist nurses (anticoagulation, diabetes, lung CNS), palliative care and/or secondary.</td>
<td>1200-2200 and nights they are based in AMU. 1000-1700 out of hours cover on medical wards. Days off as requested. 0900-2100 &amp; 0900-2100 based on AMU</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<td>15/WMD/RJE/05/FF1/042</td>
<td>3 Trauma and Orthopaedic Surgery</td>
<td>Mr D Emery &amp; Mr N Neal</td>
<td>Royal Stoke</td>
<td>T and O is a busy specialty. The department treats the full gamut of orthopaedic conditions, as well as trauma(emergency) patients. We have 3 wards, elective, frail elderly/frailty fractures and general trauma as well as beds on the paediatric ward (217) and spinal patients on the neuro/spinal ward. UPRN is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients.</td>
<td>Ward management of orthopaedic and trauma in-patients. These can range from children through to young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as musculoskeletal ones. The Foundation doctors work as teams with the core trainees rotating through the wards. The F2s also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and aptitude.</td>
<td>Normal working days, 5 days a week Mon-Fri, no weekends</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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15/WMG/R/UE/05/FL943
1 General Surgery-Colorectal
Mr R Dawson, Mr M Farmer, Mr R Kirby, Mr S Sangal & Mr A Taisians
Royal Stoke University Hospital
Clinical management of general surgical and colorectal elective and emergency patients including tertiary referrals from other hospitals. There will be a mix of pre and post operative patients or those requiring diagnostic input. Some patients will require complex and multi-specialty input. There will be opportunity to engage with Haematologists, Pathologist, Oncologist, Stoma Nurses, Physiotherapists, Pharmacists and other experts in their field at a variety of clinical meetings held throughout the week including MDT and presenting at the monthly morbidity and mortality meeting. FT’s are actively encouraged and supported to fulfil clinical projects like audit. In addition there will be opportunity encouraged to attend theatre, endoscopy and outpatients to gain additional experience if wishes. Scheduled acute sessions on the Surgical Assessment Unit will provide breadth of exposure to see presentations other than colorectal within general surgery, including urology and vascular conditions.
Management of elective colorectal in patients under a consultant(s) team. Prescribing intravenous fluids, analgesia and appropriate antibiotics by recognising the indication for each of these. FT’s are supported in recognising, diagnosing and treating post-operative problems such as wound infection, anastomotic breakdown and thromboembolic events. They are required to support the consultant in ward duties such as ward rounds, note keeping, pleuroscopy, ordering clinical tests and constructing discharge summaries. Part of this role will involve pre-operative assessment in Pre-Ams. There will be opportunity to observe, assist and perform bedside procedures to augment your clinical competence. FT’s will also be expected to engage in clinical management of acute colorectal emergency admissions including clerking. As medicine is a rich team working environment, as workload allows, they will be expected to assist other teams.
Educational Supervisor
Mr D Emery & Mr N Neal
Royal Stoke University Hospital
T and O is a busy specialty. The department treats the full gamut of orthopaedic conditions, as well as trauma/emergency patients. We have 3 wards, elective, frail elderly/frailty fractures) and general trauma as well as beds on the paediatric ward (217) and spinal patients on the neuro/spinal ward. UHNS is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients.
Ward management of orthopaedic and trauma in-patients. These can range from children through the young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as multisystem osteoporotic ones. The Foundation doctors work as teams with the core trainees rotating through the wards. The F2s also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and aptitude.

2 Trauma and Orthopaedic Surgery
Mr D Emery & Mr N Neal
Royal Stoke University Hospital
T and O is a busy specialty. The department treats the full gamut of orthopaedic conditions, as well as trauma/emergency patients. We have 3 wards, elective, frail elderly/frailty fractures) and general trauma as well as beds on the paediatric ward (217) and spinal patients on the neuro/spinal ward. UHNS is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients.
Ward management of orthopaedic and trauma in-patients. These can range from children through the young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as multisystem osteoporotic ones. The Foundation doctors work as teams with the core trainees rotating through the wards. The F2s also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and aptitude.

3 General Medicine/Elderly Care
Dr J Morgan, Dr C Wainwright & Dr G Jacob
Royal Stoke University Hospital
The foundations doctors in elderly care are based on FEAU ward 76 or ward 76A. FEAU is a busy unit where the junior doctors have exposure to acute medical problems in elderly care. There is daily consultant ward rounds on all the wards in FEAU there is consultant cover from 8am-8pm. The junior doctors get experience in assessing and managing elderly patients with multiple comorbidities, gain insight into services available in the community an discharge planning. The majority of the junior doctors are involved in teaching medical students as well as they do audit during their attachments. There is departmental meeting every week and the junior doctors are encouraged to present once in their 4 months attachments; They are encouraged to attend all educational meetings.
Junior doctors on FEAU. Clerking patients who are admitted to FEAU, we get direct admission from GP/AE and AMU. They present to the consultant covering FEAU, they learn/improve practical skills i.e. ABG, Lumbar puncture, pleural aspiration, Junior doctors on ward 78 assess patients daily attend consultant ward rounds, involved in board ward rounds and MDT, they summarise the history/examination for every patient. All junior doctors are involved in teaching 3rd year medical students as well as they assist 5th year students to develop the skills required for foundation years.

15/WMG/R/UE/05/FL944
1 Trauma and Orthopaedic Surgery
Mr D Emery & Mr N Neal
Royal Stoke University Hospital
T and O is a busy specialty. The department treats the full gamut of orthopaedic conditions, as well as trauma/emergency patients. We have 3 wards, elective, frail elderly/frailty fractures) and general trauma as well as beds on the paediatric ward (217) and spinal patients on the neuro/spinal ward. UHNS is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients.
Ward management of orthopaedic and trauma in-patients. These can range from children through the young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as multisystem osteoporotic ones. The Foundation doctors work as teams with the core trainees rotating through the wards. The F2s also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and aptitude.

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<td>Dr C Winnefeld &amp; G Jacob</td>
<td>Royal Stoke University Hospital</td>
<td>The foundations doctors in elderly care are based on FEAU ward 78 or ward 76A. FEAU is a busy unit where the junior doctors have exposure to acute medical problems in elderly care. There is a daily consultant ward round on all the wards in FEAU with consultant cover from 9am-8pm. The junior doctors get involved in assessing and managing elderly patients with multiple comorbidities, gain insight into services available in the community and discharge planning. The majority of the junior doctors are involved in teaching medical students as well as they do audit during their attachments. There is departmental meeting every week and the junior doctors are encouraged to present once in their 4 months attachments. They are encouraged to attend all educational meetings.</td>
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<td>3 General Medicine/Diabetes &amp; Endocrinology</td>
<td>Dr G Varughese</td>
<td>Royal Stoke University Hospital</td>
<td>Acute management of metabolic disturbance - e.g. hypernatremia, calcium imbalance, other electrolyte abnormalities, DKA, HHS. Treatment of diabetic nephropathy, AKI-on CKD, heart failure - acute/chronic, bronchopneumonia, severe cellulitis, sepsis, rarely pre-op pulmonary disease. There are occasional patients with Cushings disease, Phaeochromocytoma and Conn's disease. There is a weekly departmental meeting for CPD for the whole team. All the FY1 doctors in the last 3 years except two who preferred Anaesthetics have done audits and presented as 1st author abstracts at national or international conferences.</td>
<td>Clerking of new patient admissions to the ward, examination and arriving at a differential diagnoses and initial management plans. Management of cohort of in-patients under designated consultant team with daily morning Consultant ward rounds. Liaising with various MDTs and presenting patients at these meetings e.g. upper/lower GI, lung, Urology, Neuro, Neuroendocrine, Pulmonary. Initiating the discharge planning process and liaising with community teams as well as hospital specialist nurses (anticoagulation, diabetes, lung CNS, palliative care/end of life) &amp; other specialties.</td>
<td>1200-2200 and nights they are based in AMU. University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>1 General Medicine/Gastro</td>
<td>Dr F Leslie, Dr A Birind J&amp;A A Ramakrishnan</td>
<td>Royal Stoke University Hospital</td>
<td>Ward work managing patients with liver disease, general gastroenterology and nutritional patients. Formal teaching liver &amp; gastroenterology rounds per week. General medical on call on admissions unit. Juniors attend weekly gastroenterology meetings for teaching. MUM, audit and journal club presentations and are encouraged to get involved. There are also regular radiology &amp; MDT meetings to be attended where appropriate. Teaching of Keele medical students encouraged and works well particularly with year 5 assistants. All juniors are encouraged to get involved with audit &amp; O &amp; T is a busy specialty. The department treats the full gamut of orthopaedic conditions, as well as trauma/emergency patients. We have 3 wards, elective, frail elderly/fracture fractures) and general trauma as well as beds on the paediatric ward (217) and spinal patients on the neuro/spinal ward. UHNS is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients.</td>
<td>Duties including general care, assessment and management of patients and communication with patients and relatives. Daily consultant ward rounds. Patient management with other health care professionals including ortho liaison nurses, diabetics and nutrition team, BD and cancer CNSs. Procedures such as paracentesis &amp; NG tube placement.</td>
<td>1200-2200 and nights they are based in AMU. University Hospitals of North Midlands NHS Trust</td>
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<td>2 Trauma and Orthopaedic Surgery</td>
<td>Mr D Emery &amp; Mr N Neal</td>
<td>Royal Stoke University Hospital</td>
<td>Ward management of orthopaedic and trauma in-patients. These can range from children through to the young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as musculoskeletal ones. The Foundation doctors work as teams with the core trainees rotating through the wards. The FY2's also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and aptitude.</td>
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<td>University Hospitals of North Midlands NHS Trust</td>
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<td>3 Anaesthetics</td>
<td>Dr W Goh</td>
<td>Royal Stoke University Hospital</td>
<td>Doctors are actively engaged in the perioperative care of surgical patients. They get to learn airway management and perform procedures including tracheal intubation, LMA insertion, peripheral and central venesection, arterial line insertion and spinal anaesthetics/CSF sampling. They join the acute pain teams on their morning rounds and learn postoperative acute pain management. They are rotated to the emergency theatres and intensive care where they learn how patients are managed in these settings. Weekly half day FY1 tutorials are conducted where a broad spectrum of topics are covered.</td>
<td>Doctors work under the direct supervision of a senior more senior doctor at all times. They are performing preoperative assessment of surgical patients. In theatre and intensive care, they engage in the management of patients with direct senior input. Doctors are also expected to actively participate in the weekly tutorials. They are also to attend other departmental teachings including journal clubs and ICU tutorials.</td>
<td>When rostered to theatre work, the trainee will perform preoperative assessment of surgical patients in the wards before arriving in theatre to participate in anaesthetising patients with the senior doctor. When rostered to ICU, the trainee will join the intensive care team for ward rounds and attend to delegated ICU duties.</td>
<td>When rostered to theatre work, the trainee will perform preoperative assessment of surgical patients in the wards before arriving in theatre to participate in anaesthetising patients with the senior doctor. When rostered to ICU, the trainee will join the intensive care team for ward rounds and attend to delegated ICU duties.</td>
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1 Cardiology
Dr M Gunning / Dr Rhys Rees
and other designated consultants in cardiology
Royal Stoke University Hospital
Clinical management of acute cardiological emergencies including life threatening arrhythmias, acute coronary syndromes including myocardial infarction and failure, critical valvular heart disease, acute myocarditis. The foundation doctors actively participate in this arena getting first hand experience. The unit is also a tertiary referral centre offering procedural therapy including percutaneous coronary intervention, pacing and device implantation, ASD and PFO closure, electrophysiology and ablation, as well as TAVI. There are departmental meetings every day. There is a post-take consultant ward round every day.

2 General Surgery/Upper GI
Mr C Cheruvu, Mr W Crisp, Mr M Deakin, Mr D Durkin & Mr M Khan
Royal Stoke University Hospital
An exciting post helping to look after regional referrals with complex oesophagogastric and hepatobiliary and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate Specialist. The post will also include rotation around onto emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care.

3 Emergency Medicine
Royal Stoke University Hospital
FY doctors work under direct supervision of senior doctors in the assessment and treatment of undifferentiated emergencies (medical, surgical, orthopaedic, gynaecological and psychiatric) presenting to a University Teaching Hospital Emergency Department. FY’s gain experience in a wide range of practical procedures: Venepuncture, IV cannulation, administering IV drugs, arterial blood gas sampling, blood culture (peripheral veins), IV infusion and fluid prescription, IV infusion of blood/blood products, use of local anaesthetic to skin, wound closure techniques, perform and interpret ECGs, perform and interpret peak flow, urinal catheterisation (male and female), use of simple airway adjuncts, performance of basic and advanced life support, assistance with fracture or dislocation manipulation. All juniors are encouraged to get involved. There are also regular radiology & MDT meetings to be attended where appropriate. Teaching of Keele medical students encouraged and works well particularly with year 5 students. There are involved with for cardiac admissions approximately 130 a week. FY1s do not do nights, therefore when on-call works the long day to around 9.00pm. Attendance at the morning post-take round at the start and completion of an on-call period is mandatory.

15/WMD/RJE/05/F1048
1 General Medicine/Gastro
Dr F Leslie, Dr A Brind & Dr A Ramakrishnan
Royal Stoke University Hospital
Ward managing patients with liver disease, general gastroenterology and nutritional patients. Formal teaching liver & gastroenterology rounds per week. General medical on call on admissions unit. Juniors attend weekly gastroenterology meetings for teaching. MAM, audit and journal club presentations are encouraged to get involved. There are also regular radiology & MDT meetings to be attended where appropriate. Teaching of Keele medical students encouraged and works well particularly with year 5 assistants. All juniors are encouraged to get involved with audit.

15/WMD/RJE/05/F1051
1 Cardiology
Dr M Gunning / Dr Rhys Rees
and other designated consultants in cardiology
Royal Stoke University Hospital
Clinical management of acute cardiological emergencies including life threatening arrhythmias, acute coronary syndromes including myocardial infarction and failure, critical valvular heart disease, acute myocarditis. The foundation doctors actively participate in this arena getting first hand experience. The unit is also a tertiary referral centre offering procedural therapy including percutaneous coronary intervention, pacing and device implantation, ASD and PFO closure, electrophysiology and ablation, as well as TAVI. There are departmental meetings every day. There is a post-take consultant ward round every day.
Clinical/Dr J Weerathunga

Unique opportunity to have an exposure to acute stroke patients and learn basics of acute stroke management, medical complications and stroke rehab in a 18 bedded specialised neuro rehab unit. This includes daily ward rounds with stroke consultant, attending weekly MDT meetings, and weekly lunch time educational meetings. There is also opportunity to gain experience in hyper acute stroke management at Royal Stoke Hospital with further placement as part of educational needs. During this posting junior doctors will be trained to manage any acute stroke patient and complications. There will be opportunity to learn basic skills such as venepuncture, cannulation, catheterisation, NG tube insertion and also interpretation of CT, MRI images. Junior doctors also will be encouraged to do audits and meet the educational requirements during this posting.

Obstetrics and Gynaecology/Mr R Todd, Mr G Misra, Miss R Indusekhar & Mr M Komedpur

Weekly grand round meetings.

• Useful experience in managing acutely sick patients who may have worsened during the stay in the hospital – improved understanding of early warning scores and critical care outreach services
• Excellent exposure to acute medicine with supervision from senior medical team
• Great opportunities for common medical procedures like cannulation, blood gas analysis, lumbar puncture etc
• Excellent opportunities in improving communication skills including breaking bad news, explaining diagnoses and management plans on ward rounds
• You would be expected to present cases to senior medical team, and to also teach junior medical team.
• You would be expected to be proactive in managing patient flow, in particular around safe discharge planning.
• You will have regular meetings with your Educational and Clinical Supervisors as well as feedback on ward rounds

General Medicine/Acute Internal Medicine/Dr C Nabou

The 5 Acute Physicians (soon to be 6) work in the Acute Medical Unit and Emergency Department to deliver care to unshiled non-elective medical admissions. Assessing patients at the early stages of admission, prompts high quality medical care and early safe discharges and admissions avoidance. - Regular Acute Medicine rounds (good take and AMU ward rounds). Weekly Thursday pm acute take - Diabetes inpatient rounds - Tuesday and Thursday. Endocrine outpatient clinic - Wednesday and Thursday. Diabetes antenatal clinic - Wednesday pm. Opportunities to shadow diabetes nurses on their ward rounds learning about hypo, hyper, insulin initiation etc. Weekly grand round meetings.

• Excellent exposure to acute medicine with supervision from senior medical team
• Great opportunities for common medical procedures like cannulation, blood gas analysis, lumbar puncture etc
• Excellent opportunities in improving communication skills including breaking bad news, explaining diagnoses and management plans on ward rounds to patients and relatives
• You would be expected to present cases and management plans on ward rounds (opportunities for DOPs and CBDs).
• You would be expected to be proactive in managing patient flow, in particular around safe discharge planning.
• You will have regular meetings with your Educational and Clinical Supervisors as well as feedback on ward rounds

General Surgery/Urology/Mr M Saby, Mr S Liu, Mr C Luxcombe & Mr A Golaish

A wide range of urological procedures are done in this hospital including some tertiary referrals for radical prostatectomy, cystectomy and complex renal cancers, and they can expect to learn more about the whole topic of urology. They also get experience in dealing with emergency general surgical cases. There is an x-ray meeting and MDT weekly they are encouraged to attend. A grand round occurs on many Fridays on the urology ward. An evening teaching meeting with meal occurs approximately once a month.

• Excellent exposure to acute medicine with supervision from senior medical team
• Great opportunities for common medical procedures like cannulation, blood gas analysis, lumbar puncture etc
• Excellent opportunities in improving communication skills including breaking bad news, explaining diagnoses and management plans on ward rounds to patients and relatives
• You would be expected to present cases and management plans on ward rounds (opportunities for DOPs and CBDs).
• You would be expected to be proactive in managing patient flow, in particular around safe discharge planning.
• You will have regular meetings with your Educational and Clinical Supervisors as well as feedback on ward rounds

Stroke Medicine/Dr J Weerathunga

County Hospital

Weekdays 9:00 to 17:00 hours.

University Hospitals of North Midlands

NHS Trust

University Hospitals of North Midlands

NHS Trust

University Hospitals of North Midlands

NHS Trust
Mainly ward work, on-call cover to EAB and the ward etc.

You would be expected to present cases and management plans on ward rounds (opportunities for DOOs and CBOs).

You would be expected to be proactive in managing patient flow, in particular around safe discharge planning.

You will have regular meetings with your Educational and Clinical Supervisors as well as feedback on ward rounds.

1 General Medicine/Acute Internal Medicine

Dr C Ndlovu

County Hospital

The 5 Acute Physicians (soon to be 6) work in the Acute Medical Unit and Emergency Department to deliver care to unsolved non-elective medical admissions. Assessing patients at the early stages of admission, prompts high quality medical care and early safe discharges and admissions avoidance. Regular Acute Medicine rounds (goal take and AMU ward rounds). Weekly Thursday pm acute take. Diabetes inpatient rounds - Tuesday and Thursdays. Endocrine outpatient clinic - Wednesday and Thursday. Diabetes antenatal clinic - Wednesday pm. Opportunities to shadow diabetes nurses on their ward rounds learning about hypo education, insulin initiation etc. Weekly grand round meetings.

2 General Surgery/Colorectal

Mr R Dawson, Mr M Farmer, Mr R Kelly, Mr S Sangal & Mr A Tuaiirs

Royal Stoke University Hospital

Clinical management of general surgical and colorectal elective and emergency patients including referring referrals from other hospitals. There will be a mix of pre and post-operative patients or those requiring diagnostic input. Some patients will require complex and multi-specialty input. There will be opportunity to engage with Radiologists, Pathologist, Oncologist, Stoma Nurses, Physiotherapists, Pharmacists and other experts in their field at a variety of clinical meetings held throughout the week including MDT and presenting at the monthly morbidity and mortality meeting. FY1’s are actively encouraged and supported to fulfil clinical projects like audit. In addition there will be opportunity encouraged to attend theatre, endoscopy and outpatients to gain additional experience if wishes. Scheduled acute sessions on the Surgical Assessment Unit will provide breadth of exposure to procedures like cannulation, blood gas analysis, lumbar puncture etc. Excellent opportunities in improving communication skills including breaking bad news, explaining diagnoses and management plans to patients and relatives. Trainee will develop useful understanding of managing common acute medical conditions, including organising initial investigations and treatment plans. Interpretation of chest x-rays, ECG’s and other common investigations. Useful experience in managing acutely sick patients who may have worsened during the stay in the hospital – improved understanding of early warning scores and critical care outreach services.

3 Obstetrics and Gynaecology

Mr R Todd, Mr G Misra, Miss R Indushekar & Mr M Kodumpur

Royal Stoke University Hospital

Good experience in the running of a busy delivery suite, attending ward rounds, assessing patients in labour, on maternity assessment unit, antenatal and postnatal wards and antenatal clinic. Assisting in obstetric theatre in caesarean sections, instrumental deliveries, perineal tears etc. Good surgical exposure to these procedures. F2 trainees do first on-call for obstetrics including cover for obstetric emergencies. In gynaecology, both FY1s and FY2s assess admissions on SAU, attend gynaecology clinics, both general and specialised clinics - urogynaecology, oncology, menopause, premenstrual syndrome. They assist in major gynaecological procedures and get good surgical exposure. They attend the weekly Friday afternoon teaching programme, monthly perinatal mortality/ morbidity meetings and the clinical case review meetings.

Assessment of patients on SAU. MAU and antenatal/postnatal wards with opportunity to instigate initial management plans. Assisting with obstetric and gynaecology theatre cases to develop surgical skills. Reviewing patients in gynaecology outpatient and antenatal clinic offering the opportunity to develop consultation, examination and cover. Management skills with supervision from seniors present.

FY1 - Monday to Friday 9am-5pm. No out of hours commitment. Two sessions per day (e.g. am - afternoon). Labour ward, pm - Gynaecology outpatient clinic. FY2 - Two sessions per day as for FY1. Evening shifts on labour ward, also long day shifts, nights and weekend out of hours.

University Hospitals of North Midlands NHS Trust
Foundation Year One Rotations 2015
University Hospitals of North Midlands

It is important for applicants to note that due to NHS Trust service reconfigurations, all FP2015 programmes are subject to change (sometimes at short notice), in relation to placement order, specialty, banding, site and Trust. The rotation order displayed may not be the same order as the post rotates through on appointment.

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<td>15/WMD/RJE/05/F1080</td>
<td>Internal Medicine/Acute Internal Medicine</td>
<td>Dr C Nalbino</td>
<td>County Hospital</td>
<td>The 5 Acute Physicians (soon to be 6) work in the Acute Medical Unit and Emergency Department to deliver care to unsolved non-elective medical admissions. Assessing patients at the early stages of admission, prompts high quality medical care and early safe discharges and admissions avoidance. Regular Acute Medicine rounds (post take and AMU ward rounds). Weekly Thursday pm acute take. Diabetes inpatient rounds - Tuesday and Thursday. Endocrine outpatient clinics - Wednesday and Thursday. Diabetes antenatal clinic - Wednesday pm. Opportunities to shadow diabetes nurses on their ward rounds learning about hypo education, insulin initiation etc. Weekly grand round meetings.</td>
<td>Excellent exposure to acute medicine with supervision from senior medical team. Great opportunities for common medical procedures including cannulation, blood gas analysis, lumen puncture etc. Excellent opportunities in improving communication skills including breaking bad news, explaining diagnoses and management plans to patients and relatives. Trainee will develop useful understanding on managing common acute medical conditions, including organising initial investigations and treatment plans. Interpretation of chest x-rays, ECG’s and other common investigations. Useful experience in managing acutely sick patients who may have worsened during the stay in the hospital – improved understanding of early warning scores and critical care outreach services.</td>
<td>Monday to Friday with on call</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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2 General Surgery/Upper GI
Mr C Cheruvu, Mr W Crisp, Mr M Deakin, Mr D Durkin & Mr M Khan
Royal Stoke University Hospital

An exiting post helping to look after regional referrals with complex oesophagogastric and hepatobiliary and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate Specialist. The post will also include rotation around onto emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care.

Ward work with theatre and outpatient opportunities.

Monday to Friday with on call

University Hospitals of North Midlands NHS Trust

3 General Psychiatry
Dr B Udaze, Dr S Shridharan, Dr J Mahala & Dr R Negi
Harplands

The Foundation Doctor is attached to Dr Negi Consultant Psychiatrist for inpatient old age services. The Foundation Doctor is based at the Harplands Hospital and will attend ward 7 for inpatient ward for older adult patients. The Foundation Doctor will attend weekly ward rounds and be responsible for reviewing patients throughout the week. This will include attending to both mental health and physical health needs. The Foundation Doctor will receive 1 hour of supervision from the Consultant per week and have the opportunity to attend weekly academic meetings at the Harplands Hospital. The Foundation Doctor will supervise and provide bedside teaching to undergraduate medical students. There is no on-call attached to this post.

The Foundation Doctor will be responsible for clerking new admissions and preparing discharge summaries in addition to liaisoning with primary care and other agencies regarding discharge. The Foundation Doctor will review patients throughout the week so as to update at weekly ward rounds.

The Foundation Doctor has additional responsibilities regarding the physical health of inpatients.

Monday-Friday, 9.00am-5.00pm

University Hospitals of North Midlands NHS Trust

15/WMD/RJE/05/F1083
1 Cardiology
Dr M Gunning / Dr Rhys Beynon and other designated consultants in cardiology
Royal Stoke University Hospital

Clinical management of acute cardiological emergencies including life threatening arrhythmias, acute coronary syndromes including myocardial infection, heart failure, critical valvular heart disease, acute myocarditis. The foundation doctors actively participate in this area getting first hand experience. The unit is also a tertiary referral centre offering procedural therapy including percutaneous coronary intervention, pacing and device implantation, ASD and PFO closure, electrophysiology and ablation, as well as TAVI. There are departmental meetings every day. There is a post take consultant ward round every day.

Clerking of emergency admissions when on-call and instituting first line treatment. Management of cohort of in-patients under designated consultant team as well as assisting other teams depending on workload distribution. Ample opportunities to accompany patients to catheter laboratory or echo department to observe procedures. Participation in vibrant programme of departmental meetings. Active participation in audit. Supervision of rapid access chest pain clinics. Attendance at cardiology clinics. Cardioversions. Bedside procedures.

F1 is attached to a firm (4 Consultants), primary responsibility is ward based but also help other teams. They participate in acute on-call for cardiac admissions approximately 1/8 and 1/8 split weekends. F1 does not do nights, therefore when on-call works the long day to around 9.00pm. Attendance at the morning post-take round at the start and completion of an on-call period is mandatory.

Monday to Friday with on call

University Hospitals of North Midlands NHS Trust

2 Vascular Surgery
Miss A Walsh, Mr R Morgan, Mr L Papp & Mr S Rajagopalan
Royal Stoke University Hospital

F1’s will be working with one of the biggest Vascular units in the country and a Regional Trauma Centre. There are 11 Consultants, 4 x SpR level doctors, 2 x CT doctors and 2 x Clinical Nurse Specialists as well as the 4 x F1 doctors. F1’s work mainly with the Vascular in-patients but there are duties also in the Pre-Assessment clinic as well as opportunities to attend theatre and out patient clinics. There are monthly Morbidity and Mortality meetings to which F1’s will have an opportunity to present and there is active support in audits, journal club and case report writing. All F1 doctors have an experienced, named Educational Supervisor.

The main duties will be the Vascular in-patients but F1’s will also in the course of the 4 months placement have spells (1 week at a time) dealing with patients admitted via the acute surgical portal, SAU under the care of the Surgeon of the week. During those weeks they will get to see, assess and treat patients with a broad range of surgical diseases including upper and lower GI tract problems as well as urology and any acute breast surgical patients presenting.

Monday to Friday with on call

University Hospitals of North Midlands NHS Trust
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<tr>
<td>3 General Psychiatry</td>
<td>Dr I Agnell</td>
<td>St George's Hospital</td>
<td>Psychiatry services are delivered at St George's Hospital in Stafford which is part of South Staffordshire and Shropshire NHS Foundation Trust who are one of the largest and most successful Trusts in the Country. Twice weekly bleep-free Foundation Teaching on Wednesday and Thursday, 1pm-2pm, ALS Courses, Surviving Sepsis Course, Careers Advice Seminar. You will work with a team of professionals to supervise the care and safety of psychiatric patients who require inpatient care.</td>
<td>University Hospitals of North Midlands Foundation Year One Rotations 2015</td>
<td>All FY1 Doctors in hospital posts will generally be ward based during the normal working day and expected to play their role in the delivery of daily medical care to all the patients on their ward. You will be expected to undertake the daily management of patients with your team under senior supervision. You will be expected to attend the structured departmental teaching events scheduled. All FY1s will be expected to take an active part on daily ward rounds with their team. You are expected to know all clinical details on all the patients under the care of their clinical supervisors, and to present the clinical condition to their supervisors on ward rounds. The FY1 will take part in drawing up the daily management plans and executing many of these within their own competencies. They will become proficient in history taking. The doctor will be responsible for such other specific clinical duties as allocated by consultants including performing other duties in occasional emergencies and unforeseen circumstances.</td>
<td>You would be expected to present cases and management plans on ward rounds (opportunities for DOPs and CBDs).</td>
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ACADEMIC ROTATIONS

| Academic Rotation 10 | 1 Paediatrics | Dr A Kumar | Royal Stoke University Hospital | Clinical management of all aspects of acute general paediatrics including respiratory, gastrointestinal, infectious, cardiac, neurological and musculoskeletal presentations of acutely unwell children. In addition to the general paediatric work we are also a tertiary referral centre for many specialties and the named shared care paediatric oncology centre for Staffordshire. UHNS also has one of the two PICU’s in the West Midlands and whilst the FY1’s do not work shifts on the unit they are encouraged to spend time there as supernumerary staff if they wish to. There are daily Consultant led ward rounds and a weekly teaching programme. | The FY1 doctors are active members of the acute paediatric team and will often be the first people to clerk an admission before discussing the case with a senior and starting management under their guidance. We have a significant Consultant presence in general paediatrics with resident consultants 11pm weekdays and 9 - 6pm on weekends/bank holidays. The trainees are very well supported and encouraged. In addition to on call duties they help on the wards with rounds and jobs, pre-clerk for procedures and are encouraged to attend the QA LP list. They get the opportunity to attend a variety of outpatient clinics, do audits and identify potential patients for MRCN research studies (seniors do consenting). Expected to actively contribute to the departmental teaching programme. | Working pattern not yet confirmed |
|---------------------|--------------|------------|---------------------------------|----------|-------------------------------------------------|-----------------------------|----------------------------------------|----------------------|

2 General Surgery – Upper GI | Mr C Cheruvu, Mr W Crisp, Mr M Dealik, Mr D Durkin & Mr M Khan | Royal Stoke University Hospital | An exiting post helping to look after regional referrals with complex oesophagogastric and Hepatobiliary and Pancreatic Problems. You will work within a close team of 6 consultant Upper GI Surgeons, 3 registrars and an associate Specialist. The post will also include rotation around emergency cover for a week at a time where you will have the opportunity to follow patients for a complete week giving you insight into their continuity of care. | University Hospitals of North Midlands Foundation Year One Rotations 2015 | Ward work with theatre and outpatient opportunities. | Working pattern not yet confirmed |

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<td>1 ENT</td>
<td>Mr H Uppal</td>
<td>ENT</td>
<td>Dr M Iqbal</td>
<td>University Hospital</td>
<td><strong>Hands on clinical management of a wide variety of acute medical conditions providing F1 doctors with the highest level of experience. This helps to facilitate the development of their history taking and clinical examination skills. Biggest opportunity to develop a wide variety of clinical skills ranging from generic skills to practical skills. Stoke on Trent is well known to have one of the biggest variety of medical conditions and F1 doctors in our department get to see all varieties of medical conditions as most of these patients are admitted to hospital through our department. If you don't see it in Stoke you are unlikely to see it elsewhere.</strong> Plenty opportunities to perform practical procedures such as USS guided intercostal drain insertion; lumbar puncture and paracentesis. We deliver medical education and teaching of the highest quality which is delivered by highly motivated consultants and other team members which facilitates career development for F1 doctors. We have weekly journal club meeting in the department at which F1 doctors are given first opportunity to make a presentation. F1 doctors are given opportunity to perform an audit in the department. **</td>
<td>**</td>
<td>Working pattern not yet confirmed</td>
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<tr>
<td>2 ENT</td>
<td>Dr C Ndlovu</td>
<td>Internal Medicine</td>
<td>Dr M Iqbal, Dr M Mukherjee &amp; Dr M Iqbal</td>
<td>County Hospital</td>
<td><strong>The S Acute Physicians (soon to be 6) work in the Acute Medical Unit and Emergency Department to deliver care to unsolved non-elective medical admissions. Assessing patients at the early stages of admission, prompts high quality medical care and early safe discharges and admissions avoidance. Regular Acute Medicine rounds (post take and AMU ward rounds). Weekly Thursday pm acute take. Diabetes inpatient rounds - Tuesday and Thursday. Endocrine outpatient clinic - Wednesday and Thursday. Diabetes antenatal clinic - Wednesday pm. Opportunities to shadow diabetes nurses on their ward rounds learning about hypo education, insulin initiation etc. Weekly grand round meetings.</strong></td>
<td>**</td>
<td>Working pattern not yet confirmed</td>
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<tr>
<td>3 ENT</td>
<td>Mr R Dawson, Mr M Farmer, Mr R Kirby, Mr S Sangal &amp; Mr A Tsiambis</td>
<td>Surgery/Colorectal</td>
<td>Dr M Iqbal</td>
<td>Royal Stoke Hospital</td>
<td><strong>Clinical management of general surgical and colorectal elective and emergency patients including tertiary referrals from other hospitals. There will be a mix of pre and post-operative patients or those requiring diagnostic input. Some patients will require complex and multi-specialty input. There will be opportunity to engage with Radiologists, Pathologists, Oncologists, Stoma Nurses, Physiotherapists, Pharmacists and other experts in their field at a variety of clinical meetings held throughout the week including MDT and presenting at the monthly morbidity and mortality meeting. FY’s are actively encouraged and supported to full clinical projects like audit. In addition there will be opportunity encouraged to attend theatres, endoscopy and outpatients to gain additional experience if wishes. Scheduled acute sessions on the Surgical Assessment Unit will provide breadth of exposure to see presentations; other than colorectal within general surgery, including urology and vascular conditions. Management of elective colorectal in-patients under a consultant(s) team. Prescribing intravenous fluids, analgesia and appropriate antibiotics by recognising the indication for each of these. FY’s are supported in recognising, diagnosing and treating post-operative problems such as wound infection, anastomotic breakdown and thromboembolic events. They are required to support the consultant in ward duties such as ward rounds, note keeping, phlebotomy, ordering clinical tests and constructing discharge summaries. Part of this role will involve pre-operative assessment in Pre-Adms. There will be opportunity to observe and assist and perform bedside procedures to augment your clinical competence. FY’s will also be expected to engage in clinical management of acute colorectal emergency admissions including clerking. As medicine is a rich team working environment, as workload allows, they will be expected to assist other teams.</strong></td>
<td>**</td>
<td>Working pattern not yet confirmed</td>
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Foundation Year One Rotations 2015
University Hospitals of North Midlands

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<td>Academic Rotation 12</td>
<td>General Medicine/Gastro</td>
<td>Dr F Leslie, Dr A Binni &amp; Dr A Ramakrishnan</td>
<td>Royal Stoke University Hospital</td>
<td>Ward work managing patients with liver disease, general gastroenterology and multifocal patients. Formal teaching in liver &amp; gastroenterology rounds per week. General medical on call on admissions unit. Juniors attend weekly gastroenterology meetings for teaching. MMD, audit and journal club presentations and are encouraged to get involved. There are also regular radiology &amp; MDT meetings to be attended where appropriate. Teaching of Keel medical students encouraged and works well particularly with year 5 assistants. All juniors are encouraged to get involved with audit.</td>
<td>Duties including general care, assessment and management of patients and communication with patients and relatives. Daily consultant ward rounds. Patient management with other health care professions including alcohol liaison nurses, dieticians and nutrition team, IBD and cancer CNSs. Procedures such as paracentesis &amp; NG tube placement.</td>
<td>Working pattern not yet confirmed</td>
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<tr>
<td>2 Trauma and Orthopaedic Surgery</td>
<td>Mr D Emery &amp; Mr N Neal</td>
<td>Royal Stoke University Hospital</td>
<td>T and O is a busy specialty. The department treats the full gamut of orthopaedic conditions, as well as trauma/emergency patients. We have 3 wards, elective, frail elderly/fractured necks and general trauma as well as beds on the paediatric ward (217) and spinal patients on the neuro/spinal ward. UHNS is a major trauma centre and we therefore admit patients from a wide geographical area transferred here by air ambulance. You will therefore be exposed to the ward management of the full range of inpatient orthopaedics, and will have the opportunity depending on your interest to attend theatres and out patients.</td>
<td>Ward management of orthopaedic and trauma in-patients. These can range from children through the young and fit undergoing elective operations to very elderly frail fractured neck of femur patients and multiply injured trauma patients who may have multi-system injuries as well as musculoskeletal ones. The Foundation doctors work as teams with the care trainees rotating through the wards. The F2s also are on the on call rota, admitting patients from A and E, and looking after ward patients after hours and at weekends. Assisting in theatre depending on necessity, desire and attitude.</td>
<td>Working pattern not yet confirmed</td>
<td>University Hospitals of North Midlands NHS Trust</td>
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<tr>
<td>3 Emergency Medicine</td>
<td>Dr A Taylor</td>
<td>Royal Stoke University Hospital</td>
<td>FY doctors work under direct supervision of senior doctors in the assessment and treatment of undifferentiated emergencies (medical, surgical, orthopaedical, gynaecological and psychiatric) presenting to a University Teaching Hospital Emergency Department. FYs gain experience in a wide range of practical procedures: Venepuncture, IV cannulation, administering IV drugs, arterial blood gas sampling, blood culture (peripheral sites), IV infusion and fluid prescription, IV infusion of blood/blood products, use of local anaesthetic to skin, wound closure techniques, perform and interpret ECGs, perform and interpret peak flow, (un)inotropes, ventilator management (male and female), use of simple airway adjuncts, performance of basic and advanced life support, assistance with fracture or dislocation manipulation. All FY doctors receive regular appraisal and are expected to complete a series of on-line learning modules in order to gain the knowledge required for Foundation level emergency medicine. All FY doctors are required to complete an audit during their post. Each Wednesday lunchtime 1 hour of education is provided to all junior grades and practitioners (whilst the senior doctors cover the department). In addition a weekly timetable of departmental multi-professional learning events is distributed to all FY doctors, which they are encouraged to attend (examples include: Domestic violence training, use of IO needles, alcohol liaison, MAM meetings etc.).</td>
<td>The main duty of the FY doctor is assessing (including ordering of investigations), resuscitating and treating a wide range of emergencies requiring immediate medical care. This is done under direct supervision of a consultant/AS grade doctor. This duty includes the need to interpret investigations such as ECGs, x-rays and blood tests. The FYs provide immediate care using the broad range of practical procedures outlined previously, under direct supervision. In addition the FYs are responsible for assessing the social impact of illness/injury. After discussion with senior staff they liaise with paramedical and social services to ensure patients on-going care needs are met. The FY doctors assist with the co-ordination of care in the departments CDU (clinician decision unit) where they assist with ward type work, including writing discharge letters and ordering medications. FYs are also encouraged to assist senior doctors in managing the more severely ill injured resuscitation room cases.</td>
<td>Working pattern not yet confirmed</td>
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As at 05/03/15