<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - Emergency Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The department</strong></td>
<td>The Emergency Department is lead by four Emergency Medicine consultants supervising a team of five specialty doctors, four GP trainees and four FY2's in providing Emergency medical services for patients on the Isle of Wight. 40,000 patients attend the Emergency Department each year and the case-mix is typical for a semirural location. Paediatric and adult cases are represented from an Island population of 140,000. Most patients are cared for on site, but those with major traumatic injury or vascular surgical requirements, for example, are stabilised and transferred to the mainland. Facilities in the department are divided between an 6 chaired minors area, a 10 bedded majors area, with remote telemetry to each bed, and a 3 bedded resuscitation room. A Paediatric area with 2 beds and 1 resuscitation bay. Emergency Nurse Practitioners work in the Emergency Department 7 days a week. The Emergency Department benefits from a new purpose built integrated GP practice and walk-in centre. The centre operates 24/7 and manages the primary care stream of unscheduled care presenting to the department. It is staffed by GP's at all times and they assist with managing the workload of the department. The Emergency Department possesses its own portable ultrasound and enjoys access to a collocated CT scanner and MRI suite. The Emergency Department has academic links with Southampton and there are close ties to the regional air ambulance service.</td>
</tr>
</tbody>
</table>
| **The type of work to expect and learning opportunities** | All F2 Doctors in the Emergency Department are expected to attend to the casualties and patients with minor and major illnesses presenting to the Emergency department under the supervision of the Specialty Doctors and Consultants. Whilst in this placement the FY2 doctor can expect to see and assess, examine, formulate diagnostic plans and institute initial medical management for a wide variety of medical, surgical, obstetric and gynaecological orthopaedic, and paediatric patients presenting for unscheduled care. The overall objectives of the placement are to provide the trainee with the knowledge, skills and attitudes as follows:  
  - Eliciting a history.  
  - Examination.  
  - Diagnosis and clinical decision making.  
  - Medical record keeping and correspondence. |
- Safe use of medical devices.
- Prompt assessment of the acutely ill or collapsed patient, and identify and respond to abnormal physiology.
- Develop a wide range of Emergency skills including: arterial blood gas sampling, venepuncture and cannulation, safe prescription of analgesic agents, IV fluids and blood products, urethral catheterisation, use of local anaesthetics, performing and interpreting ECG’s, basic airway management, and in some cases thracostomy tube insertion.
- Appropriate use of investigations to augment diagnostic and decision making strategies
- Initiation of appropriate emergency treatment
- Communicate with colleagues for safe transfer of care for patients admitted with acute medical problems.
- Discharge planning for patients with chronic medical problems.
- Working as part of a team with the promotion of patient safety as its primary responsibility.

<table>
<thead>
<tr>
<th>Where the placement is based</th>
<th>Emergency Department St Mary's Hospital, Newport, Isle of Wight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Supervisor(s) for the placement</td>
<td>Dr Rob Andrews, Dr Maria Lynch, Dr Thomas Lawal-Rielly, Mr Robin Beal</td>
</tr>
<tr>
<td>Main duties of the placement</td>
<td>The FY2 doctor is responsible with other members of the Emergency Department nursing and medical team for the initial reception, care and medical management of patients attending for urgent medical care.</td>
</tr>
<tr>
<td>Typical working pattern in this placement</td>
<td>The working pattern is that of an eight person 7 day week 24-hour full shift. Shifts vary between eight and twelve hours duration and there is compensatory rest following night and late duties. The rolling rota includes a week of night shifts one week in eight and programmed periods of time-off for provision of annual, study and professional leave. The FY2 works an average of 44 hours per week. The post is fully compliant with current European Working time directives. Supervision and support is available from more experienced Emergency Department medical staff at all times.</td>
</tr>
<tr>
<td>Employer information</td>
<td>St Mary’s Hospital is situated on the outskirts of Newport and provides a full range of service associated with a typical District General Hospital. It has approximately 250 beds over a range of medical and surgical specialties and subspecialty wards, a 24 hour emergency department walk in access to GP services. There are developing services in medical rehabilitation and specialist medicine for older people.</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - General Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>The department</td>
<td>Isle of Wight GP Surgery – various</td>
</tr>
<tr>
<td>The type of work to expect and learning opportunities</td>
<td>General Practice – multiple learning opportunities are present in every consultation.</td>
</tr>
<tr>
<td>Where the placement is based</td>
<td>Isle of Wight GP Surgery - various</td>
</tr>
<tr>
<td>Clinical Supervisor(s) for the placement</td>
<td>One GP who has done the Foundation Training Day at the Deanery is the overall “supervisor” for the 4 month module. This individual monitors the progress of the F2 doctor throughout, prepares the weekly programs etc – F2 Doctors have a 10 to 14 day induction but begin seeing patients almost immediately (as soon as they have familiarized with the computer system) with full clinical supervision for each consultation provided by a named GP. The clinical supervisor changes session to session.</td>
</tr>
<tr>
<td>Main duties of the placement</td>
<td>Experience of GP environment – carry out about 50 consultations per week – conduct 2 or 3 clinical audits of value to the practice and do one or two special projects/family studies during the placement – there is a tutorial with a GP/administrator/practice nurse once every week. Trainees are released from the practice for all official foundation teaching sessions at the Trust.</td>
</tr>
<tr>
<td>Typical working pattern in this placement</td>
<td>Morning Clinics, Home Visits, Afternoon Clinics On call requirements: participate on 1:3 A&amp;E weekend Resident Rota</td>
</tr>
<tr>
<td>Employer information</td>
<td>St Mary’s Hospital is situated on the outskirts of Newport and provides a full range of service associated with a typical District General Hospital. It has approximately 250 beds over a range of medical and surgical specialties and subspecialty wards, a 24 hour emergency department walk in access to GP services. There are developing services in medical rehabilitation and specialist medicine for older people.</td>
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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - Intensive Care Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>The department</td>
<td>ICU</td>
</tr>
<tr>
<td>The type of work to expect and learning opportunities</td>
<td>Trainees will gain experience and competencies in assessing and early managing critically ill patients, including necessary airway management and gaining</td>
</tr>
</tbody>
</table>
access for invasive monitoring the identification and management of complications, as well as the necessary background i.e. medical devices, audit, pharmacology, microbiology, blood transfusion, invasive and non-invasive mechanical ventilation, tracheotomy and organ donation.

They will observe gaining medical consent, brain stem death testing and breaking bad news, coroners referrals and get insight in the complex logistic and managerial background in critical care, including care levels, limiting treatment, triage, major incident management.

If interested they will have chance to do audit/project work and present on the departmental meeting as well as attend MDT and m/m meetings over and above expectations set out in the foundation curriculum.

There is a purpose built induction booklet which sums up these objectives as well as suggested areas for further reading and development including assessment ideas which is based on the competency based assessment tools for CT (SHO) level according to the Intercollegiate Board for Training in Intensive Care Medicine. Should trainees be interested (especially if they plan for a career in Critical Care, Anesthaesia or Acute Medicine) this is very useful and has been taken up eagerly by trainees, with 3 of them securing either ACS or Anesthetic rotations in the last three years.

There is no “formal” teaching ward round but during daily activities informal teaching will take place around ICU relevant topics, usually triggered by patients and conditions seen during the ward rounds. Formal teaching and assessments will be based on these experiences and further home study expected to be done by the trainees.

<table>
<thead>
<tr>
<th>Where the placement is based</th>
<th>The Intensive Care Unit (ICU) in St Marys hospital, Level 2 and occasional in theatres or other acute care areas</th>
</tr>
</thead>
</table>

The ICU has been developed and expanded to incorporate six Level III beds with the equipment in place to support a seventh Level III bed on an ad hoc basis.

Ventilation (invasive and non-invasive) is provided with Draeger Evita XL ventilators, we also have Oxylog 3000 portable ventilators available for patient transport. Bedside monitoring is based around Datex System 5, there is extended monitoring including PICCO as well as an Oesophageal doppler (in theatres).

Renal support/replacement therapy is provided with Gambro-Hospal PRISMA machines.

The Unit deals with emergency and elective surgical patients and critically ill adult medical patients. Paediatric ICU services and the regional Neurological Unit are...
based in Southampton.
Clinical and Non- Clinical Transfers take place on about one occasions per month..

<table>
<thead>
<tr>
<th>Clinical Supervisor(s) for the placement</th>
<th>Dr O. Cramer, Dr G. Debreceni, Dr F. Henderson, Dr S. Maternik and Dr S. Sanyal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main duties of the placement</td>
<td>Foundation Trainees will be rostered for ICU in Foundation Year 2. This will be a 4 month placement. They will usually work 8 – 16 (with a one hour lunch break) and perform their on calls and weekends within the SOGE rota (they will attend ICU 08-16.00 weekdays and be on call and for other specialties from 16.00 – 20.00 hrs).</td>
</tr>
<tr>
<td>Typical working pattern in this placement</td>
<td>The daily routine is outlined below, due to the acute workload we have refrained from pressing it in an hourly timetable- joure fixe is only the am 8 am handover, the rest will be decided individually by the team, which we feel is an important point in professional development. It is envisaged that the one hour lunch break is taken between 12 and 14 hrs and encourage the medical team to have a joint lunch. It is expected that trainees take part in all the daily routine when on the unit. They will be given service commitments (supervised and later on unsupervised) and clinical duties according to their respective level of competence</td>
</tr>
</tbody>
</table>
|                                          | - Attend medical Handover at 8 am  
- Attend daily morning and afternoon round  
- Organize/Order tests as outlined in ward round  
- Chase up results  
- Attend daily microbiology ward round  
- Attend theatres with critically ill patients and the senior anaesthetist in charge  
- Present patients to the Consultant/SAS Grade  
- Take part in documentation (Request forms/Notes/Drug Charts/Discharge Summary/Death Certificates)  
- Take part in patient care as far as appropriate  
- Attend monthly MDT and departmental educational meeting  
- Observe, assist and perform clinical procedures as planned with their clinical supervisor  
- Attend ward/CCO referrals together with Consultant/SAS doctor and take part in management/documentation as far as appropriate  
- Attend in house transfers according to their respective level of competence  
- Are encouraged to attend emergency calls as |
On call requirements as outlined above:
When free of clinical duties trainees are encouraged to join other educational activities by the trust, i.e. weekly medical teaching or monthly grand round

### Employer information

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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - Urology</th>
</tr>
</thead>
</table>
| **The department** | Urology department is made up of One consultant urologist, two associate specialists, one staff grade doctor, one SHO and two FY1’s.  

The services on offer range from urinary incontinence to oncology (Testicular, prostatic, bladder and renal), both surgical and medical.  

The department serves an elderly population of about 140,000 which swells to almost triple during the summer months.  

There are a number of cancer fast track services available such as the one stop haematuria clinic and the new testicular lump service. |
| **The type of work to expect and learning opportunities** | The F2 doctor’s main job on the urology team is to provide support and guidance for the FY1s with their daily ward based and educational duties. Other duties range from FY2 based ward rounds, making sure patients receive adequate and optimal care, managing time and clinical priorities clearly and effectively and advising as well as helping the FY1s practice in a safe and productive manner. The FY2 also liaise with senior members of the team and co-ordinate patient management with other allied healthcare professionals. Consenting patients before surgery and assisting in theatre are other, but not all, duties of the FY2.  

Educational opportunities are abundant in the urology team as both the consultant and the associate specialists |
are always keen on teaching. The FY2 attends the clinics with the consultant where a wide range of pathologies present, providing the opportunity to discuss and formulate an optimal conservative, medical, or surgical management.

There is also always the opportunity to participate in the various audits carried out in the department as well as general surgical teachings and seminars, designed to broaden the breadth of knowledge for all staff including the FY2.

The urology team on the island is an ideal place to gain maximum exposure to different surgical procedures that can assist individual doctors to gain essential technical and academic experience in the field of surgery, urology in particular.

The overall educational objectives of the F1 year are to provide the trainee with the knowledge, skills and attitudes to be able to

- Take a history and examine a patient
- Identify and synthesise problems
- Prescribe safely
- Keep an accurate and relevant medical record
- Manage time and clinical priorities effectively
- Communicate effectively with patients, relatives and colleagues
- Use evidence, guidelines and audit to benefit patient care
- Act in a professional manner at all times
- Cope with ethical and legal issues which occur during the management of patients with general medical problems
- Educate patients effectively

Become life-long learners and teachers.

<table>
<thead>
<tr>
<th>Where the placement is based</th>
<th>Wards: St Helens, Whippingham and Mottistone. Main theatres, Day surgery and endoscopy. Outpatient clinics.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Supervisor(s) for the placement</td>
<td>Mr John Makunde.</td>
</tr>
<tr>
<td>Main duties of the placement</td>
<td>The FY2 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient’s medical record. This is to ensure that all patient receive optimal care and attention, and escalate according if more input is required if an unexpected situation arises. Doctors are expected to attend the structured teaching programmes provided by the department. The doctor will</td>
</tr>
</tbody>
</table>
be responsible for other specific clinical duties as
allocated by consultants including performing other duties
in occasional emergencies and unforeseen circumstances.

Other duties include weekend and night shifts on call
covering orthopaedics and gynaecology, urology, ENT,
maxfax, vascular and other general surgical specialties.

Typical working pattern in this post e.g. ward rounds,
clinics, theatre sessions
Daily/weekly/monthly (if applicable)

Mon:
0730 Prepare for ward round and review patients
admitted over weekend.
0800 Ward round.
0900 Jobs post ward round.
0930 Clinic opportunity
1400 Clinic opportunity in the afternoon.

Tues:
0800 Ward round.
0900 Jobs after the ward round.
0930 Endoscopy clinic.
1200 Finish any outstanding jobs.
1400 Clinic opportunity in the afternoon. +/- Theatre list

Wed:
0800 Ward round.
0900 Jobs after the ward round.
0900 -1600 All day theatre list – attend and assist. Post
op care of patients and finish any outstanding jobs.

Thurs:
0800 Prepare for ward round. 0815 Attend alternate
journal club or surgical xray session.
0900 Ward round.
1000 Finishing jobs on the ward then endoscopy clinic
1200 MDT at lunch time. .
1400-1700 Theatre list. Clinic opportunity.

Fri:
0800 Ward round,
0900 Jobs after ward round
1400 Theatre list – attend and assist

On call requirements:

An on call week involves taking referrals and attending to
acutely sick patients and any other out of hours ward work, covering most of the surgical specialties that provide good learning opportunity across the surgical spectrum.

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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - Gastroenterology</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The department</strong></td>
<td>Gastroenterology</td>
</tr>
<tr>
<td><strong>The type of work to expect and learning opportunities</strong></td>
<td>General medical ward work and acute medical admissions on call.</td>
</tr>
<tr>
<td><strong>Where the placement is based</strong></td>
<td>St Mary’s IOW</td>
</tr>
<tr>
<td><strong>Clinical Supervisor(s) for the placement</strong></td>
<td>Dr Sheen and Dr Grellier</td>
</tr>
<tr>
<td><strong>Main duties of the placement</strong></td>
<td>As above. Supervision of FY1s where required. Reporting directly to SpRs on the firm. Daily ward rounds with FY1/ SpR or consultant. Cover of respiratory patients on Newchurch or elsewhere if ward staffing requires.</td>
</tr>
<tr>
<td><strong>Typical working pattern in this placement</strong></td>
<td>Weekly:</td>
</tr>
<tr>
<td></td>
<td>Mon: Ward work</td>
</tr>
<tr>
<td></td>
<td>Tues: Ward Work/ consultant ward round</td>
</tr>
<tr>
<td></td>
<td>Wed: Ward work / protected education</td>
</tr>
<tr>
<td></td>
<td>Thurs: Ward work</td>
</tr>
<tr>
<td></td>
<td>Fri: Ward work/ consultant ward round</td>
</tr>
<tr>
<td><strong>On call requirements:</strong></td>
<td>1:10 MAU</td>
</tr>
</tbody>
</table>

| Employer information | The employer for this post is the Isle of Wight NHS Trust which is based at St Marys Hospital. St. Mary’s Hospital has approximately 477 beds [includes mental health and rehabilitation] and provides a full range of services associated with a typical District General Hospital. The hospital provides acute hospital services for the Isle of Wight, serving a population of approximately 138,500 people. About 25% of the population. |
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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - General Surgery</th>
</tr>
</thead>
</table>
| The department | General Surgery is structured in 3 teams/firms –
| | 1- general surgery with an interest in colorectal surgery
| | 2- general surgery with an interest in gastrointestinal
| | 3- general surgery with an interest in breast surgery
| | The in-patient beds for the firms are shared between two
| | wards, Whippingham and St.Helens (total 56 beds). There is
| | also a 9-bed day surgical unit, access to a limited number
| | of paediatric beds, and 6 intensive care beds. Some emergency
| | patients in ENT and Maxillo – Facial Surgery are admitted by
| | Foundation Doctors under supervision of the relevant specialty
| | Consultants. |
| The type of work to expect and learning opportunities | Inpatient management of elective surgical patients, including
| | the implementation of ward based management.
| | Assistance at operations.
| | Assessment of emergency admission under surgery, including
| | resuscitation and initial treatment, and investigation.
| | Management of the acutely unwell surgical patient, including
| | investigation and management of sepsis, renal, respiratory and
| | cardiac complications.
| | Patient education.
| | GP communication through discharge summaries. At present
| | F2s also accept referral calls from GPs on emergency
| | referrals.
| | Technical training in theatre for minor procedures (self
| | initiated). |
| Where the placement is based | Surgical Wards, although some work will be undertaken in
| | theatres and the outpatient clinics. |
| Clinical Supervisor(s) for the placement | Ward management of surgical inpatients. |
| Main duties of the placement | (when unit on-call)
| | Mon-Fri: On-call handover, ward round of firm patients and
| | clinical management. This will be interspersed with emergency
| | admissions, and discharge planning, occasionally theatre.
| | Sat-Sun: On-call hand-over, ward round of all surgical
| | patients. Care and assessment of surgical patients. This is
| | interspersed with emergency admissions, work in theatre and
| | discharge planning. |
| Typical working pattern in this placement | (when not on-call) |
| | Mon-Fri; On-call handover, ward round of firm patients and
| | clinical management. This will be interspersed with emergency
| | admissions, and discharge planning, occasionally theatre.
| | Sat-Sun: On-call hand-over, ward round of all surgical
| | patients. Care and assessment of surgical patients. This is
| | interspersed with emergency admissions, work in theatre and
| | discharge planning. |
Mon: registrar ward round, patient care, discharge planning, protected training session; consultant ward round
Tues: registrar ward round, patient care and discharge planning
Wed: self-directed ward round, patient care, theatre
Thurs: teaching session, consultant ward round, patient care and discharge planning, MDT, pre-assessment
Fri: registrar ward round, patient care, discharge planning, surgical clinic (supernumerary), departmental meetings
Sat: - On call 1:11
Sun: - On call 1:11

*On call requirements:* 1 in 11.

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<tr>
<th>Placement</th>
<th>F2 - Inpatient Psychiatry</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The department</strong></td>
<td>Psychiatry</td>
</tr>
<tr>
<td><strong>The type of work to expect and learning opportunities</strong></td>
<td>Busy general adult admissions. Lots of learning both mental and physical.</td>
</tr>
<tr>
<td><strong>Where the placement is based</strong></td>
<td>Osborne Ward, Sevenacres, St Mary’s Hospital</td>
</tr>
<tr>
<td><strong>Clinical Supervisor(s) for the placement</strong></td>
<td>Dr Mackirdy, Dr Khan, Dr Yoganathan, Dr Engelbrecht, Dr Naeem, Dr Dixey, Dr Smith.</td>
</tr>
<tr>
<td><strong>Main duties of the placement</strong></td>
<td>Clerk in patients with both mental and physical assessment. Assist consultant or staff grade at case reviews. Write discharge summaries.</td>
</tr>
</tbody>
</table>
| **Typical working pattern in this placement** | Mon: see cases and write discharge summaries  
Tues: care review meeting in morning; see cases in afternoon  
Wed: patient work in morning; academic in afternoon  
Thurs: care review meeting in morning; see cases in afternoon  
Fri: see cases etc  
Sat: rostered on call/Off  
Sun: rostered on call/Off  

*On call requirements:* Participate in 1:8 non-resident on call
rota with CT and GPVTS trainees.

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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - Orthopaedic and Trauma</th>
</tr>
</thead>
<tbody>
<tr>
<td>The department</td>
<td>The Department of Orthopaedic and Trauma comprises of 5 Consultants, five Associate Specialists, 2 Specialist Registrars, 5 F2 doctors and 2 Orthopaedic Nurse Specialists. There are specialist interest in Hip, Knee, Shoulder, Feet and hand surgery. All consultants are actively involved in management of the acute trauma. The department serves Isle of Wight population of approximately 140,000. However in summer time this population doubles because of number of the Tourists. The department has close links with tertiary services in Southampton, Portsmouth, Salisbury and Royal National Hospital in Stanmore.</td>
</tr>
</tbody>
</table>

| The type of work to expect and learning opportunities | All F2 Doctors in hospital posts will be team based during the 'normal' working day and expected to deliver the daily medical care of the patients on their wards. F2 Doctors will be involved with the generic clerking of patients being admitted and the ongoing care of the patients in the unit. They will also be required to attend patients in the Accident & Emergency Department whenever asked by the Casualty doctor on duty.  

The overall educational objectives of the F2 year are to provide the trainee with the knowledge, skills and attitudes to be able to:  
- Take a history and examine a patient  
- Identify and analyze problems  
- Prescribe and carry out treatment safely  
- Seek advice and assistance whenever necessary.  
- Keep an accurate and relevant medical record  
- Manage time and clinical priorities effectively  
- Communicate effectively with patients, relatives and colleagues  
- Use evidence, guidelines and audit to benefit patient care  
- Act in a professional manner at all times |
<table>
<thead>
<tr>
<th><strong>Where the placement is based</strong></th>
<th>St. Mary's Hospital, Isle of Wight.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinical Supervisor(s) for the placement</strong></td>
<td>Mr. N. Hobbs, Mr. S. Nasra, Mr. J. Gardiner, Mr. J. Scadden and Mr. H. Mahomed.</td>
</tr>
<tr>
<td><strong>Main duties of the placement</strong></td>
<td>The F2 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient's medical record. They will have opportunity to work with the consultants in outpatient's clinics/Theatre session for at least one day each week and also take responsibility for problems arising in Acute Trauma and Elective cases on the ward. They will also be required to attend patients in Accident &amp; Emergency Department whenever asked by the Casualty doctor on duty. They are expected to attend the structured teaching programmes provided by the department on the Thursday afternoon teaching session. 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>
</tr>
</tbody>
</table>
| **Typical working pattern in this placement** | **Week 1- Approx 7 in 11**  
**Daily:** 0800 Trauma Meeting  
2000 Handover  
Mon: 0830- 1600 Ward work, Pre-assessment clinic  
Tues: 0830- 1600 Ward work, Theatre  
Wed: 0830- 1600 Ward work, Ward round  
Thurs: 0830 - 1400 Ward work  
1400- 15.30 Departmental Teaching Programme  
Fri: 0830-1600 Ward work 1/11  
08300- 1200 ward work 1/11  
Sat: 0800 – 2015 1 in 11  
Sun: 0800 - 2015 1 in 11  
**Week 2- Approx 2 in 11**  
**Daily:** 0800 Trauma Meeting  
0830 – 1000 Ward round  
2000 Handover  
Mon: 1000- 1600 Ward work, Clinic  
Tues: 1000- 1600 Ward work, Ward round  
Wed: 1000- 1600 Ward work, Trauma Theatre  
Thurs: 1000 - 1400 Ward work.  
1400- 15.30 Departmental Teaching Programme. |
Fri: 1000-1600 Ward work

**Week 3 - 1 in 11**
*Daily:* 2000-0815 On call, ward work, Handover

**Week 4 - 1 in 11**
*Daily:* Off duty

*On call requirements:* 1 in 11.

**Employer information**
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It is important to note that this description is a typical example of your placement and may be subject to change.

<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 – Rehabilitation Medicine (Stroke)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The department</td>
<td><strong>Adult Medicine and Rehabilitation</strong> - Both posts are based on the Stroke Unit, but the FY2 also supervises the FY1 on the General Rehabilitation Unit and cross cover the FY1 on the Stroke and Rehabilitation Units should any of them be on call at the MAAU.</td>
</tr>
</tbody>
</table>

The stroke unit consists of the following services:

(a) Acute stroke Unit of four beds located at the Coronary Care Unit (CCU) step down, (B) Stroke Rehabilitation Unit (16 beds) located at a defined Geographical Unit in the North Hospital and (C) Transient Ischaemic Attack (TIA) clinic located within the Stroke Rehabilitation Unit building. A fast track TIA service is run daily between 1200 and 1400 hours to assess and investigate patients with ABCD2 score of 4 or more.

*Stroke Rehabilitation is the process of assisting a person disabled by stroke to return to an optimal level of health, activity such as walking and participation such as employment within the limits of the persisting stroke impairment.*

<table>
<thead>
<tr>
<th>The type of work to expect and learning opportunities</th>
<th>The work on this Unit includes:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Foundation Doctors are based on the Unit and are involved in the day to day care of patients with Stroke and other conditions presenting like stroke until they discharge or transfer to other Units.</td>
<td></td>
</tr>
</tbody>
</table>
Participation is the assessment and investigation of patients referred with TIA.

Continue the care of patients admitted to the Acute Stroke Unit between Consultant ward rounds.

Investigate patients developing intercurrent illnesses on the unit in consultation with the Registrar if one is available or the Consultant.

Write Discharge summaries on patient at discharged.

Ensure that disability is measured using validated scales such as the Barthel score, the Hodkinson’s minimental score the HAD Depression score etc.

| Where the placement is based | On the Stroke Unit, St Mary’s Hospital, Newport, Isle of Wight |
| Clinical Supervisor(s) for the placement | Dr. Eluzai Hakim |
| Main duties of the placement | The work on this Unit includes: |
|  | • Clerking new admissions to the Unit |
|  | • Reviewing sick patients or patients that nursing staff are concerned about |
|  | • Communicating and working closely with supervising consultants, nursing and therapy staff about patients; use of ward doctors diary helps this process |
|  | • Reviewing blood results and other reports on ward patients and acting on abnormal results |
|  | • Attendance of weekly Multidisciplinary meetings |
|  | • Attending consultant ward rounds |
|  | • Writing drug charts, discharge summaries, Drugs-to-take-home |
|  | • Ensuring hand over of unstable patients to doctor on call covering wards. |
|  | • Ensure that all fluid charts, Insulin and warfarin prescriptions are updated by 1700 hours each day |
|  | • Carrying out clinical procedures such as venesections, joint aspirations, arterial blood sampling and botulinum toxin injections for controlling muscle spasticity |
|  | • Liaison with other Departments (e.g. Pathology and Radiology) |
|  | • Ensure continuing professional development |
|  | • Be aware of risks to patients |
|  | • Ensure effective communication with patients, next of kin and carers |
|  | • Cross cover colleagues on the Rehabilitation Unit. |
**Learning Opportunities:**
Include appreciation of the wide range of differential diagnoses which mimic TIsAs and stroke. Stroke Medicine is now a subspecialty of general internal medicine and provides a greater range of choice for the trainee.

<table>
<thead>
<tr>
<th>Typical working pattern in this placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ward work, consultant ward rounds, and Specialist Registrar ward rounds.</td>
</tr>
</tbody>
</table>

**Mornings**

- **Mon:** Ward round Acute stroke Unit followed by Stroke Rehabilitation Unit (Dr Eluzai Hakim)
- **Tues:** Acute Stroke Unit and Stroke Rehab Unit; (Dr A. Demissie)
- **Wed:** Acute Stroke Unit ward round (Dr Hakim) & Programmed teaching and clinical meeting Education centre
- **Thurs:** Acute Stroke Unit and Stroke Rehab Ward round (Dr A. Demissie)
- **Fri:** Acute Stroke Unit and Stroke Rehab ward rounds (Dr Hakim)
- Sat: 1:10 on call commitment as rostered
- Sun: 1:10 on call commitment as rostered

**Afternoons**

- **Mon:** Ward work by Foundation Doctors
- **Tues:** Ward work and weekly MDT meeting
- **Wed:** Ward work/round by Foundation Doctors
- **Thurs:** Ward work
- **Fri:** Ward work
- **Sat:** 1:10 on call commitment as rostered
- **Sun:** 1:10 on call commitment as rostered.

**On call requirements:**
- Acute take: 1 in 10 (08.00-20.00)
- Ward cover: 1 in 10 (08.00-20.00)

**Employer information**
The employer for this post is the Isle of Wight NHS Trust which is based at St Mary's Hospital. St. Mary's Hospital has approximately 477 beds [includes mental health and rehabilitation] and provides a full range of services associated with a typical District General Hospital. The hospital provides acute hospital services for the Isle of Wight, serving a population of approximately 138,500 people. About 25% of the population is over 65. In the summer months the population increases significantly.

It is important to note that this description is a typical example of your placement and may be subject to change.
<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 – General Medicine - MAU</th>
</tr>
</thead>
<tbody>
<tr>
<td>The department</td>
<td>The medicine department at St Mary’s has 17 consultants, 11 of whom are on the on call rota. An Associate Specialist, 10 SpR/ST3, 11 ST1/2/FY2 and 11 FY1s make up the rest of the general medical establishment. The specialists include endocrinologists, cardiologists, gastroenterologists, care of the Elderly physicians, rheumatologists and respiratory physicians.</td>
</tr>
</tbody>
</table>
| The type of work to expect and learning opportunities | All F1 Doctors in hospital posts will generally be ward based during the ‘normal’ working day and expected to deliver the daily medical care of all the patients on their ward irrespective of specialty. They will also obtain on call experience. The overall educational objectives of the F1 year are to provide the trainee with the knowledge, skills and attitudes to be able to  
- Take a history and examine a patient  
- Identify and synthesise problems  
- Prescribe safely  
- Keep an accurate and relevant medical record  
- Manage time and clinical priorities effectively  
- Communicate effectively with patients, relatives and colleagues  
- Use evidence, guidelines and audit to benefit patient care  
- Act in a professional manner at all times  
- Cope with ethical and legal issues which occur during the management of patients with general medical problems  
- Educate patients effectively  
- Become life-long learners and teachers |
| Where the placement is based | St Mary’s Hospital, Newport, Isle of Wight. |
| Clinical Supervisor(s) for the placement | Dr Batool Rizvi |
| Main duties of the placement | The F2 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient’s medical record. They will attend the consultant ward rounds and have the opportunity to be part of the multi-disciplinary team meetings. They are expected to attend the structured teaching programmes provided by the department. 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.  
All the FY1’s take part in the ward cover rota, 5pm-8pm weekdays and weekends. They also take part in the medical on call rota in the MAU and will be involved with the generic clerking of patients being admitted and the ongoing care of the patients in the unit. |
| Typical working pattern in this placement | Mon: Consultant ward round daily |
### FY1 teaching – 1200, compulsory

**Tues:** Ward work  
**Wed:** Medical teaching 1230 to 1530  
Ward work  
**Thurs:** Consultant/Reg ward round  
**Fri:** Consultant/Reg ward round  
Radiology/ Respiratory teaching 12pm  
Ward work  
Weekend hand over 1630

**On call requirements:**  
Acute take: 1 in 10 (08.00-20.00)  
Ward cover: 1 in 10 (08.00-20.00)

### Employer information

St Mary’s Hospital is situated on the outskirts of Newport and provides a full range of service associated with a typical District General Hospital. It has approximately 250 beds over a range of medical and surgical specialties and subspecialty wards, a 24 hour emergency department walk in access to GP services. There are developing services in medical rehabilitation and specialist medicine for older people.

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<table>
<thead>
<tr>
<th>Placement</th>
<th>F2 - Orthopaedic and Trauma</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The department</strong></td>
<td>The Department of Orthopaedic and Trauma comprises of 5 Consultants, five Associate Specialists, 2 Specialist Registrars, 4 F2 doctors and 2 Orthopaedic Nurse Specialists. There are specialist interest in Hip, Knee, Shoulder, Feet and hand surgery. All consultants are actively involved in management of the acute trauma. The department serves Isle of Wight population of approximately 140,000. However in summer time this population doubles because of number of the Tourists. The department has close links with tertiary services in Southampton, Portsmouth, Salisbury and Royal National Hospital in Stanmore.</td>
</tr>
<tr>
<td><strong>The type of work to expect and learning opportunities</strong></td>
<td>All F2 Doctors in hospital posts will be team based during the 'normal' working day and expected to deliver the daily medical care of the patients on their wards. F2 Doctors will be involved with the generic clerking of patients being admitted and the ongoing care of the patients in the unit. They will also be required to attend patients in the Accident &amp; Emergency Department whenever asked by the Casualty doctor on duty. The overall educational objectives of the F2 year are to provide the trainee with the knowledge, skills and attitudes to be able to:</td>
</tr>
</tbody>
</table>
- Take a history and examine a patient
- Identify and analyze problems
- Prescribe and carry out treatment safely
- Seek advice and assistance whenever necessary.
- Keep an accurate and relevant medical record
- Manage time and clinical priorities effectively
- Communicate effectively with patients, relatives and colleagues
- Use evidence, guidelines and audit to benefit patient care
- Act in a professional manner at all times
- Cope with ethical and legal issues which occur during the management of patients with general medical problems
- Educate patients effectively
- Become life-long learners and teachers.

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<tr>
<th>Where the placement is based</th>
<th>St. Mary’s Hospital, Isle of Wight.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Supervisor(s) for the placement</td>
<td>Mr. N. Hobbs, Mr. S. Nasra, Mr. J. Gardiner, Mr. J. Scadden.</td>
</tr>
<tr>
<td>Main duties of the placement</td>
<td>The F2 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient’s medical record. They will have opportunity to work with the consultants in outpatient’s clinics/Theatre session for at least one day each week and also take responsibility for problems arising in Acute Trauma and Elective cases on the ward. They will also be required to attend patients in Accident &amp; Emergency Department whenever asked by the Casualty doctor on duty. They are expected to attend the structured teaching programmes provided by the department on the Thursday afternoon teaching session. 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>
</tr>
</tbody>
</table>
| Typical working pattern in this placement | **Week 1- Approx 7 in 11**  
Daily:  
0800 Trauma Meeting  
2000 Handover  
Mon: 0830- 1600 Ward work, Pre-assessment clinic  
Tues: 0830- 1600 Ward work, Theatre  
Wed: 0830- 1600 Ward work, Ward round  
Thurs: 0830 - 1400 Ward work  
1400- 15.30 Departmental Teaching Programme  
Fri: 0830-1600 Ward work 1/11  
08300- 1200 ward work 1/11  
Sat: 0800 – 2015  1 in 11  
Sun: 0800 - 2015  1 in 11 |
**Week 2- Approx 2 in 11**  
*Daily:*  
0800 Trauma Meeting  
0830 – 1000 Ward round  
2000 Handover

Mon:  
1000- 1600 Ward work, Clinic  
Tues:  
1000- 1600 Ward work, Ward round  
Wed:  
1000- 1600 Ward work, Trauma Theatre  
Thurs:  
1000 - 1400 Ward work.  
1400- 15.30 Departmental Teaching Programme.  
Fri:  
1000-1600 Ward work

**Week 3- 1 in 11**  
*Daily:*  
2000- 0815 On call, ward work, Handover

**Week 4- 1 in 11**  
*Daily:*  
Off duty

*On call requirements:* 1 in 11.

**Employer information**  
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