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# Purpose

To ensure timely and safe service delivery to the population of Geelong whilst maintaining appropriate doctor to patient clinic ratios.

# Target Audience

General Surgery Consultants and Registrars

Outpatient Waitlist

# Definition

Consultant Unit Clinic – These clinics run every week and are always attended by rostered consultants

Registrar Unit Clinics – These clinics run every week and are attended by SET Registrars and Fellows.

Consultant ‘Additional’ Clinics – These clinics are designed to operate alongside Registrar clinics and are attended by specific consultants.

Surg 1 – Upper GI

Surg 2 – Breast

Surg 3 - Colorectal

# Procedure Manual

An overview of this document can be found in **Appendix 1** Including clinic timings and number of patients seen divided by New and Review.

## Attendance at Clinic:

The surgical units are required to dedicate maximal junior staff at the following times. Interns / residents / registrars and fellows are expected to attend all clinics unless assigned to assist in theatre or attending to urgent ward issues.

Registrar ‘Post Scope Clinics’ only require the attendance of the single assigned registrar

Nurse led clinics will run alongside other clinics, but operate independently.

**Monday**

**Tuesday**

**Wednesday**

**Thursday**

**Friday**

**AM**

Surg 1 + Surg 3

Surg 2

Surg 1

Surg 2 + Surg 3

**PM**

Surg 3

Surg 1, Surg 2

Surg 3

The remainder of this document discusses the protocols for limits on the number of patients per clinic and specifics on how these clinics are run.

The complete clinic schedule can be found in the **Clinic Schedule** section, below.

## Clinic Timings

### Consultant and Registrar Unit Clinics

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| AM | S1 Registrar | S2 Consultant |   | S1 Registrar | S2 Registrar |
| **PM** |   |   | S3 Registrar | S1 Consultant, S2 Registrar | S3 Consultant |

### Consultant ‘Additional’ Clinics.

The following ‘additional clinics’ are schedule clinics that occur alongside registrar clinics.

Monday am (weekly) – Sonal Nagra (Colorectal and Thyroid), Surg 3. This will run parallel with a Surg 3 Registrar clinic.

Monday am (weekly) – David Watters (Thyroid)

Monday am (weeks 1, 3, 5, 7, 8)– Ken Chao (General Surgery), Surg 1

Monday am (weeks 2, 4, 6, 8)– Stephen Brockman (Colorectal), Surg 1

Wednesday pm (weeks 1, 2, 3, 4, 6, 8) – Su Mei Hoh (Colorectal), Surg 3

Wednesday pm (weeks 5 and 8) – Pia Bernardi (Colorectal)

Friday am – Epworth Scope Clinic

Friday am Pelvic Floor Clinic – Bernardi and Hoh (Week 1 and 4)

### Registrar Additional Clinics

Monday Surg 3

Thursday am Surg 1 – Telehealth clinic.

Thursday pm – Surg 2

Tues / Wednesday / Fri – Post Op Scope Clinic (see Clinic schedule below for ad hoc timings)

Friday ASU Clinic

### Nurse Led Clinics

Monday

Wednesday

Friday

## Determining the number of patients to be booked into clinic.

### Consultant Unit Clinics:

*Surgical Unit 1 and 3*: Consultant sees (8) + Consultant supervises (4) = 12 per consultant

Note: Registrars will be booked to see 6 patients maximum even in the absence of direct oversight of a consultant. (i.e., if 2 consultants and 3 registrars clinic will be capped at 12 + 12 + 6). Fellows will be assigned 4 new patients to see, but will generally be involved in running the clinic and reviewing patients with junior doctors.

*Surgical Unit 2*: Consultant sees and supervises (8) = 8 per consultant

*Consultant Additional Clinics:* Consultant sees and supervises (8) = 8 per consultant

### Registrar Unit Clinics:

Registrar clinics shall be capped to the following numbers.

Surg 1 Monday Morning – 50 Patients

Surg 3 Wednesday PM – 50 Patients

Surg 2 Friday am – 20 Patients.

### Consultant ‘Additional’ Clinics:

*Consultant Additional Clinics:* Consultant sees and supervises (8) = 8 per consultant (5 new referrals and 3 reviews)

\*Note: the Monday Watters / Nagra clinic will be capped at 12 patients as this clinic is independent and does not run alongside a registrar clinic, so does not borrow from registrar clinic resources.

### Registrar Additional Clinics:

These clinics are set up to follow up on endoscopy histopathology results and determine the next steps in management. These clinics will be capped at 15 patients. Timings are based on Registrar commitments and can be found in Appendix 1.

### Nurse Led Clinics

Nurse led clinics will be capped at 10 patients per day and will be guided by specific protocols.

## Clinic Running:

The following is a brief description on how Junior Doctors shall select patients to see at clinic.

### Consultant Unit Clinic

In general, the fellow will run the floor, answer questions, and see patients with junior doctors to help them establish management plans for patients. New or complex patients may be assigned to specific consultants, however it is often appropriate for junior doctors to see these patients and then discuss with the assigned consultant.

### Consultant ‘Additional Clinics’:

With the exception of the Surg 3 Watters / Nagra Clinic these clinics are designed to operate alongside Registrar clinics. For these clinics, Junior doctors may select from the pile of patients assigned to the consultant, and these patients should be discussed with the named consultant.

### Registrar Clinics:

Similarly to the above the Fellow or SET Registrars will run registrar clinics and support junior doctors in clinical decision making. Junior doctors can select any patient and work them up.

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# Contributors

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