

POD DESCRIPTION

Pod descriptions are overseen by the Pre-vocational Medical Education Officer (PMEO), DPET and DDPET to provide important information to pre-vocational Junior Medical Officers (JMO's) regarding their pod placement. They are best referred to as a guide containing helpful information detailing the:

- Specialties encompassed by the pod
- Roles & Responsibilities of the JMO
- Education
- Weekly timetable
- Rostering
- Contact details

The pod description is designed to be supplemented by specific term descriptions and is an important component of orientation for the JMO.

FACILITY: The Canberra Hospital	
POD NAME: Medical Pod 3 Relief	
Core/Non-Core/Relief: Relief	
Term Supervisors: DPET: Dr Carolyn Petersons ; DDPET: Dr Sonia Res	
CLINICAL TEAM: <i>Include contact details of all relevant team members</i>	<p>The Med Pod 3 Relief JMO will be attached to the units under Medical Pod 3 as per rostered duties. The clinical team will consist of the staff specialists and VMOs of the Medical Pod 3 units and the Medical PMEO.</p> <p>The Clinical team consists of the supervisors and clinical team members attached to each medical unit under Medical Pod 3. Please refer to the individual term descriptions for further details of names and contact numbers.</p> <p>Medical Pod 3 includes:</p> <ul style="list-style-type: none"> • General Medicine • Home in the Hospital (HITH), • Respiratory Medicine, • Cardiology, • Rheumatology Immunology & Dermatology, • Endocrinology • Med Pod 3 Relief term placements <p>Medical PMEO: Dr Wai Meng Voon: Pre-vocational Medical Education Officer. Email: waimeng.voon@act.gov.au Extension: 6244 2507 Office: MOSCETU, level 3, TCH (Bldg 2)</p>

	<p>MOSCETU Supervisors:</p> <p>Dr Carolyn Petersons: Director of Pre-vocational Medical Education. Email: carolyn.petersons@act.gov.au</p> <p>Extension: 6244 3052 Office: MOSCETU, level 3, TCH (Bldg 2)</p> <p>Dr Sonia Res: Deputy Director of Pre-vocational Medical Education. Email: sonia.res@act.gov.au Extension: 6244 3374 Office: MOSCETU, level 3, TCH (Bldg 2)</p>																
ACCREDITED FOR :	<table><tr><td></td><td>Number</td><td>Core/Elective</td><td>Duration</td></tr><tr><td>PGY1</td><td>8</td><td>Medical Pod 3 Core</td><td>12-14 weeks</td></tr><tr><td>PGY2+</td><td>5</td><td>Medical Pod 3 Core</td><td>12-14 weeks</td></tr><tr><td>Relief positions (either PGY1 or PGY2+)</td><td>4</td><td>Med Pod 3 Relief</td><td>12-14 weeks</td></tr></table> <p>Total positions available: 17</p> <p>Core positions: 12</p> <p>HITH (non-core) positions: 1</p> <p>Relief (Non-Core) positions: 4</p>		Number	Core/Elective	Duration	PGY1	8	Medical Pod 3 Core	12-14 weeks	PGY2+	5	Medical Pod 3 Core	12-14 weeks	Relief positions (either PGY1 or PGY2+)	4	Med Pod 3 Relief	12-14 weeks
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OVERVIEW OF UNIT OR SERVICE Include outline of the role of the pod.	<p>Pod Definition:</p> <p>As part of the 4-term hospital system at Canberra Hospital, the different units of the hospital are divided into 4 Pods.</p> <p>A Pod is a grouping of JMO terms within the framework of the existing hospital clinical department structure. The Pod system is designed to achieve the following:</p> <ul style="list-style-type: none">• Increase the amount and quality of JMO clinical exposure within the units of the Pod• Simplify and improve the accuracy of clinical handover• Improve continuity of care by moving towards a '24 hr hospital'• Provide an increase in evening and night medical staffing and greater continuity of care that involves the same group of JMOs looking after the Pod patients AH.• Enable more efficient completion of clinical duties and administrative paperwork. <p>A Key feature of the Pod system is that each pod is internally self-sufficient within that group of JMOs. Added value is achieved by the fact that JMOs are supervised and managed by Senior Medical Practitioners similarly functioning within their individual pod. All JMO overtime is undertaken within the pod. The afterhours pod JMO is responsible for all inpatient care for patients admitted within the pod across a 24hr period, seven days per week. The system aims to support patient safety by having a focussed patient group for the JMOs to cover within their Pod.</p> <p>The Pods are staffed to enable JMO education and training, and to comply with clinical and leave obligations. The system has provisions to cover for unplanned leave (sick leave). The medical officer support credentialing education training unit (MOSCETU) provides overall coordination of JMO education, training, support and administration.</p>																

	<p>Medical Pod 3 includes:</p> <ul style="list-style-type: none"> • General Medicine • Home in the Hospital (HITH), • Respiratory Medicine, • Cardiology, • Rheumatology Immunology & Dermatology, • Endocrinology <p>Accredited for 8 PGY1 and 5 PGY2+ positions as Core Medical positions 12-14 weeks.</p> <p><u>Med Pod 3 Relief placements:</u></p> <p>Accredited for 4 PGY1/PGY2 positions as Non-Core Relief positions 12-14 weeks.</p> <p><u>Med Pod 3 Relief JMOs</u> rotate through the disciplines within Medical Pod 3. These positions are deemed a Non-Core rotation. The relief positions are a vital role within the pods to promote continuity of care of patients and broadening education for the JMO.</p> <p>The nature of these relief positions is to provide a varying experience of the different medical units within this Pod, and to allow the Med Pod 3 Relief JMO the flexibility to move within the different teams depending on need, rostering and unit requirements. Each Relief position has a default speciality they are assigned to, however, the Relief JMO may be rostered to different units to cover leave, or other requirements of the Medical Pod 3 teams.</p> <p>The skills acquired by the Relief JMO are to increase comfort and confidence in changing work environments, changing teams and registrars, and being aware of unique and specific work practices within the varying medical units under Medical Pod 3.</p> <p>This added skill set will be beneficial to JMOs as they progress in their training and move towards registrar programs.</p> <p>NB: occasionally opportunities may arise to work in a discipline outside your specialty or Medical Pod 3. We encourage JMO's to eagerly undertake this occurrence as it enhances your medical knowledge and experience.</p> <p>.</p>
<p>ROLE OF PMEO:</p>	<p>The Pre-vocational Medical Education Officer (PMEO) is employed by the Medical Officer Support, Credentialing Education Training Unit (MOSCETU).</p> <p>PMEOs can help with:</p> <ul style="list-style-type: none"> • Personalised teaching and training of clinical skills, • Professional leadership and mentorship, • Coordination of term assessment/ performance management of JMO's within pods, • Support of JMOs with professional and personal difficulties, • Supervision of clinical hand-over meetings, • Supervision of the pod roster and troubleshooting as required, • Liaison with consultant staff within pods, • Liaison with term supervisors; and • JMO advocacy <p>Please do not hesitate to contact your PMEO at any stage.</p>

ORIENTATION:	<p>Your PMEO is responsible for facilitating orientation for the Med Pod 3 Relief JMO. Please contact your PMEO at the commencement of your term.</p> <p>There will be a Start of Term Orientation on the first Tuesday of each term during the Intern teaching session to provide an information and handover session to the incoming Med Pod and Surg Pod Relief JMOs.</p> <p>You may also contact the clinical team members, including the registrars, of your assigned units for orientation.</p>
REQUIREMENTS FOR COMMENCING SPECIFIC TERMS:	<p>Completion of Basic Medical School Training for PGY1 positions.</p> <p>General Registration for PGY2 positions.</p>
JMOs CLINICAL RESPONSIBILITIES AND TASKS:	<p>It is advisable to read the relevant term descriptions of the Medical Pod 3 units for further details of JMO clinical responsibilities and tasks.</p> <p><u>Medical Pod 3:</u></p> <ul style="list-style-type: none"> • General Medicine • Home in the Hospital (HITH), • Respiratory Medicine, • Cardiology, • Rheumatology Immunology & Dermatology, • Endocrinology <p>These are busy medical units, each with their own specific term requirements, knowledge and responsibilities, as well as common duties.</p> <p>Med Pod 3 duties:</p> <p>Ward rounds and ward work:</p> <p>The JMO is responsible for presenting all new patients to the consultant and providing updates on the progress of inpatients. The JMO should attempt to make sure that results of recent investigations, including scans and X-rays, are available for the ward Rounds.</p> <p>The JMO should also ensure that accurate daily entries are made in the patients' notes during ward rounds and that notes are kept up to date.</p> <p>Attend morning handover in the Main Auditorium.</p> <p>At the end of term, ensure you contact the incoming JMO and orientate him/her to the ward(s)/clinics and any current inpatients and provide a written summary/handover in the medical record.</p> <p>Attendance is expected at all ward rounds, handover rounds, multidisciplinary rounds, book rounds, X-Ray and unit meetings. Please also refer to the Unit timetable.</p> <p>Educational:</p> <p>Case presentations and review of the relevant medical literature</p> <p>Understanding of the principles and implementation of evidence-based medicine in relation to management of common general medicine, HITH, respiratory, cardiology, rheumatology/dermatology/immunology and endocrinology conditions.</p> <p>Clinical:</p> <ul style="list-style-type: none"> • A sound knowledge of normal human biology and its alteration in acute and chronic disease. • Knowledge of the investigation and management of acute presentations of illness (e.g. dyspnoea, chest pain, delirium). • Knowledge of the investigation and management of chronic medical disorders, including ischaemic heart disease, heart failure, diabetes, COPD. • Knowledge of hospital and community based resources available for patients and

	<p>caregivers. This includes role of the Aged Care Assessment Team, community service providers and ambulatory care services (e.g. Hospital in the Home).</p> <ul style="list-style-type: none"> • An appreciation of ethical considerations in interactions with patients, caregivers and colleagues. This includes the role of the Power of Attorney and the Office of the Community Advocate in decision making. • An understanding of scientific methods, including clinical trial design, basic statistical techniques and clinical audit. • Have the capacity to perform a detailed history and physical examination of patients from a general medicine perspective, including all systems. • Communications skills with medical staff, allied health professionals and families. • Basic principles of sleep medicine. <p>Manage the following common and/or important problems:</p> <ul style="list-style-type: none"> • Acute diabetes emergencies including hypoglycaemia, hyperglycaemia and diabetic ketoacidosis; • Complications of diabetes including retinopathy, nephropathy, neuropathy and peripheral vascular disease with a particular emphasis on the diabetic foot; • Common endocrine emergencies including hyper and hypocalcaemia, adrenal crises and pituitary apoplexy; and • Preoperative management of patients with diabetes and endocrine disorders especially those on steroids. • The ability to interpret physical signs and to recognize the acutely deteriorating patient. • The ability to perform an accurate mental state and cognitive examination. This includes the use of a formal cognitive assessment tools such as the Folstein Mini Mental State Examination. <p>Procedural:</p> <p>By the completion of this term the JMO may expect to witness or undertake, and have an understanding, of the following procedures and management techniques:</p> <ul style="list-style-type: none"> • Arterial blood gas estimation • Pleurocentesis • Aware of Performance and Lung function tests • ECG interpretation • DC cardioversion • Temporary cardiac pacing • Permanent cardiac pacing • Coronary angiography • Right heart catheterisation • Exercise testing in coronary heart disease • Echocardiography • Percutaneous transluminal coronary angioplasty/stenting • Intra-aortic balloon pump insertion • Understand principles and clinical indications of non-invasive ventilation including BiPAP and CPAP. • Appropriate use of ophthalmoscope and otoscope. • Basic and Advanced Life Support including cardiopulmonary resuscitation. • Urinary catheterisation, and urine analysis and microscopy. <p>Interpretative:</p> <ul style="list-style-type: none"> • Spend time in the relevant Outpatient Clinics, for example - Diabetes Education Centre and be familiar with ambulatory care of patients with diabetes • Spend time in the outpatient service to see patients with endocrinology disorders who are usually not admitted to the hospital, e.g. patients with thyroid disorders, gonadal dysfunction or metabolic bone disease • Understand the interpretation of common general medical, cardiac, respiratory, rheumatology and endocrinology tests.
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	<p>It is advisable to get a clinical and ward work handover from the preceding JMO, and PGY1s to attend start of term orientation with the PMEO and unit representatives.</p> <p>As the MedPod 3 Relief JMO you will be expected to make additions to the discharge summaries of patients within a pod as important events take place over a twenty-four hour period to provide better communication with general practitioners and other external care givers. You will be able to provide up to date information to staff specialists during evening/afternoon ward rounds as required and participate in any bed side teaching conducted by the other specialties within your pod where possible.</p>
SUPERVISION:	<p>Day to day supervision is the responsibility of the supervisor & clinical team within each department, outlined on the relevant term description.</p> <p>Currently the supervisors are:</p> <ul style="list-style-type: none"> • Cardiology A & B – Dr O'Connor & Dr. Fashid • Endocrinology- A/Prof Wilson • Gen Med – Dr Carolyn Petersons, Dr. Swaminathan, Dr. Nicholls & Dr. Bromley • HITH- Dr Sensanayake • Respiratory Thoracic Medicine- Dr. Hurwitz • Rheumatology, Immunology & Dermatology- Dr. Tymms & Dr. Perera <p>The Term Supervisors DPET and DDPET will facilitate the co-ordination of the mid-and-end-term One45 assessments.</p>
STANDARD EXPECTATIONS OF JMO's:	<p>PROFESSIONALISM:</p> <p>It is a requirement that you act professionally in all circumstances while employed by The Canberra Hospital. As a representative of the public medical system, behaviour deemed unprofessional may endanger your employment.</p> <p>Continued professionalism relates to your:</p> <ul style="list-style-type: none"> • Communication and effective participation in a multidisciplinary clinical team, • Your commitment to develop skills in personal learning goals and their achievement through self-directed medical education and supervised practice, • Skills in information technology relevant to clinical practice, collection and interpretation of clinical data, • Endorsing the principles of evidence-based practice of medicine and clinical quality assurance techniques; and • Further understanding of medical ethics and confidentiality, and of the medico-political and medico-legal environment.
	<p>COMMUNICATION:</p> <p>Quality communication skills are expected as standard.</p> <p>This relates to:</p> <ul style="list-style-type: none"> • Patient interaction, • Patient information note taking, • Liaising with patient family members, • Working as member of a team, • Communicating with senior consultants; and • Communicating with other health care professionals regarding longer term patient management.
AVERAGE PATIENT LOAD/ DAY	10-20 patients
AVERAGE WEEKLY OVERTIME	Rostered: 8 hours ; Unrostered: 0

ROSTERING:	<p>Within your pod you will have one week of evening shifts from 1pm – 9.30pm to facilitate a handover period with the day staff and a handover with the night staff.</p> <p>Handover will be conducted at a nominated site where all JMO's for the pod must meet to handover relevant information.</p> <p>A week of night shifts will also occur during your term from 9pm – 8.30am (8.30pm – 8.30am on weekends).</p> <p>Following this ideally you will have 3 days off, 1 rostered ADO, 1 day off, 2 days on call and then return to your normal roster.</p> <p>Alternatively arrangements can be made to allow for leave provided adequate warning is given.</p> <p>This system is designed so that you are part of a team providing 24-hr support for patients within your pod.</p> <p>Thus providing:</p> <ul style="list-style-type: none"> • A consistent and informed education for yourself • Streamlined care for the patients • Increased time with your supervisors, registrars, support staff • More detailed and informed handovers • Relevant electronic discharge/case-mix information more efficiently • Follow up of relevant investigations and consultations more closely with a working knowledge of the various plans for each patient from their respective day teams.
EDUCATION:	<p>Each pod works as a functional unit allowing all JMO's within it to attend the teaching sessions provided by each of the sub specialties when able, as well as your own specialties teaching programme. All JMO's, particularly PGY 1, are required to attend general intern teaching sessions held every Tuesday afternoon. PGY2s are encouraged to attend RMO teaching every Thursday 2-3pm.</p>
ASSESSMENT:	<p>The Med Pod 3 Relief JMO assessment will be conducted by the DPET and DDPET, and will be based on a summary of 3 registrar reports from multiple areas covered during their term. All 3 reports will be required by the Director of Prevocational Education & Training Dr Carolyn Petersons for the End of Term Assessment.</p> <p>The Deputy DPET Dr Sonia Res will see all Med Pod 3 Relief JMOs for the Mid Term Assessment to review progress and any concerns.</p> <p>These interviews are to be booked by the JMO through the MOSCETU office.</p> <p>These Formal assessments and feedback will be completed aligned with the AMC approved formative and summative assessments at mid-term and at end of term respectively on the One45 website. In completing the assessments the Term Supervisors will consult with Consultants, Registrars, Nursing Staff and any other staff members, who have had extensive contact with you.</p>
ADDITIONAL INFORMATION:	<p>The Medical Officer Support Credentialling Education and Training Unit (MOSCETU) is the division within ACT Health that manages a range of functions associated with the ACT medical workforce. This includes;</p> <ul style="list-style-type: none"> • Postgraduate medical education and training, • Junior medical workforce support; and • Advisory services to ACT Health on medical workforce issues. <p>MOSCETU has an open door policy and is located on level 3, TCH (BLDG 2) ph: 6244 2507</p>

Medical PMEO Dr Wei Meng Voon

Term Supervisor Signature:



Date:

30, 11, 17

TIMETABLE: Medical Pod 3 <i>The timetable should include education opportunities.</i> <i>It is not intended to be a roster but rather a guide to the activities that the JMO should participate in during the week.</i>							
	Monday	Tuesday	Wednesday	Thursday	Friday	Sat	Sun
8	<ul style="list-style-type: none"> •Cardiology Clinical Meeting •Endocrinology/MAPU/ RDI/ Respiratory & Sleep Medicine H/O •HITH 8–12 New Patient Admissions 	<ul style="list-style-type: none"> •Cardiology W/R CCU •Endocrinology/MAPU/ RDI/ Respiratory & Sleep Medicine H/O •HITH 8–12 New Patient Admissions 	<ul style="list-style-type: none"> •Cardiology W/R CCU •Endocrinology/MAPU/ Respiratory & Sleep Medicine H/O •HITH 8–12 New Patient Admissions •RDI 8– 9 QA & Unit Meeting 	<ul style="list-style-type: none"> •Cardiology W/R CCU •Endocrinology/MAPU/ RDI/ Respiratory & Sleep Medicine H/O •HITH 8–12 New Patient Admissions 	<ul style="list-style-type: none"> •Cardiology W/R CCU •Endocrinology/MAPU/ RDI/ Respiratory & Sleep Medicine H/O •HITH 8–12 New Patient Admissions 	•Endocrinology Clinical H/O	
830	<ul style="list-style-type: none"> • RDI W/R Rheumatology •Cardiology 8.45 W/R •MAPU 8:30-1030 Teaching W/R 	<ul style="list-style-type: none"> •RDI W/R Rheumatology •MAPU 8:30-1030 Teaching W/R 	•MAPU 8:30-1030 Teaching W/R	<ul style="list-style-type: none"> •RDI W/R Rheumatology •MAPU 8:30-1030 Teaching W/R 	<ul style="list-style-type: none"> •RDI W/R Rheumatology •MAPU 8:30-1030 Teaching W/R •Respiratory & Sleep Medicine 8.30–9.15 Journal Club 	•MAPU W/R	•MAPU W/R
9	<ul style="list-style-type: none"> •Endocrinology Outpatient Clinic •Respiratory & Sleep Medicine 9 – 10.30 W/R 	<ul style="list-style-type: none"> •RDI Paediatric Immunology Clinic •Endocrinology Outpatient Plus Antenatal Clinics •Respiratory & Sleep Medicine 9– 10.30 Bronchoscopy 	<ul style="list-style-type: none"> •RDI 9– 10.30 Combined Rheum W/R •Endocrinology Outpatient Clinic 	<ul style="list-style-type: none"> •Endocrinology Outpatient Clinic •Respiratory & Sleep Medicine W/R 9– 10.30 	•Endocrinology Registrar Round		
930					•Respiratory & Sleep Medicine 9.30-11 Bronchoscopy		
10		•Respiratory & Sleep Medicine 10-11 W/R		•RDI Dermatology OPD (Alternate Weeks)			
1030			•RDI 10.30–11 Fortnightly Rheumatology Radiology Meeting				
11							
1130							
12	•Respiratory & Sleep Medicine 12– 1 Radiology	<ul style="list-style-type: none"> •MAPU Radiology Meeting •HITH GP G/R– Alternate Tuesdays (Check Time With Consultant) 	<ul style="list-style-type: none"> •Cardiology G/R •Endocrinology G/R •MAPU 12– 1:15 G/R •HITH 12 – 1:15 G/R •RDI G/R 	<ul style="list-style-type: none"> •RDI Dermatology CPC (3 Monthly) •Cardiology 12– 1 Mini G/R •HITH Radiology/Infectious Diseases X-Ray Meeting •Respiratory & Sleep Medicine 12-12:30 JMO G/R 	•Cardiology Tutorial		
1230	<ul style="list-style-type: none"> •Endocrinology W/R •MAPU Gen Med Journal Club 	•Endocrinology Weekly Clinical Audit 1245		•HITH 1230–1.30 Clinical Infectious Diseases Meeting			
1300	<ul style="list-style-type: none"> •Respiratory & Sleep Medicine 1-2 Joint Oncology Meeting • RDI Rheumatology OPD Clinics 		<ul style="list-style-type: none"> •Respiratory & Sleep Medicine 1-3 Bronchoscopy •RDI Rheumatology OPD Clinics 	•RDI Rheumatology OPD Clinics	•RDI Rheumatology OPD Clinic (Alternate Weeks)		
1330	• HITH 1.50– 2.15 with Director	•Endocrinology Journal Club/X-Ray Meeting	•Endocrinology Clinical Science Lecture		•Endocrinology O/P Clinic (check time with consultant)		
1400	<ul style="list-style-type: none"> •Endocrinology W/R •HITH 2.15 ID Consult W/R 	•Endocrinology Outpatient Clinic/ Adolescent Clinic		<ul style="list-style-type: none"> •Endocrinology W/R • HITH ID Consult W/R 			
1430							
1500		•JMO Teaching Session 3-4.30pm		•MAPU 3–4 Gen Med Teaching			
1530							
1600	•MAPU 4-5 Afternoon Round	•MAPU 4-5 Afternoon Round	•MAPU 4-5 Afternoon Round	•MAPU4-5 Afternoon Round	•MAPU 4-5 Afternoon Round		
1630							
1700	•Cardiology Cardiac Catheter Meeting						

Timetable is not indicative of completion times unless stated. W/R Ward Rounds H/O Handover G/R Grand Rounds RDI- Rheumatology Dermatology Immunology