

# South Manchester GP Training Programme

# **JOB DESCRIPTION – Emergency Medicine**

Job Title: GPST1 and GPST2

**Speciality:** Emergency Medicine

**Duration of Post:** 6 months as part of the GP Specialist training

programme

Base: UHSM, Wythenshawe Hospital

Responsible to: Consultants in Emergency Medicine

Working Hours: 48 hours

On-call: Full shift





#### **Duties of the Post**

GP Specialty Trainees are responsible to the Consultants and the Trust for:

- The initial management and primary care of patients presenting in the
  Department, however referred. It is expected that such work will be carried
  out to the highest clinical standards at all times and in accordance with
  accepted good medical practice and the various clinical policies of the
  Service.
- Arranging for the follow-up of patients they treat in the Department including
  the follow-up of any investigations performed and the taking of appropriate
  action in accordance with the results of these.
- Transmission of relevant clinical information on patients to other medical, technical and nursing staff either within the Department, within or without the hospital or at any other hospital, regarding patients under care or those referred to other places for further treatment or follow-up.
- Initial management of fractures including reduction and immobilisation.
- The performing of minor surgical procedures and operations.
- Working with nursing staff in matters relating to the treatment of patients.
- Maintenance of adequate and proper records on patients for both clinical and audit purposes (including data input into the computer system) and for the furnishing of letters, reports and other documentation as required for medical,
  - legal and statutory purposes.
- Instruction of nursing staff, FY1, FY2 and, from time to time, medical students and ambulance personnel under training within the Department.
- Coding diagnostics and treatment of patients on the information system

## **Clinical Governance**

Undertake induction and mandatory training, including completion of the Educational Agreement.

In accordance with the Educational Contract, take part in audit.

# **Teaching**

Manchester undergraduates are attached to the unit. The post holder is encouraged to teach them informally, and give them opportunities to clerk patients and present their histories.





# **Educational Aspects of the Post**

### Purpose of the post

#### **GPSTs** must:

- Be able to work effectively in teams and co-ordinate care
- Be able to prioritise problems and establish a differential diagnosis
- Make the patient's safety a priority
- Consider the appropriateness of interventions according to patient's wishes, the severity of the illness and any chronic or co-morbid diseases
- Be able to make mental state assessments and ensure patient safety
- Accept responsibility for action, at the same time recognising any need for involvement of more experienced personnel
- Keep their resuscitation skills up to date this would normally involve a yearly certified resuscitation course
- Act calmly in emergency situations and follow agreed protocols.

This post will provide GPSTs with experience and training to help them develop these skills and knowledge base.

The learning objectives are based on the new General Practice curriculum where clear learning outcomes are stated. The areas covered are from the RCGP curriculum statement 7: Care of Acutely III People

#### **Educational content**

The post holder will have a named clinical supervisor who is accountable for the overall educational experience of the job.

The post holder will also attend the weekly teaching programme organised by the General Practice Primary Care Medical Educator.

The post holder will participate in a continuing programme of education in Emergency Medicine within the hospital department. This will be encouraged by various educational methods including self directed learning, tutorials, random case analysis, project work, audit, case studies, computer based learning and clinical practice.

The post holder will be entitled to study leave in accordance with national and local guidelines.

The post holder should record progress in their e-portfolio.



# The Appraisal and Educational Assessment

Trainees should be appraised at the beginning of their job, at 12 weeks and at the end of the job to provide educational feedback and suggest ways forward.

Educational Assessment should be based on the core curriculum.

At the end of the post the clinical supervisor will complete the supervisors report in the trainee's e-portfolio. The trainee should give feedback on the training post.

# <u>Learning Objectives for GPST Emergency Medicine Post</u>

Areas of curriculum to be covered -

- 1. Be competent in assessing patients presenting with the symptoms outlined below including:
  - Assessing the patient's clinical safety/stability: ABC principles
  - Logically and systematically gathering information
  - Generating an appropriate differential diagnosis
  - Appropriately choosing investigations
  - Using the information gathered and investigation results to test the differential diagnoses and to decide on the most likely diagnosis
  - Chest pain
  - Dyspnoea
  - Haemorrhage
  - Shock
  - Wheeze
  - Stridor
  - Choking
  - · Convulsions or fits
  - Reduced level on consciousness
  - Confusion
  - Threatened self-harm
  - Delusional states
  - Abdominal pain
  - Vomiting
  - Diarrhoea
  - Headache
  - Acute visual loss
  - Non-accidental injury in children
  - Acute back pain
  - Acute musculoskeletal pain
- 2. Be competent in the immediate management of the conditions outlined below including:
  - Being able to explain the diagnosis to the patient
  - Being able to describe and implement appropriate management plans





- Being able to discuss the management plan with the patient
- Taking into account the patient's (and carer's) view's and belief's and to manage the
  patient ethically
- Exploring and checking the patient's understanding of what has taken place
- Working effectively within the team to manage the patient's condition
- 3. Being able to refer to other secondary care specialties or back into primary care
  - Anaphylaxis
  - · Acute coronary syndrome
  - Arrhythmias
  - Heart failure/pulmonary oedema
  - Pulmonary embolism
  - Asthma
  - COPD
  - Pneumonia
  - Uncontrolled diabetes
  - Appendicitis
  - Bowel obstruction and perforation
  - Peptic ulceration
  - · Gallstone disease
  - Pancreatitis
  - Dissecting aneurysms
  - Limb ischaemia
  - Ectopic pregnancy
  - Miscarriage
  - Meningitis and septicaemia
  - Common fractures and injuries
  - Sciatica
- 4. Be able to perform and interpret an ECG
- 5. Be able to suture a wound
- 6. Be able to perform cardiopulmonary resuscitation
- 7. Be able to use a nebuliser
- 8. Be able to control a haemorrhage
- 9. Be able to make coherent and comprehensive medical records
- 10. Be able to describe the options for communicating with the Primary Health Care Team and appropriately use these in patient care

