

Job Descriptions from a FY2 Trainee's Point of View.

Acute Medical Unit

Who will I work with?

In terms of SHO's AMU is generally currently staffed by CMT/ACCS trainees. During days there are around three F1's and five SHO's, with at least two SpR's and one Consultant, so for a unit of 50-odd beds it is well supported. Obviously being the acute medical area there are a lot of allied professionals and indeed relatives milling around most of the working day, and a higher proportion of nurses.

What are the hours like?

Standard working hours are 9-5, which you can just about stick to. There are various other shifts including mid (11-7), late (1-9:30), long late (11-9) and early's (8-4) as well as periodic night shifts (9-10, or however long the post-take round takes!).

What might a typical day involve?

For 8-4 or 9-5 shifts you look after one of the bays 1-3 or AMA (with the bonus of an F1 if you're on AMU 2 or 3). If you start at 8 you shadow the post-take Consultants for the first hour (whichever bays they go) to make a list of jobs to handover. Then at 9 you need to make up a patient list of your bay, work out who will need to be seen by yourself (i.e. 'AMU team') or who has already been post-take for the day or is under a specialist team. This is the tedious bit. Then just crack on with the jobs, bloods as usual. Depending on how many have already been seen, the workload is therefore quite variable. It is also a little more unpredictable than the wards as there are more sick patients and more interruptions from relatives etc so you need to be flexible. AMA essentially involves a little of the above and a lot of arranging scans / reviews etc for the Sisters.

The other shift patterns are clerking shifts where you continually see take patients.

AMU also has a larger proportion of on call work than the standard medical rota up on West Wing (more F/G cover evenings, more nights etc; although no long shifts at weekends).

Being an acute area you have greater opportunity to get involved with procedures, managing relatively more sick patients, the 'take', discharges etc.

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What teaching/learning opportunities are there?

The usual Foundation teaching sessions on Tuesdays; to date no extra teaching sessions that I am aware of, although a couple of SHO's were planning on arranging teaching sessions amongst themselves.

There are relatively more students floating around so more opportunity to do teaching yourself.