

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

### **Cardiology**

Team based – patients spread over E 2, 3, 4. Half way through placement switch to gain experience in different team - have to cross cover for S/L, A/L, nights etc.

Handover meeting every morning at 8.45 on E3, Nurse from each ward will go through patients – SHOs, SpRs and bed managers present to help facilitate discharge planning.

As well as time on ward spend 1-2 weeks on CCU and also on cardiac short stay (CSSU)

### **CSSU**

Elective admissions for angiogram, pacemaker related procedures e.g. box change and ablations. Need to consent, clerk, bleed patients, then do HMR post procedure. Many of the patients have already been pre-assessed and there is a nurse specialist to help too (they're really good!)

Every other Friday there is a DCCV list which is done by the SHOs, don't worry there's an anaesthetist too! The day before the DCCV list patients will come into CSSU to be clerked/consented/bled and to check still in AF/atrial flutter.

### **CCU**

Days are 8am to 8pm. Good experience of insight into management of acutely unwell cardiology patients and best opportunity to gain experience with practical procedures e.g. central lines, arterial lines

Every other week there are also a couple of clinics that SHOs do with the consultant – normally Micha (SpR who organises SHO rota) rotates the SHOs in turn so all get experience of doing clinics.

### **Teaching**

- SHO teaching every Wednesday at 1pm
- MDT – combined medical and surgical every Monday morning
- Case presentations – cardiology/ cardiothoracics/ paediatric cardiology every Friday morning
- Echo meeting Thursday lunchtime

**July 2010**

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

Overall cardiology has been good, the SpRs are very friendly and supportive and the work load is very manageable. Taking A/L and S/L is normally no problem, but only 2 SHOs off at any one time, so get your requests in early. The only problem is that since there are no FY1s, you do end up doing all ward jobs and lots of HMRs!