

**ALL TIMES ARE GUIDE –PLEASE REFER TO JUNIOR
DOCTORS HOURS TIMETABLE DOCUMENT ON INTRANET
FOR DEFINITIVE STATEMENT**

WEEKEND DUTIES FOR ECU REGISTRAR

Friday: All ECU FY1S liaise with nurse in charge and reg to identify suitable patients for weekend review. Registrars please ensure this happens. For complex cases it is helpful to discuss with the SpR as well as completing the handover document.

Saturday:

The main priorities of the shift are to:

1. Review any patients requested by teams or by ward nurses on request on the day.
2. Identify and manage any patients that may have deteriorated overnight
3. Briefly review all transfers from Friday to ensure are ok (you will usually have been oncall on the Friday too so will know which transfers you need to see).
4. Effectively hand over problem cases to the medical teams for Saturday pm/Sunday to support the FY1s.

1400: Start of shift.

A list of patients is on the S drive on the wards under elderly care and in the weekend handover file. It is sensible at the start of the shift to visit all wards to identify patients who have deteriorated or required overnight review to prioritise duties. The FY1 should have already done this in the morning. Ideally all transfers to ECU from Friday should be reviewed on Saturday morning but they are often bleeped a lot so this is rarely the case. The elderly care FY1 also has to cover Hillyers ward as well as the whole 9th floor.

All Wards

Do a ward round of the 4 wards on the 9th floor with the on-call F1 to review all admissions from Friday, all patients on the SpR weekend review list and any patients the nurses are concerned about. Reviewed patients to have a clear management plan documented and handed over to Nurse in charge.

Liaise with FY1 to ensure no unidentified problems.

If you feel any patients require registrar review later on Saturday or on Sunday then phone the ward cover medical SpR (2291) to hand over.

Update the file on the S drive.

1800: End of shift.

DUTIES of ECU SpR - WEEK DAYS

09.00 – Start of shift –

Collect ECU reg on call bleep from ECU library (code 1108) on Henry ward (bleep 2631), Identify the FY1 for ward cover and admissions (helpful to know absences early!). Note there is no bleep for the admissions FY1. If you are off site in the morning get someone else to pick up the bleep. The majority of transfers to ECU are now via the OPAL team. We do not routinely admit patients directly from A&E (exceptions can be made eg in 'failed discharge' – at the discretion of the SpR and/or consultant on call). Some patients will be referred via the OPAL Consultant in CDU, or from Consultants visiting intermediate care facilities. These should be treated as new hospital admissions.

If GPs call the bleep for an admission, direct them to send the patient to A&E (as even medicine do not get the referrals directly, they all go via A&E). Surgical referrals are now all seen via the POPS team, and should not be referred to the on-call bleep. Transfers to ECU from surgery should have been approved by the relevant Consultant:

Dr Dhesi:	Page, Northumberland & Luke Wards
Dr Dockery	George Perkins, Alan Apley Wards
Dr Morrison	Florence & Ashton Key (Uro) wards (Guys)
Dr Morrison	Elective Orthopaedics, ENT/Head & Neck

Medical patients under 65 yr (outside of OPAL remit), and those under sub-speciality care (Cardiology, Dermatology etc) are referred to ECU SpR. If you feel they need transferring to the ECU always discuss this with the on-call consultant before transferring. Complex cases should be reviewed on your own consultant ward rounds, or by the OPAL consultant.

13.00 Liaise with OPAL (bleep 2779 or 2778) at lunchtime for list of transfers and up to date bed status. They will know who is a priority to see, and will warn if patients are 'borderline' (ie maybe too sick to transfer).

See transfers prior or on transfer to ECU. Allocate some of the transfers to the admitting F1 and see the rest yourself. Review F1 cases after they have been seen.

1945 Hand over ECU FY1 on ward cover (bleep 0525) anyone that the night team need to review/be aware of.

20.00 – end of shift

Updated September 2010
Appendix A