Foundation Job Description

		Programme No. (e.g. L006 OR T102) Can be found on the Trent/LNR Allocation Spreadsheet		
LNR		L005/L008/L032/L036		
Grade (Delete as appropriate)	Specialty:		Subspecialty (If appropriate):	
F1	Renal M	ledicine		
Site:		Trust:		
Leicester General Hos	pital	Univerisity Hospitals of Leicester NHS Trust		

Main duties:

The FY1 will be part of the multiprofessional team providing in patient care to patients with the full range of nephrological diseases in the John Walls Renal Unit. The FY1 doctor will undertake daily ward rounds with other members of the nephrology team and be involved in assessing and managing patients with acute kidney injury and the complications of chronic kidney disease and endstage kidney disease. The FY1 will be expected to perform bedside procedures commensurate with their competences. The FY1 will also take part in out of hours work under the supervision of a higher specialist trainee in Nephrology.

Example Timetable

For example: W/R (Outpatients), MDT, Meetings, X-Ray Conference etc

	Mon	Tues	Weds	Thurs	Fri
AM	Ward Work	Registrar Ward Round	Registrar Ward Round	Consultant Ward Round	Registrar Ward Round
Lunchtime	Medical X-Ray Meeting		FY1 Teaching		
PM	Consultant Ward Round	Ward Work	Ward Work	Academic afternoon	Ward work

Educational Activities:

Educational Programme

Teaching ward rounds One consultant ward round a week is designed as teaching as well as a service round.

Seminars/tutorials Thursday academic afternoon in Nephrology

Renal biopsy meeting (Thursdays 8.45 to 9.30am)

Weekly educational seminar/monthly audit meeting (Thursdays 9.30am)

X-ray meeting (Thursdays 11.45am)

X-ray meetings Weekly nephrology x-ray meeting (Thursday 11.45 to 12.30pm)

Audit meetings Monthly audit meeting (Thursday 9.30am)

Multidisciplinary audit meetings quarterly (see programme) There is a commitment to attend 80% of these meetings)

Clinical Skills

During the attachment to nephrology, the Foundation Year 1 doctor will gain confidence and some competence in:

- Investigation and treatment of acute nephrological conditions, fluid and electrolyte disorders, glomerular diseases, hypertension and related disorders.
- Common complications of renal failure including CAPD peritonitis, haemodynamic instability on haemodialysis.
- Investigation and treatment of chronic renal failure.
- Investigation and treatment of dialysis related complications.
- Indications for renal biopsy.
- Indications, applications and complications of haemodialysis and CAPD.
- Recognition and treatment of general medical problems complicating dialysis.
- The FY1 will have some knowledge of; Calcium and acid-base abnormalities, Assessment of acute uraemic emergencies, Preparation and planning for renal replacement therapy, Assessment of complex uraemic emergencies particularly in the HDU setting, Initiation of immunosuppressive therapy.

Practical Skills/Operations

By the end of the attachment the FY1 should have some experience of/or observed (depending on prevalent case mix):

Haemodialysis, Peritoneal dialysis, Pleural aspiration, Chest drain insertion, Lumbar puncture

By the end of the attachment the FY1 should have observed:

Femoral vein cannulation (Seldinger technique)

Internal jugular vein cannulation (Seldinger technique)

Renal biopsy

Other Comments (if appropriate):

Informal learning opportunities

All parties agree that much valuable learning takes place informally on ward rounds. Service load will not be so great as to preclude this activity. Good library facilities are available.

Attendance at "shared learning" educational sessions arranged by Renal Professional Development Nurse is strongly encouraged (details of sessions will be circulated).

Research

The department is actively involved in many areas of research. It would be possible to arrange a short study/case report during the post and post holders are encouraged to discuss this with their Clinical and Educational Supervisors as soon as they commence the post (or preferably make contact prior to starting the post to plan a short study).

Disclaimer: Please note that the placement information provided is subject to change.