

IMG Initiatives at NHS Grampian

Your existence for your team and patients:

1. Do not worry much about learning medicine during initial few weeks. Focus on your day-to-day role.
2. Remember for following points you are not alone. You are a part of team. Hence, you will be doing a fraction of following tasks. In case if work is in excess, you can speak to your fellow team members and divide the tasks for that day.
3. Learn early about discharge plan of patient, prepare discharge letter (CDD) and send letter to pharmacy for medications accordingly. In case if during round you come to that patient is being discharge then seek for any additional advice for patient from senior (e.g. changes in medication, follow up plan, advice for GP or cc'ing letter to any department etc.).
4. For day-to-day medicine and clinical conditions, pay attention during ward or discussions of team.
5. Get comfortable using the IT system - know how to request, print labels, collect in system and chase investigations, how to access previous documents, how to send group & save or crossmatch for the blood bank. Make sure PACS system (software for viewing radiological images) is working for you, and you know how to access the scans.
6. Let the team know that you are new to the system and might need more support during your first couple of weeks.
7. During the first couple of days make sure you get to know your ward - know where the equipment is kept, including phlebotomy trolley, ECG machine, resuscitation trolley, or blood gas machine etc.
8. Know how to use intra-net to review the local guidelines for any condition.
9. A big part of the job is participating in the ward round - it is important to keep accurate notes and to create a plan for every patient. NHS Grampian uses paper records in most of the wards. In the UK, there is no set way to write in the medical notes. However, a good guide can be found at <https://mindthebleep.com/2020/05/surviving-ward-rounds.html>
10. During the medical rounds, create a jobs list and make sure you put all the jobs there - it is easy to forget if you don't down.
11. Make sure review the bloods of patient, and make changes in plan as appropriate (like if potassium levels are fine then check if patient is on potassium, and stop medications, or if patient has developed AKI then hold or stop medications which could cause or worse kidney functions) or in case of confusion discuss with senior.

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12. Where necessary, order bloods for following day.
13. It is important to know who to escalate patient appropriately. Especially if you are on a long shift, make sure you know who your registrar/consultant for the evening is and that you know how to contact them. You can contact either by beep or via switchboard. Feel free to ask questions and make sure you speak up if there are not clear to you. In case if patient is sick or has been sick the discuss about escalation plan before the senior team members leave.
14. You can hand-over only those patients who are very sick with high news to hospital at night and try to make sure that you have escalation plan, and you pass on to the night team.
15. In case if you may have to refer a patient for consultation with other department or request for extra investigations (including scans etc.), make sure to ask reg/consultant during round regarding purpose of investigations (like what is your question) - it's good for your learning and for very good referral. Also, before referral have a quick review of patient's file, investigations and your departments plan.
16. Make sure you know how to look at the intranet guidance and how to access rota Watch for referrals to the other departments.
17. Familiarize yourself with admission booklet and different forms etc.
18. Remember home is not always the discharge destination for patient and patient may be needing some additional support upon discharge (you can find the details in the file of patient among nursing notes or speak to nursing team regarding these details).
19. Get your ALS certified. Make sure you are face fitted.
20. Everyone's job from junior doctors to seniors, and from nurses to healthcare support staff, is different and very valuable. Always approach everyone with humbleness with an attitude to learn and serve with similar enthusiasm.

Your existence for yourself:

1. Learn early that who is your supervisor for that rotation and for the whole year.
2. Discuss your educational objectives and areas of weakness and seek for advice.
3. Discuss about your CREST form, if you need it to be signed off.
4. Know what requirements for CREST are form and learn that what are protocols in your trust to fulfil those requirements.
5. You may need to know what are Mini-Cex or CBDs or MSF etc.

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6. In case if you know that a QI project will be needed for your training application, then after few months (once you settle down), check in your department what are options for QI project.
7. If any exam will help you for your training application, then plan for your exams once you settle down.
 1. Plan your leaves early.
 2. Get yourself registered with for ALS urgently. (Send email to: marie.walker-greenwood@abdn.ac.uk; Cc to: jerry.morse@abdn.ac.uk).
 3. Get yourself face-fitted and find FF3 mask of that fits your face. Email to gram.face-fit-appointment-hub@nhs.scot.

We all have been through this stage. If we could survive, then you certainly would. Keep yourself calm. Always, **ASK if you have any question or query. People expect from us to ask questions. Only question which is bad is the one kept inside the mind.