

## Monash Health Prevocational (Intern/HMO) Unit Information

### Unit: General Medicine, MMC

#### Contents

.....	1
Overview of Unit: .....	1
Orientation.....	1
Roster .....	2
Supervision of JMS training.....	2
Key staff .....	3
Who to contact for a sick patient: .....	4
Contacts for leave, over time and Kronos .....	4
Other Useful contact numbers, access codes or passwords .....	4
What do you expect the JMS to learn and manage? .....	4
Common conditions managed by unit.....	4
Tools to assist in assessing a patient.....	4
Common procedures found on prompt.....	5
Potential clinical emergencies .....	5

#### Overview of Unit:

Monash Medical Centre, Clayton General Medicine operates in a tertiary metropolitan teaching hospital. It consists of five inpatient units, General Medicine Alpha, Bravo, Delta (Acute Care of the Elderly), Echo and Omega. Each of the five units is overseen by a consultant who undertakes daily ward rounds. Each unit comprises of a medical registrar, HMO and an intern. Patient numbers vary considerably depending on the volume of referral from the emergency department. Alpha and Bravo units are geographically co-located on ward 41 while, Echo and Omega are on ward 42. The Acute Care of the Elderly Unit also known as Delta will have patients between ward 41 and 42. Patients on other outlier wards evenly distributed between all five units.

During the COVID-19 pandemic, Omega may be split into COVID Omega and non-COVID Omega teams. Certain wards, including wards 41 or 42, may also be deemed COVID wards and non-COVID General Medicine patients may become outliers on other wards.

#### Orientation:

- A detailed orientation manual is emailed to all interns, HMOs and registrars prior to commencement.
- On site orientation is provided on day one of the rotation.
- Key prompt guidelines are provided in the orientation manual

Document last updated (date) by (name)

- Please refer to Monash Health Prompt for all policies and guidelines.

### Roster:

- Rosters are provided via the Medical Workforce Unit and located in the R'drive
- Intern will have a mixture of day shifts working within a medical unit on weekdays and rotations through after hours and weekend shifts.
- HMOs in the BPT stream will rotate through medical units day shifts and after hours shifts
- HMOs in the general stream, will rotate through medical unit day shifts, after hours and night shifts
- There are rostered on call shifts
- There is minimal rostered overtime included in the General Medical Rosters with unrostered overtime paid when required with approval to be obtained from the HOU.

Weekly Timetable of Teaching: (most meetings virtual via Teams during COVID-19 pandemic)

<b>HMO Teaching</b>	Tuesday	1230 - 1330	
<b>Radiology Meeting</b>	Wednesday	1100 - 1200	Online via Teams
<b>Grand Rounds</b>	Wednesday	1230 – 1330	Online via Teams
<b>Journal Club</b>	Thursday	1240 – 1340	Online via Teams
<b>Intern Teaching</b>	Thursday	1230 – 1330	
<b>General Medicine Unit Meeting / Mortality and Morbidity Meetings</b>	Friday	1240 – 1340	Online via Teams
<b>Rostered ½ days</b>	Half days are included in the <b>intern</b> roster. Interns are expected to work with their clinical team to ensure they take this during the week. If they are unable to take this time due to work demands JMS should submit an overtime forms. The after hours interns are allocated to 7 days on and 7 days off in their roster. Please note your start times. All HMOs are allocated to a 7 days on and 7 days off roster, please note your start and end times.		

### Supervision of JMS training

#### In hours

- Supervision is provided by the Unit Consultant and Registrar
- Consultant ward rounds occurs daily

#### After Hours

Document last updated (date) by (name)

- There is a registrar rostered to provide support and supervision to the cover HMO / intern during after hours and night shifts.
  - Evening Registrar (Pg 120)
  - Night Registrar (pg 4310)
- There is a cover consultant rostered to provide support at all times. The consultant can be contacted via switchboard

Care has been taken to allocated HMOs and interns to the same unit to facilitated continuity of care and supervision. Ensure that you allocate time to meet with your unit consultant to receive regular feedback and complete required assessments

### Clinical responsibilities and tasks:

Clinical responsibilities and tasks are clearly explained in the orientation information.

### Key staff

<b>Unit</b>	General Medicine		
<b>Site</b>	Monash Medical Centre, Clayton		
<b>Contacts</b>	<b>Name:</b>		<b>Contact:</b>
	Service Director	Dr Stephanie Jones	Stephanie.jones@monashhealth.org
	Unit Head	Dr Sumi Bhaskaran	Sumitha.bhaskaran@monashhealth.org
	Intern Supervisor	Dr Shiny Stephen	Shiny.stephen@monashhealth.org
	HMO Supervisor	Dr Xiu Xian Chia	XiuXian.Chia@monashhealth.org
	Operations Manager / Rosters	Monash Doctors Operations	MonashDoctors_Operations@monashhealth.org
	Nurse Manager Ward 41	Sally Charlton	95943262 Sally.Charlton@monashhealth.org
	Nurse Manager Ward 42	Darren Gray	95943367 Darren.Gray@monashhealth.org
	Administration	Jaclyn Guzzardi	9594 1311

### Who to contact when you are sick:

- Ring as soon as you realise you are unable to work (contact Medical Workforce)
- Inform your consultant and registrar as soon as possible
- Forward medical certificates and other documentation to Monash Doctors.

### Who to contact for a sick patient:

In hours: Contact the medical registrar of your team. If the registrar cannot be contacted, contact the team consultant

After hours: Contact the medical registrar. If the registrar is not available, the on call consultant can be contacted via switchboard.

Both in hours and after ours: In a clinical emergency, if concerned, call a METcall to escalate.

### Contacts for leave, over time and Kronos

	contact name
Annual leave changes	<a href="mailto:MonashDoctors_Operations@monashhealth.org">MonashDoctors_Operations@monashhealth.org</a> (ext 44896)
Sick leave	<a href="mailto:MonashDoctors_Operations@monashhealth.org">MonashDoctors_Operations@monashhealth.org</a> , Tanya Pikines and unit Registrar and Consultant
Personal leave	<a href="mailto:MonashDoctors_Operations@monashhealth.org">MonashDoctors_Operations@monashhealth.org</a> and unit Registrar and Consultant
Overtime claims	Dr Sumi Bhaskaran (please see in person to have claim form signed)
Kronos manager	<a href="mailto:MonashDoctors_Operations@monashhealth.org">MonashDoctors_Operations@monashhealth.org</a>

### Other Useful contact numbers, access codes or passwords

General Medical Liaison Nurse – Lou McCracken and Sam Tanner (0427905194)

Ward 41 – ANUM – 0435659215

Ward 42 – ANUM – 0481917091

ED ANUM – ext 43875; SSU ANUM – ext 21505

### What do you expect the JMS to learn and manage?

Common conditions managed by unit:

- Sepsis/pneumonia/UTI/cellulitis
- Acute kidney injury
- Pain management
- Exacerbation of chronic conditions such as heart failure, COPD
- Fall/syncope for investigation
- Delirium/dementia workup and management
- Social issues impacting discharge planning

Tools to assist in assessing a patient:

- 4AT for delirium assessment

Document last updated (date) by (name)

- CURB-65 for pneumonia severity
- Therapeutic Guidelines
- Up to Date
- MIMS
- Australian Medicine Handbook (AMH)

Please access above tools via intranet or internet search.

#### Common procedures found on prompt (with links)

Please familiarise yourself with the following prompt guidelines prior to commencing general medicine at MMC.

- Code Grey Medical Response / Acute Behavioural Disturbance Management  
<http://prompt/Search/download.aspx?filename=1824321\1824323\24417370.pdf>
- Venous Thromboembolism Assessment Guidelines  
<http://prompt/Search/download.aspx?filename=18740060\18740064\46715946.pdf>
- Partnered Pharmacist Medication Charting  
<http://prompt/Search/download.aspx?filename=1824295\1824296\24664501.pdf>
- MMC Emergency Department Direct Admission to Kingston Centre Procedure  
<http://prompt/Search/download.aspx?filename=27248204\27248212\43721036.pdf>
- [Sepsis in Adults : Recognition and Response](#)
- [Hospital Care for Adult Patients with COVID-19](#)

#### Potential clinical emergencies

Below are some common clinical emergencies JMOs will manage. Appropriate escalation for all clinical emergencies are to contact the team registrar, or to call a METcall if METcall criteria are met OR if you are concerned and believe a METcall is indicated.

Below are linked PROMPT guidelines where available for that condition. Reliable resources to refer to include Therapeutic Guidelines and UptoDate.

- Shortness of breath/dyspnoea
- [Hyperkalemia Treatment](#)
- [Hypoglycaemia Diagnosis and Management \(Adult\)](#)
- Low urine output
- [Sepsis in Adults : Recognition and Response](#)
- Chest pain
- [Seizure \(Adult\)](#)
- Delirium/code greys - [Delirium and Dementia in hospital; Acute Behavioural Disturbance](#)

For information on this unit collated by your peers see the rover

Document last updated (date) by (name)