EMS = Emergency General Surgery | UGI = Upper Gastrointestinal Surgery

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| Surgical team On-call information |
| Meeting | **Time & location** | **Attendees** | **Objectives** |
| Start of Week handover | Monday morning(or the first working day of the week if Monday is Bank Holiday)08:00Astor Seminar Room(KSC, 4th floor) | On-call Consultant for that weekOn-call SpR, SHO & FY1 for MondayWeekend on-call team (SpR and Night SHO)EMS firm ward team (SpRs, SHOs, FY1s)Representatives from UGI and Colorectal firms | Discussion of newly admitted patients before post-take ward roundReview of previously admitted patients.Allocation of patients to EMS, UGI or Colorectal firmsJobs allocation |
| Morning handover | Weekdays and Weekends08:00Astor Seminar Room(KSC, 4th floor) | On-call Consultant of the dayOn-call SpR, SHO & FY1s of the dayPrevious night on-call team (SpR and Night SHO)EMS firm ward team (SpRs, SHOs, FY1s) | Discussion of newly admitted patients before post-take ward roundReview of previously admitted patients.Jobs allocation |
| Evening handover  | Only during regular Weekday 17:00Astor Seminar Room(KSC, 4th floor) | On-call SpR until 17:00On-call SpR after 17:00(if SpR is not doing 24h)Day on-call SHOOn-call FY1sEMS firm ward team (SpRs, SHOs, FY1s) | Going through the inpatient list and handover jobs for evening/nightFlagging of unwell patients to the on-call team after 17:00 (SpR, SHO, FY1s) |
| Night handover | Weekday and Weekends 20:00Astor Seminar Room(KSC, 4th floor) | On-call SpRDay on-call SHONight on-call SHODay on-call FY1s | Going through newly admitted and unwell ward patients Handover from FY1s to Night SHO (e.g. jobs, unwell patients to be aware of)Handover from Day SHO to Night SHO (e.g. patients to be seen in A&E, pending jobs) |

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| Surgical lists |
| List | **Overview** |
| EMS list | Include EMS patients during regular weekdaysLocation: *GSurgery Department Drive → Department folder → Emergency folder → Year* |
| UGI list | Include UGI firm surgical patients for weekdays.Location: *GSurgery Department Drive → Department folder → Upper GI folder → Year* |
| Colorectal list | Include Colorectal firm surgical patients for weekdays.Location: *GSurgery Department Drive → Department folder → Colorectal folder → Year* |
| Weekend Mega-list | Includes all surgical patients from the three firms (EMS, UGI, Colorectal)Used by the on-call team over the weekend.Location: *GSurgery Department Drive → Department folder → Emergency folder → Year* |

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| Surgical SpR roles |
| Role | **Contact details** | **Availability** | **Responsibilities** | **Notes** |
| On-call SpR on weekdays |  909 bleep until 20:00Via switchboard after 20:00 | 08:00 to 08:00 next day (24 hours) | * Attend the handover at 08:00.
* Do the post-take ward round with the on-call EMS consultant.
* Briefing with CEPOD theatre team.
* Review patients in A&E who need senior review.
* CEPOD (Theatre 7) list
 | * SpR on-call are 24 hours.
* On-call starts at 08:00 by attending the handover in Astor Seminar Room where SpR receive or handover the bleep.
* In case if UGI or Colorectal SpR is allocated to the on-call, EMS team cover the on-call from 08:00 to 17:00.
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| On-call SpR on Weekends | 909 bleep until 20:00Via switchboard after 20:00 | 08:00 Saturdayto 08:00 Monday(48 hours) | * Attend the handover at 8:00.
* Do the post-take ward round with the on-call consultant.
* Briefing with theatre team.
* Review patients in A&E who need senior review.
* CEPOD (Theatre 7) list
* Review unwell patients in the ward.
 | * Weekend on-calls are 48 hours.
* It starts at 08:00 am on Saturday and ends at 08:00 on Monday in Astor Seminar Room.
* It can be covered by a SpR from any firm.
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| EMS SpR | Personal bleep or via switchboard | 08:00 – 17:00 | * Attend the handover at 08:00.
* Do the ward round with the surgical SHOs and FY1s.
* Go through the list afternoon.
* To be in contact with FY1s and SHOs and review unwell patients.
* Escalate to on-call surgical consultant.
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| UGI SpR | Personal bleep or via switchboard | 08:00 – 17:00  | * Brief handover with UGI FY1 and SHO.
* Do the UGI ward round.
* Consenting patients for UGI lists.
* UGI theatre
* On-call from 17:00 to 08:00 if allocated to.
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| Colorectal SpR | Personal bleep or via switchboard | 08:00 – 17:00 | * Brief handover with Colorectal FY1 and SHO.
* Colorectal ward round.
* Consenting patients for UGI lists.
* UGI theatre
* On-call from 17:00 to 08:00 if allocated to.
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| Surgical SHO Roles |
| Role | **Contact** | **Tasks** |
| On-call Day SHO | 908 bleep | * Attend the handover at 08:00.
* Review surgical and urology patients in A&E.
* Take surgical referrals from other departments.
* Review unwell patients in surgical ward after 17:00.
* Assist in CEPOD (theatre 7) list after 17:00.
* Escalate to surgical SpR and consultant.
 |
| On-call Night SHO | 908 bleep | * Attend the handover at 20:00.
* Review surgical and urology patients in A&E.
* Take surgical referrals from other departments.
* Review unwell surgical and urology inpatients in ward overnight.
* Assist in CEPOD (theatre 7) if needed.
* Escalate to surgical SpR and consultant.
 |
| EMS SHO | Personal bleeps or via switchboard | * Attend the handover at 08:00.
* Do the ward round with surgical SpR and FY1s.
* Review unwell patients in surgical ward.
* Escalate to surgical SpR and consultant.
 |
| UGI SHO | Personal bleeps or via switchboard | * Brief handover with UGI SpR.
* Do the ward round with UGI SpR and FY1s.
* Review unwell UGI patients in the ward.
* Assist in UGI lists.
* Escalate to UGI SpR and consultant.
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| Colorectal SHO | Personal bleeps or via switchboard | * Brief handover with Colorectal SpR.
* Do the ward round with Colorectal SpR and FY1s.
* Review unwell Colorectal patients in the ward.
* Assist in Colorectal lists.
* Escalate to Colorectal SpR and consultant.
 |
| CEPOD SHO | Personal bleeps or via switchboard | * Attend the handover at 08:00.
* Review the hot clinic patients.
* Consenting patients for CEPOD list.
* CEPOD (theatre 7) list.
* Do the ward round with surgical SpR and FY1s.
* Review unwell patients in surgical ward.
* Escalate to surgical SpR and consultant.
 |
| Twilight SHO(during weekend) | Personal bleeps or via switchboard | * During weekend:
* Attend the handover at 08:00.
* Do the ward round with the on-call SpR and FY1s.
* Help the FY1s with the ward jobs.
* Review unwell patients in surgical ward.
* Escalate to On-call SpR and consultant.
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| Foundation year doctors’ roles |
| Role | **Contact** | **Time** | **Tasks** |
| On-call FY1 | 907 bleep | 07:30 – 20:00 | * Print the list.
* Attend the handover at 08:00.
* Clerk during the post-take ward round.
* Do the jobs of the post-take ward round with the CEPOD SHO and on-call SpR.
* Review the unwell patients in the ward and escalate to the surgical SHO and SpR.
 |
| EMS ward FY1 | Personal bleeps or via switchboard | 07:30 – 17:00 | * Print the list.
* Attend the handover at 08:00.
* Clerk during the ward round.
* Do the jobs of the ward round with the SHO and EMS SpR.
* Review the unwell patients in the ward and escalate to the surgical SHO and SpR.
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| UGI ward FY1 | Personal bleeps or via switchboard | 07:30 – 17:00 | * Print the list.
* Brief handover at 08:00 with the UGI SHO and SpR.
* Clerk during the ward round.
* Do the jobs of the ward round with the UGI SHO and SpR.
* Review the unwell patients in the ward and escalate to the UGI SHO and SpR.
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| Colorectal ward FY1 | Personal bleeps or via switchboard | 07:30 – 17:00 | * Print the list.
* Brief handover at 08:00 with the Colorectal SHO and SpR.
* Clerk during the ward round.
* Do the jobs of the ward round with the Colorectal SHO and SpR.
* Review the unwell patients in the ward and escalate to the Colorectal SHO and SpR.
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| Surgical duties |
| Duties | **Staffing** | **Timing** | **Overview** |
| Post-take ward round | On-call consultantOn-call SpRCEPOD SHOPost-take FY1 | 09:00 – 12:00  | * Review and manage the newly admitted or referred patients or patients needing consultant review.
* Consent patients for CEPOD.
 |
| Day EMS ward round | 1-2 EMS SpRs1-2 EMS SHOs1-2 EMS FY1s | 09:00 – 13:00  | * Review EMS inpatients.
* Consent patients for theatre.
* Initiate or modify management plans.
* Follow escalation protocol.
 |
| Day Colorectal ward round | 1 Colorectal SpR1 Colorectal SHO1 Colorectal FY1 | 09:00 – 12:00  | * Review Colorectal inpatients.
* Consent patients for theatre.
* Initiate or modify management plans.
* Follow escalation protocol.
 |
| Day UGI ward round | 1 UGI SpR1 UGI SHO1 UGI FY1 | 09:00 – 12:00  | * Review UGI inpatients.
* Consent patients for theatre.
* Initiate or modify management plans.
* Follow escalation protocol.
 |
| Twilight ward cover | On-call SpRTwilight SHO2 FY1 | 17:00 – 20:00 | * Complete jobs for ward patients.
* Review unwell patients.
* Follow escalation protocol.
 |
| Night ward cover | Night on-cal SHOOn-call SpR | 20:00 – 08:00 | * Complete jobs for ward patients.
* Review unwell patients.
* Follow escalation protocol.
 |
| Weekend day ward cover | On-call SpROn-call SHOTwilight SHO2 FY1 | 08:00 – 20:00 | * Review ward EMS patients.
* Set and initiate plans of care.
* Consent patients for theatre.
* Follow escalation protocol.
 |
| Weekend night ward cover | Surgical SHOOn-call SpR | 20:00 – 08:00 | * Complete jobs for ward patients.
* Review unwell patients.
* Follow escalation protocol.
 |
| A&E | On-call SHOOn-call SpR | 24 hours | * Review referred surgical patients.
* Set and initiate plans of care.
* Consent and book patients for theatre.
* Follow escalation protocol.
 |
| CEPOD (emergency list) | On-call consultantOn-call SpRCEPOD SHO (Weekdays)On-call SHO (Weekend) | 24 hours | * Briefing with theatre team.
* Operating emergency patients.
* Postoperative plans.
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