POSITION DESCRIPTION – Alfred Health / The Alfred / Caulfield Hospital / Sandringham Hospital

DATE REVISED: July 2020

POSITION: Immunopathology Registrar


DEPARTMENT/UNIT: Alfred Pathology Service, Haematology

CLINICAL PROGRAM: Alfred Pathology Service

DIVISION: Medical Services

ACCOUNTABLE TO: Report to Head of Haematology/RCPA Supervisor

TIME ALLOCATION (HRS/WK): Part time as per duty roster

ALFRED HEALTH

Alfred Health is the main provider of health services to people living in the inner southeast suburbs of Melbourne and is also a major provider of specialist services to people across Victoria. The health service operates three outstanding facilities, The Alfred, Caulfield, and Sandringham.

Further information about Alfred Health is available at www.alfredhealth.org.au

OUR BELIEFS

Our staff are expected to demonstrate and uphold Alfred Health beliefs, which are:

- Patients are the reason we are here – they are the focus of what we do.
- How we do things is as important as what we do. Respect, support and compassion go hand in hand with knowledge, skills and wisdom. Safety and care of patients and staff are fundamental.
- Excellence is the measure we work to everyday. Through research and education, we set new standards for tomorrow.
- We work together. We all play vital roles in a team that achieves extraordinary results.
- We share ideas and demonstrate behaviours that inspire others to follow.

DEPARTMENT
Position Description: **Biochemistry Registrar**
Alfred Pathology Service

**ALFRED PATHOLOGY SERVICE**

Alfred Pathology Service (APS) provides a comprehensive range of pathology testing, consultation services and collection services to clinicians and patients of Alfred Health. The Service has 5 units (Anatomical Pathology, Clinical Biochemistry, Haematology, Microbiology and Human Molecular), each headed by a Unit Head. APS has the core laboratory at The Alfred as well as a small local laboratory at Sandringham hospital. APS has several collection centres and is responsible for specimen collection of about 50% of its samples. A dedicated computing group supports the computing needs of APS. The services of APS include routine and esoteric laboratory testing with complete specialist support for test interpretation. Due to the nature of the associated hospitals’ activities, there is emphasis on the support of trauma and emergency services, the support of organ transplantation - especially heart and lung, the support of HIV and AIDS related diagnostic services and support of bone marrow transplantation services. The various APS units are affiliated with Monash University and most Consultants hold honorary or substantial teaching appointments. APS is actively involved in educational and professional development training programs for under-graduate and post-graduate students, medical students and registrars. Units are also involved in and support a wide range of research activity in association with hospital clinical units, Baker IDI, Burnet Institute, Monash University and other groups. APS actively supports ongoing professional development and research within areas of diagnostic interest.

Learning objectives are described within the relevant specialist college training requirements and learning objective documents.

Each Alfred Health Unit has specific requirements which are provided in the individual unit handbook, available on the Alfred Health intranet at Resources/ HMO Resources. **It is most important that the relevant unit handbook be read prior to the commencement of each rotation.**

**POSITION SUMMARY**

**Summary of Duties**

The Immunopathology registrar plays an important role in the liaison between the immunopathology diagnostic tests and clinicians at Alfred Health, providing advice on available tests and follow up of abnormal results. The position also requires participation in aspects of laboratory management (quality control/quality assurance and OHS), the development/evaluation of new tests, staff education and research. The registrar is involved in education of staff, medical students, and hospital medical officers. The immunopathology registrar position involves the rotation through each area of diagnostic immunology including allergy, autoantibody immunofluorescence and automated assay, protein chemistry and flow cytometry assays in order to obtain the specialist knowledge of immunopathology required for RCPA fellowship.
KEY RESPONSIBILITIES

Duties and Responsibilities

Training and Skill Development:
• Obtain basic knowledge and hands-on technical experience in all areas relevant for diagnostic immunopathology curriculum that includes
  o Basic immunobiology
  o Knowledge of immunological disorders – allergy, autoimmunity, immunodeficiency
  o Autoimmune serology
  o Allergy tests
  o Protein immunochemistry
  o Flow cytometry
  o HIV serology
  o Specialised sendaway tests – functional proliferation assays
• Record relevant training sessions in a logbook
• Develop the ability to interpret laboratory results with respect to both patient disease and test reliability.
• Critically evaluate literature for journal club discussions and present at journal club.
• Attend and present at internal and external educational meetings.
• Attendance in weekly clinical immunology/allergy service meetings
• Preparation for the relevant Immunopathology examinations.

Research and Method Development:
• Depending on seniority/experience, assist scientific staff in developing new methods or improving and trouble-shooting existing methods.
• Initiate and participate in relevant research and development being undertaken in the laboratory.

Teaching/ Education:
• Participation in education sessions of staff within the laboratory.
• Participation in teaching of medical students and resident staff as required.
• Presentation in hospital Grand Rounds and other meetings as required.
• Participation in the Victorian Immunology training lecture program
• Attendance at the Melbourne Diagnostic Immunology Discussion group

Services and Quality Management:
• Participate in specimen processing, reporting and notification of results to medical staff.
• Follow up of abnormal results if requested in regards to test validity including ward based assessment.
• Be available to provide advice on interpretation of tests and further testing to both Alfred employees and external requests.
• Be involved in issues related to laboratory organization and management.
• Contribute to the assessment of specimen acceptability based on laboratory protocols and clinical judgment.
• Participate in assessment of the need and validity of send-away tests, and discusses same with clinician involved.
Consideration for after-hour or weekend cover roster for the clinical immunology unit.

Liaison with clinicians, internal and external pathologists, laboratory staff, and secretarial staff.

Participates and practices within the framework of the laboratory quality program.

Participates in departmental audits, internal and external quality assurance programs.

Participates, reviews and develops laboratory Immunology protocols.

Other duties as required by supervisor/head of clinical immunopathology.

SUPERVISION

Alfred Health Approach
All junior medical staff at Alfred Health work under supervision. Supervision can be either direct or indirect and MUST be provided by a more senior doctor. In the case of a Registrar, the supervision is provided by a consultant. The nature of the supervision provided will depend on the complexity of the care being delivered and the experience of the junior doctor.

Direct supervision is defined as supervision where the designated supervisor is either present where the care is delivered or is on-campus and available within a few minutes.

Indirect supervision occurs where the designated supervisor is not present but available by telephone for advice and to attend in accordance with Unit and Alfred Health requirements.

Registrars may work under both direct and indirect supervision.

The Alfred Health approach should not be confused with the Medical Board of Australia supervision guidelines for limited registration which apply to the registration requirements of international medical graduates (Supervised practice for international medical graduates, January 2016 http://www.medicalboard.gov.au/Registration/International-Medical-Graduates/Supervision.aspx).

Each Alfred Health Unit has specific requirements which are provided in the individual unit handbook, available on the Alfred Health intranet at Resources/ HMO Resources. It is most important that the relevant unit handbook be read prior to the commencement of each rotation.

SCOPE OF PRACTICE

Scope of practice is the extent of an individual medical practitioner’s approved clinical practice within a particular organisation based on the individual’s credentials, competence, performance and professional suitability and the needs and capability of the organisation.

Registrars should be proficient in most of the skills and procedures outlined in the Australian Curriculum Framework for Junior Doctors (ACF version 3.1 2012) Further information is available at www.cpmec.org.au/page/acfd-project.

Core Scope of Practice for Junior Medical Staff
This includes
Venepuncture, IV cannulation, Preparation and administration of IV medications, injections and fluids, Arterial puncture in an adult, Blood culture (peripheral), IV infusion including prescription of fluids, IV infusion of blood and blood products, Injection of local anaesthetic to skin, Subcutaneous injections, Intramuscular injections, Performing and interpreting ECGs
Performing and interpreting peak flow, Urethral catheterisation in adult males and females, Airway care including bag mask ventilation with simple adjuncts such as pharyngeal airway, Wide bore NGT insertion,

1 ACSQHC, Standard 1 Governance for Safety & Quality in Health Service Organisations, October 2012
Gynaecological speculum and pelvic examination, Surgical knots and simple suture insertion, Corneal and other superficial foreign body removal, Plaster cast/splint limb immobilisation.

**Advanced Procedures and Skills** –

Junior medical staff should NOT undertake any advanced procedures without direct supervision unless there is specific authorisation from a consultant from the relevant Unit. These procedures include joint aspiration; laryngeal mask & ETT placement; complex wound sutureing; proctoscopy; lumbar puncture; fine bore NG feeding tube insertion.

- **Procedures requiring specific credentialing** include: intercostal catheter insertion, central venous line insertion, Biers blocks, as well as specific procedures approved by Heads of Unit for limited operating rights.

**Advanced Skills** – e.g. apgar score estimation, secondary trauma survey, papilloedema identification, slit lamp examination, intra ocular pressure estimation. For neonatal and paediatric resuscitation, Fellows who are specifically credentialled to do so, can undertake full resuscitation. Others can commence basic resuscitation until more senior staff attendance unless specifically credentialled for neonatal and paediatric resuscitation.

Registrars should ensure that they have undertaken the appropriate training and been deemed competent when using **advanced skills**.

It is recognised that not all the advanced procedures and skills listed above apply to all junior medical staff.

**College Standards**

For more specific information on scope of practice, refer to the relevant College publications related to training and specific College curricula, which detail expected learning outcomes and/ or competencies at various stages of training.

**Alfred Health Consultant Notification and Escalation Requirements**

Registrars play a pivotal role in informing senior medical staff (SMS) of important changes in their patients’ conditions. Registrars must adhere to and support the following Alfred Health guidelines:

- **Consultant Notification Policy;** and
- **Escalation of Care Guideline;**

and must encourage other junior medical staff and nursing staff to escalate concerns appropriately.

**SCOPE OF PRACTICE IN OPERATING THEATRE SUITES/ PROCEDURE ROOMS/ ENDOSCOPY**

The section below applies to Fellows and Registrars that are working in these areas.

Surgical Registrars/Fellows have responsibilities in the Operating Theatre Suites and related areas but only under the direction and supervision of the designated Specialist Surgeon. Registrars/Fellows have important obligations to keep the designated Specialist Surgeon informed about the patients under that Specialist’s care. This includes discussion re cases on lists prior to finalisation of lists.

**Every theatre list must have a documented designated Specialist Surgeon responsible for that list. Fellow and / or Registrar lists with no nominated supervising surgeon are not permitted. If there is no nominated surgeon on the theatre list, the Theatre Nurse Manager should seek clarification from the Head of Unit prior to the list commencing.**

The scope of practice, if any, that can be extended to each individual surgical Registrar/Fellow without the direct supervision of a Specialist Surgeon is determined by the Unit Head/ Director. This will usually involve the Unit Director/Head or senior delegate undertaking the following:

- Discussion with the trainee regarding his/her clinical experience and competence; and/or
Logbook review; and/or
Consultation with the trainee’s previous supervisor; and/or
Personal observation in the operating theatre.

The review of this information and the determination of scope of practice without direct supervision should be made in accordance with the *Credentialing of Procedural Trainees* guideline.

Registrars/Fellows may not undertake a broader scope of practice than they have officially been granted by Alfred Health. However, Registrars/Fellows should not feel compelled to undertake procedures without direct supervision where they are not comfortable with the circumstances of a particular case. The determination and documentation of scope of practice for surgical Registrars/Fellows should be reviewed 6 monthly.\(^2\)

In exceptional (e.g. emergency) circumstances, a surgical Registrar/ Fellow may undertake a procedure for which they are not formally credentialed, upon verbal advice from the Unit Director/Head or his/her delegate and the anaesthetist in charge (and consultant back-up must be available). If this addition is agreed, it must then be formally added to the Registrar/Fellow’s credentialing within 24 hours of the procedure.

To be credentialed for upper GI+/or lower GI endoscopy credentialing, the trainee’s Conjoint Committee log book must be reviewed by the Head of Unit and the trainee must have completed all required procedures to achieve Conjoint Committee certification before they can undertake endoscopy under indirect supervision. The Head of Unit must also inform the Head of Endoscopy.

**QUALITY, SAFETY, RISK and IMPROVEMENT**

- Maintain an understanding of individual responsibility for patient safety, quality & risk and contribute to organisational quality and safety initiatives
- Follow organisational safety, quality & risk policies and guidelines
- Maintain a safe working environment for yourself, your colleagues and members of the public.
- Escalate concerns regarding safety, quality & risk to appropriate staff member, if unable to rectify yourself.
- Promote and participate in the evaluation and continuous improvement processes.
- Comply with principles of Patient Centred Care.
- Comply with Alfred Health mandatory continuing professional development requirements.
- Comply with requirement of National Safety & Quality Health Service Standards and other relevant regulatory requirements.

**OTHER REQUIREMENTS FOR ALL ALFRED HEALTH STAFF:**

- Ensure compliance with relevant Alfred Health clinical and administrative policies and guidelines.
- Comply with relevant privacy legislation.
- Protect confidential information from unauthorised disclosure and not use, disclose or copy confidential information except for the purpose of and to the extent necessary to perform your employment duties at Alfred Health.

\(^2\) ACSQHC, *Credentialing health practitioners and defining their scope of clinical practice: A guide for managers and practitioners*, December 2015
• Comply with Alfred Health medication management and medication safety policies and guidelines.
• In this position you must comply with the actions set out in the relevant section(s) of the OHS Roles and Responsibilities Guideline.
• Research activities will be undertaken commensurate with the role

QUALIFICATIONS/EXPERIENCE REQUIRED
• MBBS, Registered Medical Practitioner in Victoria
• Successful completion of relevant post graduate years;
• Enrolled into the Joint training program for Clinical Immunology/ Allergy and Immunopathology
• AHPRA medical registration without conditions, undertakings or reprimands.

KEY ATTRIBUTES
• Integrity
• Resilience
• Well developed and interpersonal skills
• “Can do” attitude and flexible approach
• Ability to balance competing demands and conflicting priorities
• Time management and prioritising skills
• Professional attitude and demeanour

OTHER RELEVANT INFORMATION
• Statements included in this position description are intended to reflect in general the duties and responsibilities of this position and are not to be interpreted as being all inclusive;
• Ongoing performance reviews and feedback will be undertaken across the year. It is anticipated that a formative and summary assessment will be undertaken during the rotation.
• Mandatory Police Check and Working with Children Check to be completed if appointed.

Position Description Authorised By: Lee Hamley, Chief Medical Officer

Position Description Reviewed By: Professor Hans Schneider

Date: July 2020
## Position Description: **Biochemistry Registrar**

**Alfred Pathology Service**

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**Timetable**

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