



The University of Manchester

YEAR 3

Clinical Placement Area:

Renal

Clinical Placement Supervisors:

Dr Asghar



PAGE:**CONTENTS**

2 Meet the team

3 Placement specific information

3 Clinical Placement learning aims and objectives

4 Clinical and Ward areas utilised

4 Clinical Standards UPISA's

COVID 19

All staff must adhere to Infection Control measures at all times, starting with basic handwashing to the correct use of PPE, and enhanced PPE where applicable.

Arrive and leave the hospital **in your own clothes** in accordance with Trust policy and change on site in your designated area for your ward or use the Centralised Locker rooms

Handwashing should be undertaken at regular intervals and before and after each patient contact.

Whilst out on the wards, you will hear the patients' status referred to as Red, Amber or Green (RAG). This traffic light system refers to their Covid- 19 status.

Red patient is Covid positive.

Amber patient is suspected Covid and is awaiting their results.

Green Patient is Covid negative.

Blue patient is one who has been in the same bay as a patient who is identified as Red or Amber.

If you develop any signs and symptoms of Covid-19 you **MUST** self-isolate immediately!

You MUST inform your Placement Supervisor, the Learner Support Team and your university as soon as possible on the FIRST DAY of your absence.

The Trust will then arrange for you to be tested, to ensure Safety through track and tracing measures

Learner Support contact email: Learner.Support@lthtr.nhs.uk

2. MEET THE TEAM

Clinical Placement Supervisors- Dr R Asghar

Renal Secretarial Support for students- Sara Gallagher (xtn-2273)

Clinical Placement Facilitator- Amy Stringer

Yellow Team

- Dr J Anderton
- Dr C Arunachalam
- Dr A Dhaygude
- Dr A Ponusamy
- Dr H Shetty

Green Team

- Dr A Ahmed
- Dr R Asghar
- Dr M Brady
- Dr P MacDowell
- Dr B So
- Dr L Solomon
- Professor A Woywodt

Additional Medical Team:

Dr P Warwicker- Consultant Nephrologist (Predominantly East Lancashire Commitment)

Dr S Bandyopadhyay Sharmila –Associate Consultant

Dr M Garrues- Staff Grade in Nephrology

Matron- Liz Coleman

Ward 25 (Royal Preston Hospital, 5th Floor)-Diane Till (Ward Manager)(xtn-2252)

Is the main renal ward for the majority of the renal in-patients, although not uncommonly there can also be renal patients outlying on other wards throughout the Hospital. At present, there are a total of 14 Renal Consultants and as we are a Tertiary Renal Referral Centre we are responsible for the care of patients with renal disease over a large Geographical catchment area and this is not solely confined to Preston. As a consequence, the medical management of patients on ward 25 is divided between two different medical renal teams: yellow and blue. The teams also reflect the Geographical Catchment Area covered (**Yellow Team-** Preston and Blackpool Area; **Blue Team-** Preston, East Lancashire and Lancaster and North). One Consultant out of each of the team will be responsible for all the in-patients under that team on ward 25 and a different Consultant from each team for the respective outliers at any point in time, on a monthly rotational basis. Each Consultant from each of these two teams will usually undertake two Consultant Led Ward Rounds each week. In addition, there will also be a Renal Consultant on-call for the week whom is

responsible for leading the 9 am 'board meeting' each morning in the Doctor's Office on Ward 25 followed by review of new admissions and acutely sick patients as required on a daily basis. A Renal Speciality Trainee, (ST) is responsible for the care of all the renal ward in-patients together with the support of the Core Medical Trainees (CMTs) and a Foundation Year 1 Doctor (FY1).

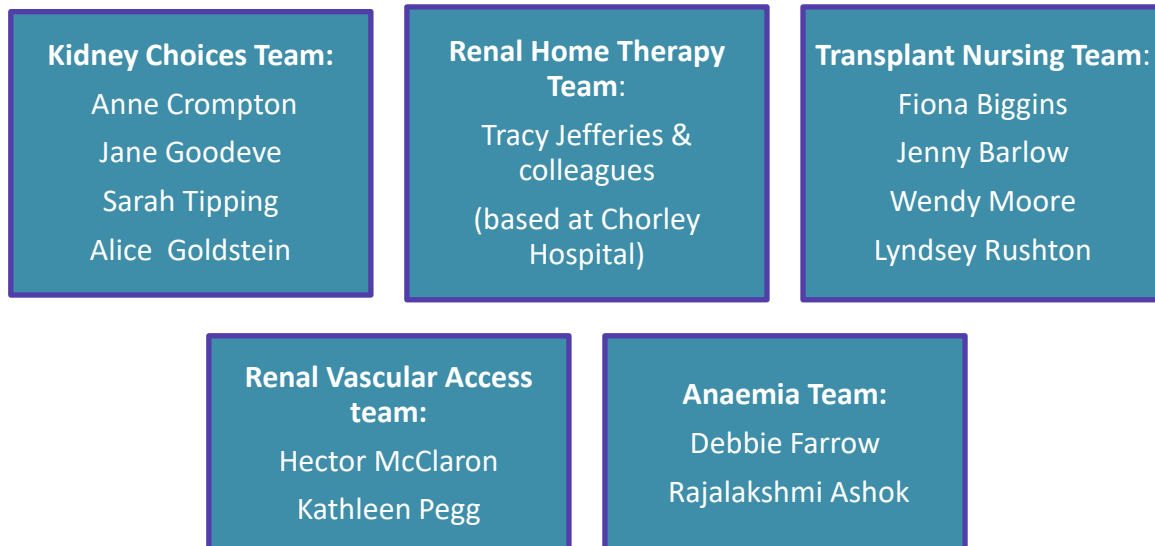
There is a 'three bedded' Acute Dialysis Bay on Ward 25 (Bay 5)- managed by the dialysis nursing team for acute (and occasionally) chronic dialysis.

Renal Dialysis Unit

Supervised by: Christina Mc Crone –Sister

The Dialysis unit is situated at the rear of the hospital above Rosemere Cancer Centre. It is a purpose built unit, with 12 acute beds, and 16 beds for patients with chronic renal disease.

Renal Specialist Nurses:



3. PLACEMENT SPECIFIC INFORMATION

Year 3 Induction Information and How to Succeed in Placement document

The above document is to be read in conjunction with this document.

Induction Information Overview

During this placement, you will have the opportunity to work on Ward 25, situated on the 5th floor of RPH; attend ward rounds; work on the Dialysis unit, both here and Chorley hospital (CDH) and attend outpatient clinics. There are many Renal Nurse Specialists with whom you may have the opportunity to arrange some time. This very much depends upon their availability, so please do not just arrive unannounced.

During this placement within Renal Medicine, based at Royal Preston Hospital (RPH) you will gain experience of Renal conditions, how they present, and long term outcomes for these patients. Ward 25 is an acute renal ward, with patients arriving from the wider geographical area. They are looked after by a total of 13 Renal Consultants, as detailed earlier, divided into two teams.

The Home Therapy team welcome students BY ARRANGEMENT ONLY. You MUST arrive by 0900hrs when attending.

It is hoped that students will have the opportunity to experience the core topics within this placement. By interacting with patients on wards and clinics, students will gain increased proficiency in history taking, and clinical examination. It is expected that you will obtain at least three histories per week, presenting one of these to a CT2 or above.

There is a broad range of learning opportunities for you as undergraduate students, from acquisition of generic clinical skills, to more specific disease or syndrome related clinical management skills.

Components of Placement

Check MEDLEA for sign up opportunities to enhance your placement. Our CPF Rachel will help and advise.

Your Placement Supervisors within Renal Medicine are Dr Arunachalam, and Dr Asghar. You will be met by both Consultants regularly during your placement. Your group will be split into two smaller groups of four students each; your initial & sign off interviews will be with the same supervisor. Drs Arunachalam and Asghar will discuss your placement objectives with you individually during the first week of your placement. This is termed your Initial meeting. It is hope that you will enjoy your placement, and achieve the standards set out by Manchester Medical School, however, if you feel you need extra support, you may ask for an interim or mid- point meeting to discuss any issues. You may also be referred for a mid- point meeting if your Clinical Placement Facilitator (CPF) feels there are any concerns; You may be referred by anyone within the placement team should there be any concerns. This happens rarely, and is purely for support.

Common clinical conditions related to Renal Placement Area

During this placement you are likely to see patients with Acute Kidney Injury; Chronic Kidney Disease; Dialysis Patients (both Haemodialysis and Peritoneal Dialysis) and potential complications of and Renal Transplant patients. A whole host of general medical and surgical problems can often be encountered within these population groups.

Overview of some conditions encountered:

RENAL

Acute kidney injury
Haemodialysis & complications
Peritoneal Dialysis & complications
Renal transplant patients
Nephrotic Syndrome
Vasculitis & other rarer immunological disorders.

Cardiovascular

Acute coronary syndrome
Chest pain
Angina Pectoris
Heart failure
Atrial Fibrillation
Valve disease
Hypertension (as part of other disease)

Respiratory Medicine

Pneumonia
Community & Hospital acquired
Exacerbation of Asthma
Exacerbation of COPD

Respiratory Medicine

Pulmonary Embolism
Pleural Effusion
Bronchiectasis
Lung Malignancy

Haematological

Anaemia
Mostly iron deficiency
Other causes
Massive haemorrhage-GI bleed
Haematological malignancy

Clinical Placement Learning Aims and Objectives

Your main objective within this placement is to enable you to experience common clinical presentations within Renal medicine both on ward 25, and the dialysis unit, engaging with patients in conversation; history taking and systems examination. You are expected to obtain at least three case histories and clinical examinations per week, and to present at least one of these cases to a Consultant. There are

regular outpatient clinics, which you will be timetabled to attend. These are both Consultant and Specialist Nurse led, providing the opportunity to observe communication and examination skills.

You will have experience in data interpretation, blood results, particularly those concerned with renal function/nephrology. You will learn about the renal disease process and management. You will also have the opportunity to attend renal dialysis unit, and learn the processes involved.

A range of opportunities include:

CLINICAL SKILLS	<ul style="list-style-type: none">• History taking• Clinical examination• Communication skills• Breaking bad news• Explanation of investigation and management plans• Verbal and written communication with colleagues• Management of complaints and conflict• Data interpretation• Interpretation of common blood tests FBC and U/Es• Interpretation of urine dipstick test• Interpretation of arterial blood gas result• ECG interpretation• Interpretation of chest X-ray
PROCEDURES (observation and practice under close supervision)	<ul style="list-style-type: none">• Venepuncture• IV cannulation• Administration of intravenous drugs• Measurement of blood glucose levels• Administration of blood and blood products• Insertion of Urinary Catheters• Arterial Blood Gas(ABG) Sampling
ATTITUDES	<ul style="list-style-type: none">• Team working• Time management & Prioritisation of tasks• Appreciation of the contribution of the MDT.

Placement Learning Opportunities: (As above plus)

PROCEDURAL SKILLS AND UPSA'S

- Renal Biopsies
- Central Venous Cannulation (temporary/semi-permanent; jugular/femoral approach)
- Tenchoff Catheter Insertion

CLINICAL EXAMINATIONS

- All systems inclusive of cardiovascular; respiratory; gastrointestinal and occasional neurological

4. CLINICAL AND WARD AREAS UTILISED:

- Clinical Placement Area is predominantly based at Royal Preston Hospital (RPH)
- RPH-Ward 25
- CDH-Home Therapy Unit
- Other clinical area- Dialysis Unit at RPH and Acute Dialysis Bay (Ward 25)
- Outpatients- RPH-predominantly Lostock Suite

CLINICAL STANDARDS

Skill	Number per week	Number per block	Total (115)	Validated by
Patient Assessment	3	-	72	Self-validated
Physical Examination	1	-	24	FY1 or above Specialist nurse, skills tutor
Presentation of Patient Assessment - standard	1	-	24	FY1 or above Specialist nurse
Presentation of Patient Assessment - enhanced	-	1	6	ST1 or above
Clinical Experiences (ward round, clinic, theatre)	2	-	48	Any medic or nurse
Clinical Experiences (On call)	-	1	6	FY1 and above
UPSAs	-	At least 1	8	By competence
Prescribing tasks	-	At least 1	5	FY2 and above; pharmacist, Nurse Prescriber

At the end of your placement you will have a sign off interview, this will either be timetabled or needs to be arranged with the placement supervisor and consists of a 20 minute meeting in which your log book will be reviewed. You **must submit the eForm by 17:00 on the last Friday of your placement. Failure to do so will result in you failing the placement.**