

## ***Perioperative Clinic Anaesthetics SRMO – John Hunter Hospital***

Perioperative Medicine is an important part of the management of all patients who undergo anaesthesia. The ANZCA recognises its role as a clinical fundamental in training. The skills that are to be developed include: cardiac risk assessment, management of medical co-morbidities, patient optimisation and perioperative medication management. The outpatient perioperative clinic at John Hunter Hospital offers the opportunity for a diverse clinical exposure in training.

### **Location**

Office – RNC Level 1 next door to Simulation Centre

Pre Admission clinic - RNC Level 1 in outpatient rooms adjacent to Physiotherapy

### **Hours of work**

0730 – 1800

### **Outline of day**

*0730 - 0800*

Perioperative Cardiology MDT (see details below)

*0800 – 1230*

Morning Pre Admission Clinic

*1230 – 1330*

Perioperative Interest Group Meeting - in Surgical meeting room opposite operating theatres. See guide in Meetings (below).

*1330 - 1630*

Afternoon Pre Admission Clinic

*1630 – 1800*

Ward Consultations with Anaesthetics Registrar

Personal study

## Clinical role

An SRMO is rostered to the John Hunter Hospital Pre Admission Clinic each Thursday fortnight. The clinical exposure will include:

- An orientation to the Pre Admission Clinic at John Hunter Hospital,
- 1:1 clinical attachment to consultant anaesthetist in the Pre Admission Clinic for that day
- Attendance at Perioperative Cardiology MDT and Perioperative Interest Group Meetings

## Expectations

- All patients will be seen with Anaesthetic consultant or registrar
- All high-risk medication management to be discussed with Anaesthetics consultant
  - o Anticoagulants
  - o Antiplatelets
  - o Diabetic medications and insulin
  - o Immunosuppressant medications
  - o Chronic opiates – especially oral buprenorphine and methadone
- If patient has medical condition that requires optimisation prior to surgery this should be discussed with the Anaesthetic consultant and a plan for further investigation and management communicated with patient, surgical team +/- GP.
- Additional resources can be found on [perioptalk.org](https://perioptalk.org).

## Letters

- All letters written to GPs, referring doctors or other specialists must be sent through the Perioperative Service to ensure there is appropriate documentation. They should be sent to [HNELHD-JHHPeriop@health.nsw.gov.au](mailto:HNELHD-JHHPeriop@health.nsw.gov.au). If urgent contact office so they are sent on the day. Templates for letters can be found at: <https://perioptalk.org/the-clinic-perioperative-letters/> .

## Meetings

- There are 2 meetings each week that offer additional support for perioperative management of patients:
  1. Perioperative Cardiology MDT meeting – Thursday morning 0730 in Cardiology department offices. Attended by Registrar and consultant on that day. See Cardiology Meeting guideline on [perioptalk.org](https://perioptalk.org) for referral procedures for patient's from Pre Admission Clinic.
  2. Perioperative Interest Group (PIG) meeting – Thursday 1230-1330 in Surgical meeting room opposite operating theatres. Complex cases for consultation and interesting cases will be discussed. See PIG meeting referral guideline on [perioptalk.org](https://perioptalk.org) for referral procedures for patient's from Pre Admission Clinic.
- Referral of patients to these meetings should be made in collaboration with the Anaesthetic consultant. A specific question that requires additional collaboration should be proposed for presentation of the patient.

*Additional advice can be sought from DA or Perioperative co-Directors Paul Healey and Pragya Ajitsaria*