

Hospital Staff

The people who work in any type of workplace, including hospitals, are called the staff. The **medical staff** in a British hospital belong to one of four main groups:

- A **pre-registration house officer (PRHO)**, or **house officer**, is a newly graduated doctor in the first year of postgraduate **training**. After a year, he or she becomes a registered medical practitioner. In the current system of training, the **Foundation Programme**, the name for these junior doctors is **Foundation Year 1 doctor (FY1)**.
- A **senior house officer (SHO)** is in the second year of postgraduate training. The title is now **Foundation Year 2 doctor (FY2)**, but the old terms senior house officer and SHO are still used.
- A **specialist registrar (SpR)** is a doctor who has completed the Foundation Programme, and is training in one of the medical specialties. There are also some **non-training registrars** -- doctors who have completed their training but do not wish to specialize yet.
- A **consultant** is a fully qualified specialist. There may also be some **associate specialists** – senior doctors who do not wish to become consultants. In addition, there is at least one **medical (or clinical) director**, who is responsible for all of the medical staff.

Medical Teams

Consultant physicians and surgeons are responsible for a specific number of patients in the hospital. Each consultant has a **team** of junior doctors to help care for those patients. In many hospitals, there are **multidisciplinary teams** which consist not only of doctors but also of physiotherapists and other allied health professionals.

When patients enter- or **are admitted to** –hospital, they are usually seen first by one of the junior doctors on the **ward** where they will receive treatment and care. The junior doctor **clerks them** – **takes their medical history** – and examines them. Some time later, the registrar also sees the patients, and may order **investigations** or **tests**, for example X-rays or an ECG, make a provisional diagnosis, and begin treatment. The consultant usually sees the **new admissions** -- people who have recently been admitted to the ward – for the first time on one of the regular **ward rounds**, when the management of the patients is discussed with the registrar. Consultants also decide when a patient is ready to be **discharged** (sent home). On the ward round, the consultant is accompanied by the team and a nurse, and they visit all the patients in the consultant's care.

Shifts

Junior doctors normally work in **shifts**, which means they normally work for eight hours every day, for example 7 am to 3 pm, and are then free until 7 am the next day. After a week they change to a different shift, for example 3 pm to 11 pm or 11 pm to 7 am. The alternative system is to work from 9 am to 5 pm every day and to take turns to be **on call** – available to return to the hospital if necessary – from 5 pm to 9 am the next day. Days on call are set out in a **rota**, or list of names and times. Doctors on call carry a **radio pager**, or **bleeper**, a device which makes a noise when someone is trying to contact them.

Make word combinations using a word from each box.

associate
house
on
provisional
radio
ward

call
diagnosis
officer
pager
round
specialist

Match the descriptions with the job titles.

1. Dr. Graham has been a paediatrician for eight years and is responsible for treating the children admitted to Ward 60.
 2. Dr. Stewart has just started the second year of her Foundation Programme.
 3. Dr. Singh has started his training as a surgeon.
 4. Dr. Phillips has just graduated and is working in a large hospital in Birmingham.
 5. Dr. Millar is in charge of the medical staff in the Birmingham hospital.
- a. specialist registrar
 - b. medical director
 - c. consultant
 - d. SHO
 - e. PRHO or house officer

Are the following statements true or false? Find reasons for your answers on the above text.

1. A medical graduate becomes registered two years after graduation.
2. The system of training doctors in Britain is called the Foundation Programme.
3. The name senior house officer is no longer used in Britain.
4. The consultant is usually the first doctor to see new patients.
5. When working in shifts, all doctors take turns to be on call.

Complete the text of a PRHO describing her job.

When I get to the ward, the first thing I do is talk to the house officer who was on duty during the last (1) _____, to find out if there have been any new (2) _____. Then I generally see the charge nurse. He tells me if there is anything that needs to be done urgently, such as intravenous lines to put up or take down. Later in the morning, I (3) _____ any new patients, which basically involves taking a history. On Tuesday and Friday morning the consultant does her ward (4) _____, and I have to make sure I'm completely up to date on her patients. After that, there are usually lots of things to do, like writing up request forms for blood (5) _____, and so on. In the afternoon, I have to prepare for any patients who

are to be (6) _____ the next day. They're usually happy to be going home! And then of course there are the lectures and tutorials in the (7) _____ programme on Monday and Wednesday.

Express your idea

- How does the hospital training of doctors in your country differ from the British system? How would you explain it to a colleague from another country?