



Portsmouth Fellowship

UK Fellowship Questionnaire

Did the Fellowship fulfil the BOFAS criteria Yes No

A good quality F&A Fellowship should provide a balance between surgical practice in theatre and of decision-making in outpatients, with at least two clinics and at least three theatre sessions per week. There should be a regular multi-disciplinary team meeting, study leave with both protected time and a budget, a paid session for research or audit and a clear mechanism for feedback.

Cannot comment on the study budget as I was claiming through the military not the Trust

Please answer these questions in the free text box below.

1. Which Year? 2018-19

2. What was the annualised total number in your log book? (ie if 6/12 then double)

444

3. What was the % of cases that you were the lead surgeon for most of the procedure?

195 SS, 9 SUS, 114 P, 42 T – 81% (including those when supervising others)

4. How many academic publications are you highly likely to submit from your Fellowship (be honest)? I had the time available to conduct 2 systematic reviews and an audit – if not published this is my fault not the fault of the fellowship

5. What were the highlights?

The Portsmouth Foot and Ankle Team, and indeed the orthopaedic department as a whole are a team in the best sense of the word. Each surgeon brings a different approach to the work – from the experience of Mr Hodkinson, the organisation of Mr Lasrado, the improvisational ability of Mr Moras and the academic background and knowledge of the literature of Mr Jowett.

As the Fellow I was encouraged and supported in becoming more confident as an independent operator and to work at consultant level. There was provision to have independent lists after a period of assessment; but always with an identified consultant available in the hospital – when I needed support it was provided.

There was a strong multidisciplinary component – a regular radiology MDT and the Combined Foot Clinic where complex cases from across the region were assessed by consultants not only from Portsmouth but also from Chichester, Winchester and Basingstoke.

I undertook locum consultant on calls, again a named consultant was available to provide top cover if required. I could have done registrar on calls as well but was not on the standard on call rota.

The timetable was busy – Tuesday and Friday all day operating, Wednesday all day clinic, Monday alternated between a specialist foot trauma list and research, Thursday between Clinic and theatre. When consultants were absent I was asked if I would cover clinics – this was not assumed - and I was well protected from duties other than those agreed. I had the opportunity to follow all the cases that I had operated on.

I had no difficulty in obtaining study leave to attend conferences and courses and was also able to be involved with the Deanery teaching days for registrars.

I had regular feedback meetings on my progress. I appraised using the MAG form but the Trust has a separate system – as I was not on the payroll I did not have access to this

By completing this and returning it to administrator@bofas.org.uk, you are giving your consent for us to publicise this on the BOFAS Website.