

Introduction

The fellowship programme is run through the Joint Committee on Surgical Training (JCST).

Fellowship posts are open to all higher surgical and where appropriate, non-surgical Fellows, that meet the person specifications. Details of eligibility are found through the <u>JCST</u>.

Any unit applying to host Training Interface Group Fellows must have trainer representation from all parent specialties.

Applicant units are required to be able to deliver the Fellowship curriculum and adhere to the quality indicators (QIs).

The data included in the form below is an extract of the data submitted by the unit in their application to become a TIG unit.

Unit Lead Trainer:

Name	
Nikolaos Kanakaris	

Local Educational Provider (LEP)

Main hospitals/trusts involved with teaching (base units):

	Hospital/Trust A	Hospital/Trust B	Hospital/Trust C
Name of Trust	Leeds Teaching Hospitals NHS Trust		
Address of Trust	Leeds General Infirmary & St James		
	University Hospital		
	Great George Street, LS13EX, Leeds		
	West Yorkshire MTN		

Peripheral units (if to be visited by Fellow):

	Hospital/Trust N	Hospital/Trust O	Hospital/Trust P	Hospital/Trust Q	Hospital/Trust R
Name of Trust					
Address of Trust					

LEP Consultants / Trainers

Parent Specialties of main trainers:

Parent Specialty	Number of main trainers from this Specialty
Trauma and Orthopaedics	2
Vascular Surgery	2

Other Trainer(s) involved with Fellowship:

Parent Specialty	Number of other trainers from this Specialty
Emergency Medicine	1
Interventional Radiology	1
Thoracic Surgery	1
Resuscitative General Surgery	3
Plastic Surgery	2
Trauma and Orthopaedics /	1
MTC	
Anaesthesia-Intensive care	1
Perioperative Internal	1
Medicine - Geriatrics	
Resuscitative Vascular Surgery	1
Spinal Surgery	1
Neurosurgeon	1

Indicative Timetable

The Fellow should be based at the main hospitals/Trusts for most of their educational activity but one session (professional activity) may occur outside these units each week. A Fellow may work for 48 hours per week and if there is no on-call, all this time may be used for training.

Below is an indicative timetable that indicates the type of proposed activity and includes supporting professional development (SPD). SPD should be one half day each week. Please note that the timetable must be compatible with the Quality Indicators specific to the relevant TIG.

Multi-disciplinary team meeting (MDT), Supporting Professional Development (SPD), Operating theatre (Th), Ward round (WR), Outpatient clinic (OPC)

Trust A	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM	SPD	TH	WR	WR	TH		
PM	OPC	TH	TH	SPD /	MDT M&M		
				MDT RTN	/		
					SPD		

Trust B	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Training Delivery

Overview of the Unit's TIG Fellowship Training Delivery plan:

Indication of units operative workload (five most frequent procedures relevant to this fellowship):

Procedure	Number of cases per year	Proportion anticipated to be performed by the fellow under supervision
Pelvic fracture acute fixation	120	15%
Complex Lower limb fracture acute reconstruction	200	20%
Trauma Laparotomies	80	15%
Complex Long bone / periarticular fracture fixation	300	15%
Thoracic wall fixation	30	50%