

Term Description – Handbook – ROVER

1. Term details:			
Health Service:	Northern Health	Term duration:	Maximum: 13 weeks
Location/Site:	Broadmeadows Hospital	Clinical experience - Primary:	C: Acute and critical illness patient care
Parent Health Service:	Northern Health	Clinical experience - Secondary:	Choose an item.
Speciality/Dept.:	General Surgery	Non-clinical experience:	(PGY2 only)
PGY Level:	PGY2	Prerequisite learning:	(if relevant)
Term Descriptor:	<i>Cover surgical term involving the care of pre and post operative ward care of general surgery, urology, orthopaedic, gynaecology and ENT surgical patients. Independent post operative ward-based care with support from home teams. Attendance in theatre for general surgical cases. Attendance at weekly surgical forum and contribute to unit audits. Ward cover for rehabilitation patients after hours.</i>		

2. Learning objectives:		
<i>EPA1: Clinical Assessment</i>	Domain 1	Communicates accurately and effectively with the patient, carers and team members.
	Domain 2	Demonstrates professional conduct, honesty and integrity.
	Domain 3	Identifies and considers culturally safe and appropriate means of obtaining patient histories and/or performing physical examination.
	Domain 4	Makes use of local service protocols and guidelines to inform clinical decision-making.
<i>EPA2: Recognition and care of the acutely unwell patient</i>	Domain 1	Identifies deteriorating or acutely unwell patients
	Domain 2	Recognises their own limitations and seeks help when required in an appropriate way.
	Domain 3	Demonstrates critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism.
	Domain 4	Raises appropriate issues for review in quality assurance processes (such as at morbidity and mortality meetings).
<i>EPA3: Prescribing</i>	Domain 1	Appropriately, safely & accurately prescribes therapies (drugs, fluids, blood products, oxygen), & demonstrates an understanding of the rationale, risks & benefits, contraindications, adverse effects, drug interactions, dosage & routes of administration
	Domain 2	Demonstrates an understanding of the regulatory and legal requirements and limitations regarding prescribing. Subpoints
	Domain 3	Recognises the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family and community.
	Domain 4	Prescribes in accordance with institutional policies, including policies on antibiotic stewardship.
<i>EPA4: Team communication – documentation, handover and referrals</i>	Domain 1	Produces medical record entries that are timely, accurate, concise and understandable.
	Domain 2	Informs patients that handover of care will take place and to which team, service, or clinician as appropriate.
	Domain 3	Acknowledges and addresses individual racism, their own biases, assumptions, stereotypes and prejudices and provides care that is holistic, and free of bias and racism.

Term Description – Handbook – ROVER

	Domain 4	Ensures all outstanding investigations, results or procedures will be followed up by receiving units and clinicians.
--	----------	--

3. Outcome statements:

Domain 1: The prevocational doctor as practitioner	Domain 2: The prevocational doctor as professional and leader	Domain 3: The prevocational doctor as a health advocate	Domain 4: The prevocational doctor as a scientist and scholar
<p><input type="checkbox"/> 1.1 Place the needs and safety at the centre of the care process, working within statutory and regulatory requirements and guidelines. Demonstrate skills including effective handover, graded assertiveness, delegation and escalation, infection control, and adverse event reporting.</p> <p><input type="checkbox"/> 1.2 Communicate sensitively and effectively with patients, their family and carers, and health professionals, applying the principles of shared decision-making and informed consent.</p> <p><input type="checkbox"/> 1.3 Demonstrate effective, culturally safe interpersonal skills, empathetic communication, and respect within an ethical framework inclusive of indigenous knowledges of wellbeing and health models to support Aboriginal and Torres Strait Islander patient care</p> <p><input checked="" type="checkbox"/> 1.4 Perform and document patient assessments, incorporating a problem-focused medical history with a relevant physical examination, and generate a valid differential diagnosis and/or summary of the patient's health and other relevant issues</p> <p><input type="checkbox"/> 1.5 Request and accurately interpret common and relevant investigations using evidence-informed knowledge and principles of sustainability and cost-effectiveness</p> <p><input checked="" type="checkbox"/> 1.6 Safely perform a range of common procedural skills required for work as a PGY1 and PGY2 doctor.</p> <p><input checked="" type="checkbox"/> 1.7 Make evidence-informed management decisions and referrals using principles of shared decision-making with patients, carers and health care team</p> <p><input checked="" type="checkbox"/> 1.8 Prescribe therapies and other products including drugs, fluids, electrolytes, and blood products safely, effectively and economically</p> <p><input checked="" type="checkbox"/> 1.9 Recognise, assess, communicate and escalate as required, and provide immediate management to deteriorating and critically unwell patients.</p> <p><input type="checkbox"/> 1.10 Appropriately use and adapt to dynamic systems and technology to facilitate practice, including for documentation, communication, information management and supporting decision-making</p>	<p><input checked="" type="checkbox"/> 2.1 Demonstrate ethical behaviours and professional values including integrity, compassion, self-awareness, empathy, patient confidentiality and respect for all.</p> <p><input type="checkbox"/> 2.2 Identify factors and optimise personal wellbeing and professional practice, including responding to fatigue, and recognising and respecting one's own limitations to mitigate risks associated with professional practice.</p> <p><input type="checkbox"/> 2.3 Demonstrate lifelong learning behaviours and participate in, and contribute to, teaching, supervision and feedback.</p> <p><input checked="" type="checkbox"/> 2.4 Take increasing responsibility for patient care, while recognising the limits of their expertise and involving other professionals as needed to contribute to patient care.</p> <p><input type="checkbox"/> 2.5 Respect the roles and expertise of healthcare professionals, and learn and work collaboratively as a member of an inter-personal team.</p> <p><input type="checkbox"/> 2.6 Contribute to safe and supportive work environments, including being aware of professional standards and institutional policies and processes regarding bullying, harassment and discrimination for themselves and others.</p> <p><input type="checkbox"/> 2.7 Critically evaluate cultural safety and clinical competencies to improve culturally safe practice and create culturally safe environments for Aboriginal and Torres Strait Islander communities. Incorporate into the learning plan strategies to address any identified gaps in knowledge, skills, or behaviours that impact Aboriginal and Torres Strait Islander patient care.</p> <p><input type="checkbox"/> 2.8 Effectively manage time and workload demands, be punctual, and show ability to prioritise workload to manage patient outcomes and health service functions.</p>	<p><input type="checkbox"/> 3.1 Incorporate disease prevention, relevant health promotion and health surveillance into interactions with individual patients, including screening for common diseases, chronic conditions, and discussions of healthcare behaviours with patients</p> <p><input checked="" type="checkbox"/> 3.2 Apply whole-of-person care principles to clinical practice, including consideration of a patient's physical, emotional, social, economic, cultural and spiritual needs and their geographical location, acknowledging that these factors can influence a patient's description of symptoms, presentation of illness, healthcare behaviours and access to health services or resources.</p> <p><input checked="" type="checkbox"/> 3.3 Demonstrate culturally safe practice with ongoing critical reflection of the impact of health practitioner's knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism and discrimination.</p> <p><input type="checkbox"/> 3.4 Demonstrate knowledge of the systemic and clinician biases in the health system that impact on the service delivery for Aboriginal and Torres Strait Islander peoples. This includes understanding current evidence around systemic racism as a determinant of health and how racism maintains health inequity.</p> <p><input type="checkbox"/> 3.5 Demonstrate knowledge of the ongoing impact of colonisation, intergenerational trauma and racism on the health and wellbeing of Aboriginal and Torres Strait Islander peoples.</p> <p><input type="checkbox"/> 3.6 Partner with the patient in their healthcare journey, recognising the importance of interaction with and connection to the broader healthcare system. Where relevant, this should include culturally appropriate communication with caregivers and extended family members while also including and working collaboratively with other health professionals (including Aboriginal Health Workers, practitioners and Liaison Officers).</p>	<p><input checked="" type="checkbox"/> 4.1 Consolidate, expand and apply knowledge of the aetiology, pathology, clinical features, natural history and prognosis of common and important presentations in a variety of stages of life and settings.</p> <p><input checked="" type="checkbox"/> 4.2 Access, critically appraise and apply evidence from the medical and scientific literature to clinical and professional practice.</p> <p><input type="checkbox"/> 4.3 Participate in quality assurance and quality improvement activities such as peer review of performance, clinical audit, risk management, incident reporting and reflective practice.</p> <p><input type="checkbox"/> 4.4 Demonstrate a knowledge of evidence-informed medicine and models of care that support and advance Aboriginal and Torres Strait Islander health.</p>

Term Description – Handbook – ROVER

4. Supervision details:			
Supervision Role	Name	Position	Contact
DCT/SIT	<i>Dr Chiu Kang</i>	Supervisor of HMO Training	Chiu.Kang@nh.org.au
Term Supervisor	<i>Dr Sarah Condron</i>	Consultant Paediatric Surgeon	Sarah.Condron@nh.org.au
Clinical Supervisor (primary)	<i>Allocated Operating Surgeon on operation report</i>	Operating Surgeon	Via Switchboard
Cinical Supervisor (day to day)	<i>Allocated Registrar on post-operative ward service</i>	Ward service Registrar	Via Switchboard
EPA Assessors <i>Health Professional that may assess EPAs</i>	<ul style="list-style-type: none"> • All Consultants • All Registrars • Click or tap here to enter name and role 		
Team Structure - Key Staff			
Name	Role	Contact	
Dr Dennis Gyomber	Divisional Director of Surgery	Dennis.Gyomber@nh.org.au	
Dr Sarah Condron	Consultant Paediatric Surgeon/Surgical Term Supervisor	Sarah.Condron@nh.org.au	
Dr Michael Farber	BHS Clinical Lead		
Unit 1 NUM	BHS Unit 1 NUM	Click or tap here to enter text.	
Allocated AGSU Registrar	AGSU	X52628	
Allocated Registrar on ward service	Surgical Registrar or Consultant	Via Switchboard	
Critical Care ward HMO	Critical Care team	Via medtasker	

5. Attachments:	
R-over document	See below
Unit orientation guide	See below
Timetable (sample in appendix)	See below

6. Accreditation details (PMCV use only)		
Accreditation body:	Click or tap here to enter text.	
Accreditation status:	Click or tap here to enter text.	
Accreditation ID:	Click or tap here to enter text.	
Number of accredited posts:	PGY1: number	PGY2: number

Term Description – Handbook – ROVER

Accredited dates:	Approved date: date.	Review date: date.
--------------------------	----------------------	--------------------

7. Approval		
Reviewed by:	Click or tap here to enter text.	Date: Click or tap to enter a date.
Delegated authority:	Click or tap here to enter text.	Date: Click or tap to enter a date.
Approved by:	Click or tap here to enter text.	Date: Click or tap to enter a date.

Appendix							
Timetable example							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time
	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Afternoon	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time
	Click or tap here to enter text.	12:30 – 13:30 BHS Education	Click or tap here to enter text.	12:30 – 13:30 HMO Education	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Evening	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time	Enter Time
	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	17:30 Surgical Forum	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Hours	Total	Total	Total	Total	Total	Total	Total

Term Description – Handbook – ROVER

BHS Surgical Registrar	Mon	Tues	Wed	Thur	Fri	Sat	Sun	Mon	Tues	Wed	Thur	Fri	Sat	Sun
Reg 1	0730-1730	0730-1730	0730-1200	0730-1730	0730-1730			0730-1730	0730-1730	0730-1200	0730-1730	0730-1730		
			Regi strar Training Time							Regi strar Training Time				
BHS Surgical HMO														
HMO 1					0730-2130	0730-2130	0730-2130	1200-2200	1200-2200	1200-2200	1400-2200			
HMO 2	1200-2200	1200-2200	1200-2200	1400-2200				0700-1430	0700-1500	0700-1430	0700-1500	0700-1400		
HMO 3	0700-1430	0700-1500	0700-1430	0700-1500	0700-1500							1130-2130	0730-2130	0730-2130

9. Hospital Orientation

Hospital orientation occurs at the beginning of each term. Attendance is mandatory and paid non-clinical time. This is separate to the unit orientation. Follow the [link](#) for details, password: NorthernDoctors

Location	NCHER, Northern Hospital – Epping	185 Cooper Street, Epping 3076
Facilitator	Medical Education Unit	Email: MedicalEducationUnit@nh.org.au
Date	First day of each term	
Start	08:00	

10. Unit Orientation

Unit Orientation occurs at the beginning of each term. Attendance is mandatory and paid time.

Orientation that occurs outside of your rostered hours should be submitted as overtime on the overtime reporting portal

Location	TBC
Facilitator	TBC
Date	TBC
Start	TBC

11. Unit Overview

Department	Uni 1
Location	Broadmeadows Health Service

Term Description – Handbook – ROVER

Inpatient Beds	Max 15
Outpatients Clinics	Gen Surg Friday clinics? TBC
Day Procedures	N/A
Virtual Unit	N/A

12. Safety

Unit Specific Safety & Risks
See unit specific handbooks

- Multiple units cross cover requiring good communication and handover between staff
- No onsite regular Consultant

13. Communication

Medtasker	Inpatients Registrar, Inpatients HMO, Crit Care HMO
WhatsApp	Yes
Pager	#7034
MS Teams	N/A

14. Handover Process

Morning	07:00 Receive from the night cover HMO in Doctors office
Afternoon	12:00 Receive handover from AM Surgical HMO in Doctors office
Night	21:30 Handover to night cover HMO in Doctors office
Weekend	16:30 Friday PM, handover patients to the weekend on the Critical Care HMO

15. Shift Structure

	HMO	Registrar
Day	07:30 – 17:30	
Afternoon	12:00 – 22:00	
Night	N/A	
Weekend	07:00 – 21:00	

16. Shift Roles & Responsibilities

	HMO	Registrar
Day	Receive handover from night HMO HMO completes the ward round on all surgical patients Discuss with home team registrar if they are present for the ward round	

Term Description – Handbook – ROVER

	<p>If there is no home team registrar discuss ward patients with the corresponding operating surgeon</p> <p>Complete ward tasks, admissions, discharges</p> <p>Attend theatre when ward tasks are stable</p>	
Afternoon	<p>Receive handover from AM HMO</p> <p>Complete ward tasks, admissions, discharges</p> <p>Attend theatre when ward tasks are stable</p>	
Night	<p>Receive Handover from PM HMO</p> <p>Complete ward tasks, admissions, discharges</p>	
Weekend	<p>Saturday</p> <p>The surgical HMO assists in theatre only (The surgical ward cover is performed by the critical care HMO)</p> <p>Sunday</p> <p>Complete the surgical ward round and complete ward tasks for surgical patients</p> <p>Huddle with crit care and GEM HMOs to distribute workload for other BHS units to assist medical colleagues.</p>	

17. Common Conditions

TBC

18. Common Procedures

TBC

19. Clinical Guidelines

The My Favourite Links page on the intranet contains the links to a number of useful clinical guidelines

<https://intranet.nh.org.au/applications/>

ETG- Electronic Therapeutic Guidelines

AMH- Australian Medicines Handbook

Up to Date

PROMPT- This site contains the hospital policy and procedure manuals. It can only be accessed from the intranet -

<https://intranet.nh.org.au/departments-and-services/prompt-policy-procedures-guidelines/prompt-policies-procedures-and-forms/>

Term Description – Handbook – ROVER

20. Routine Orders

Pathology	TBC
Radiology	TBC
Pharmacology	TBC

21. IT Programs

EMR	<p>The EMR is in use for documentation, medication ordering and radiology/pathology requests. It is being used for all inpatients, as well as maternity clinics and pre-anaesthetic clinics. Located in the intranet > My Favourite Links > EMR Live Environment</p> <p>EMR Training courses are located on the LMS- https://mylearning.nh.org.au/login/start.php</p> <p>Training is compulsory; you will need to complete the elearning within the first week of commencing. Please contact medical workforce, or check the EMR website for more information on how to complete EMR training https://emr.nh.org.au/</p> <p>When starting a new rotation, please reach out to Term Supervisor to ensure you are oriented to the EMR specific workflows for that unit as well.</p> <p>EMR is NOT a primary communication system. Please use Medtasker and phones for referrals and communication.</p>
CPF	<p>The source of information for all outpatients' clinics, investigations, GP referrals and scanned admission notes prior to September 2023.</p> <p>Located in the intranet > My Favourite Links > CPF https://cpf.nh.org.au/udr/</p>
PACS	<p>XERO Viewer Pacs- https://nivimages.ssg.org.au/ or located in My Favourite Links, look for the CXR icon</p> <p>This is where you can find radiology images</p>
My Health Record	<p>Centralised health record https://shrdhipsviewer.prod.services/nhcn</p>
Safe Script	<p>Monitoring system for restricted prescription medications https://www.safescript.vic.gov.au/</p>

22. Documentation

Admission	On EMR
Ward Rounds	On EMR
Discharge Summary	On EMR
Outpatient Clinics	On CPF
CDI Queries	Via medtasker
Death Certificates	https://www.bdm.vic.gov.au/medical-practitioners
Coroners	https://coronerscourt.vic.gov.au/report-death-or-fire/how-report-death

23. Referrals

Internal	
External	

24. Clinical Deterioration

Escalation Process	Contact the operating surgeon
--------------------	-------------------------------

Term Description – Handbook – ROVER

PreMet	HMO attends
Code	HMO and Registrar attend

25. Night Shift Support

Unit	Contact unit registrar or consultant that performed operation
Periop	N/A
Take 2 @ 2	N/A

26. Assessments: PGY1 & PGY2

All forms are located on the Northern Doctors website under the Assessments tab	
Beginning of Term	Meet with Term Supervisor to set learning goals for the term using the Term Description Learning Objectives as a basis for the discussion
Mid-Term & End of Term	To be completed at the mid and end of term meetings
EPAs	Minimum of x2 EPA assessments to be completed per term

27. Mandatory Training

- Mandatory Training is located on the LMS- <https://mylearning.nh.org.au/login/start.php>
- Mandatory training is compulsory and part of your contract with Northern Health and needs to be completed by the first month of your start date. If not completed you will come off the floor to complete.
- Hand Hygiene needs to be completed by the end of your first week.
- If you have completed the mandatory training elsewhere you may be able to apply for recognition of prior learning

28. Unit Education

TBC

29. Unit Meetings

TBC

30. Research and Quality Improvement

TBC

Term Description – Handbook – ROVER

31. Career Support

TBC

32. Medical Students on the Unit

TBC

33. Rostering

Shift Swap	<p>The doctor initiating the roster swap is responsible for arranging with an appropriate colleague. Once you have arranged a colleague to perform the swap, please email your MWU coordinator and cc in the colleague.</p> <p>All swaps should be kept to within the pay period fortnight where possible. In exceptional circumstances where this cannot be achieved, please discuss with the MWU coordinator prior.</p> <p>All shift swaps should be like hours for like hours.</p> <p>Proposed shift swaps must be emailed to your MWU coordinator for approval.</p>																							
Unplanned Leave-Notification and documentation process	<p>Personal Leave documentation required:</p> <p>For 3 single absences per year, the doctor will not be required to provide any supporting evidence to substantiate their personal leave.</p> <p>For other days absent due to personal illness or injury the doctor is required to provide evidence of illness. To be eligible for payment, the doctor is required to notify the Health Service two hours before the start of their shift, or as soon as practicable.</p> <table border="1" data-bbox="339 1272 1544 1888"> <tr> <td data-bbox="339 1272 732 1375">In hours Monday to Friday 0730 - 1630</td> <td data-bbox="732 1272 1070 1375">Step 1: Medical Workforce Reception 8405 8276</td> <td data-bbox="1070 1272 1252 1375">Step 2: Notify unit</td> <td data-bbox="1252 1272 1544 1375">Please ensure you notify both MWU & your unit</td> </tr> <tr> <td data-bbox="339 1375 732 1628">After hours Monday to Friday Between 1630 – 2200</td> <td data-bbox="732 1375 1070 1628">Step 1: Between 1630 – 2200 Medical Workforce On-call Phone 0438 201 362</td> <td data-bbox="1070 1375 1252 1628">Step 2: Notify unit (at a suitable time)</td> <td data-bbox="1252 1375 1544 1628">Please ensure you notify both MWU or After Hours (depending on the time) & your unit at a suitable time.</td> </tr> <tr> <td data-bbox="339 1628 732 1753">After hours Monday to Friday Between 2200-0730</td> <td data-bbox="732 1628 1070 1753">Step 1: Between 2200-0730 Hospital / After Hours Coordinator (8405 8110 or via switch)</td> <td data-bbox="1070 1628 1252 1753"></td> <td data-bbox="1252 1628 1544 1753"></td> </tr> <tr> <td data-bbox="339 1753 732 1888">In hours Weekends & Public Holidays 0700 - 2200</td> <td data-bbox="732 1753 1070 1888">Step 1: Medical Workforce On-call Phone 0438 201 362</td> <td data-bbox="1070 1753 1252 1888">Step 2: Notify</td> <td data-bbox="1252 1753 1544 1888">Please ensure you notify both MWU & your unit</td> </tr> <tr> <td data-bbox="339 1888 732 2013">After hours Weekends & Public Holidays 2200-0700</td> <td data-bbox="732 1888 1070 2013">Step 1: Hospital / After Hours Coordinator (8405 8110 or via switch)</td> <td data-bbox="1070 1888 1252 2013">Step 2: Notify unit</td> <td data-bbox="1252 1888 1544 2013">Please ensure you notify both MWU & your unit</td> </tr> </table>				In hours Monday to Friday 0730 - 1630	Step 1: Medical Workforce Reception 8405 8276	Step 2: Notify unit	Please ensure you notify both MWU & your unit	After hours Monday to Friday Between 1630 – 2200	Step 1: Between 1630 – 2200 Medical Workforce On-call Phone 0438 201 362	Step 2: Notify unit (at a suitable time)	Please ensure you notify both MWU or After Hours (depending on the time) & your unit at a suitable time.	After hours Monday to Friday Between 2200-0730	Step 1: Between 2200-0730 Hospital / After Hours Coordinator (8405 8110 or via switch)			In hours Weekends & Public Holidays 0700 - 2200	Step 1: Medical Workforce On-call Phone 0438 201 362	Step 2: Notify	Please ensure you notify both MWU & your unit	After hours Weekends & Public Holidays 2200-0700	Step 1: Hospital / After Hours Coordinator (8405 8110 or via switch)	Step 2: Notify unit	Please ensure you notify both MWU & your unit
In hours Monday to Friday 0730 - 1630	Step 1: Medical Workforce Reception 8405 8276	Step 2: Notify unit	Please ensure you notify both MWU & your unit																					
After hours Monday to Friday Between 1630 – 2200	Step 1: Between 1630 – 2200 Medical Workforce On-call Phone 0438 201 362	Step 2: Notify unit (at a suitable time)	Please ensure you notify both MWU or After Hours (depending on the time) & your unit at a suitable time.																					
After hours Monday to Friday Between 2200-0730	Step 1: Between 2200-0730 Hospital / After Hours Coordinator (8405 8110 or via switch)																							
In hours Weekends & Public Holidays 0700 - 2200	Step 1: Medical Workforce On-call Phone 0438 201 362	Step 2: Notify	Please ensure you notify both MWU & your unit																					
After hours Weekends & Public Holidays 2200-0700	Step 1: Hospital / After Hours Coordinator (8405 8110 or via switch)	Step 2: Notify unit	Please ensure you notify both MWU & your unit																					
Overtime	<p>All overtime should be submitted into the Overtime Portal</p> <p>This can be accessed via the intranet whilst onsite at Northern Health</p> <p>Please include the reason for your overtime- i.e. ward workload, delayed handover, include UR where relevant.</p>																							

Term Description – Handbook – ROVER

34. JMO Rover	
JMO Tips & Tricks	

35. Document Status		
Updated by	Dr Sarah Condron	December 2023
Reviewed by	Dr Natina Monteleone	01/02/2024
Next review date		