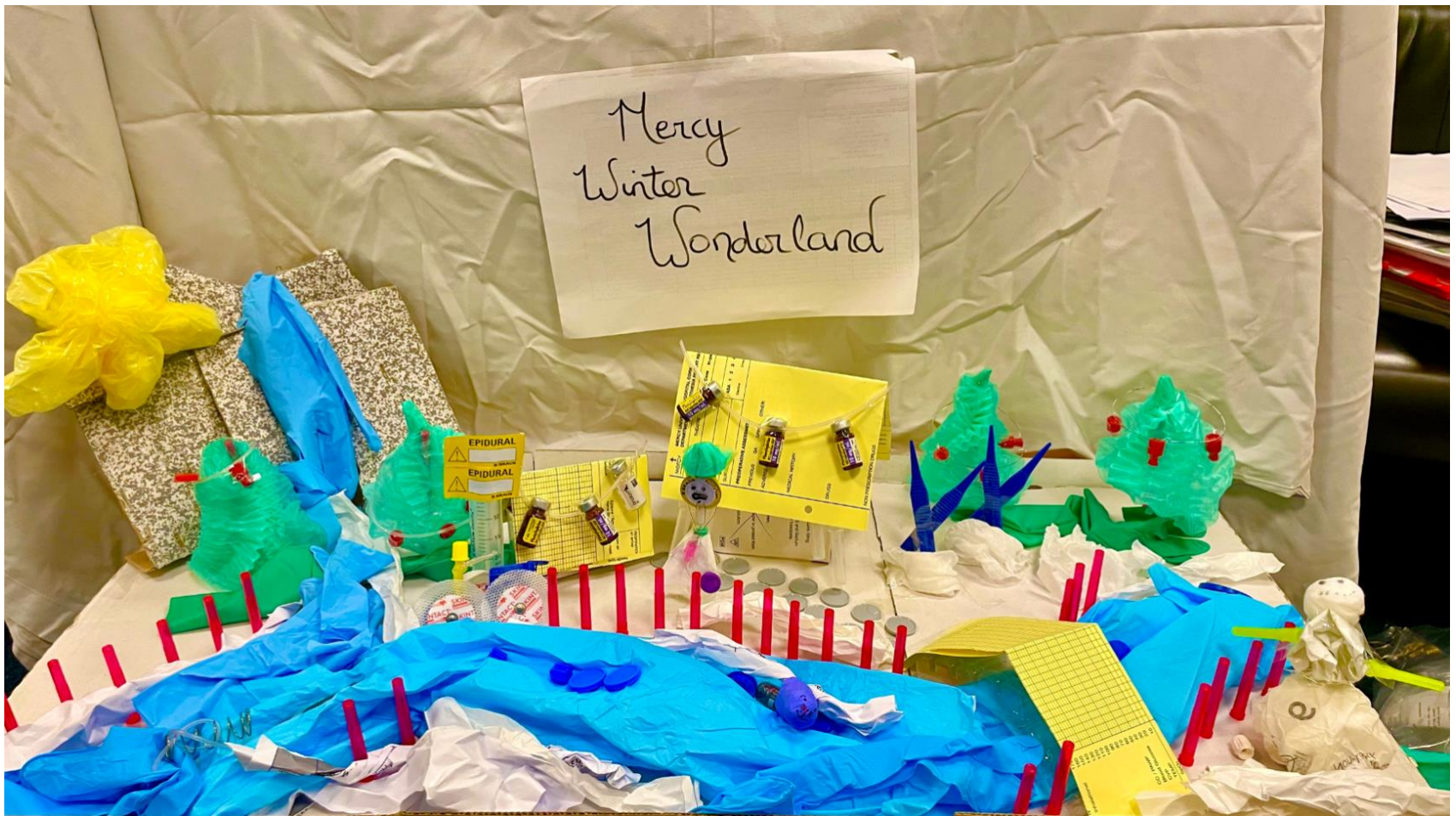




CAT NEWS

CAT

December 2021



WINNER: Mercy University Hospital

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Editor's Note

Sophia & Kirsten

CAT News Editor & Chair

Hello SATs and welcome to the December edition of CAT news. Despite another disappointingly COVID-tainted holiday season, we hope you are still getting as festive and merry as possible. It goes without saying that we all assumed the vaccine hero would have gotten life back to normal by now but we just have to keep trucking on and try to stay positive, active and social (albeit virtually). Hopefully, CAT news can distract you and bring your attention to some non-COVID news!

The CAT team have been working hard over the last six months on two important projects of which we have included the reports in this edition for your attention. The first is our biannual on-call audit, carried out by Drs Barbara Cusack & Kirsten Joyce, to ascertain the call frequency across training sites. The second is the trainee survey which many of you kindly took part in, carried out by Drs, Gillian O'Keefe, Lauren O'Callaghan and Kirsten Joyce.

CAT are also happy to acknowledge our very own trainee who participated in the Tokyo Olympics, Dr Carolyn Hayes, SAT1 in CUH. What an incredible achievement! We have taken advantage of this rare opportunity and included an interview with Carolyn and her experience in Japan.

We also have some news about the Medical Careers Evening that took place for all those budding Anaesthesiologists, the National Patient Safety Annual Conference, an update on ISRA and a Q&A session to find out more about a career in Pain Medicine.

Of course, we had to carry on the tradition this year of the now established Annual Christmas Decoration Competition. The winner shone through, congratulations to Thank you to our judge Mr Martin McCormack. Fair play to everyone who took part, what a creative bunch you all are!

We finish off the December edition with the usual round up of LAT news from around the country, as well as the updated calendar of events for the new year.

We hope you enjoy the read 😊

Chat again in the new year. 2022, we have high hopes for you, don't let us down!!

cat@coa.ie

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CAT Updates – Call Audit

In both September 2020 and May 2021, the CAT wrote to the Training Department to highlight the issue of call rota pressure at training sites around the country, having previously conducted surveys via Lead Anaesthesia Trainees (LATs) at the individual training sites. We identified that a number of sites were working off an NCHD call rota with a frequency in excess of 1:6 as recommended by the Model of Care for Anaesthesiology, National Programme Clinical Programme for Anaesthesia. We are grateful to the College Council and the Training Department for recognising the importance of this data collection and for their support and encouragement in conducting regular re-audits.

We are all aware that recruitment and retention of healthcare staff is an ongoing national crisis, and the COVID-19 pandemic has only compounded this issue. However, there are some centres that feel this more keenly than others. The aim of this audit is to highlight these vulnerable centres in order to assist with future manpower recruitment and redistribution.

This year we have repeated the audit with some key changes in an effort to improve the accuracy of reporting and to add robustness to the data. Rota-makers at each training site were approached and asked to quantify both the number the call tiers staffed at their institution, along with an average call frequency for each tier over the preceding 8 weeks. This was done to account for leave of any kind and hence why some of the numbers reported are lower than basic maths would suggest. We present these figures, along with the previous year's data for reference.

	Call Tiers			Total Number of NCHDs			NCHDs available for call			Average call frequency		
	Sep-20	Apr-21	Oct-21	Sep-20	Apr-21	Oct-21	Sep-20	Apr-21	Oct-21	Sep-20	Apr-21	Oct-21
Mullingar	2	2	2	11	12	9	10	12	6	5	6	3
Mercy	2	2	2	13	12	13	13	12	12	6.5	6	4
Wexford	2	2	2	10	9	8	10	9	8	5	4.5	4
Coombe	2	2	2	19	16	14	15	16	11	7.5	8	4.5
Holles Street	2	2	2	10	12	10	9	11	10	4.5	5.5	5
Rotunda	2	2	2	12	13	10.5	12	12	10.5	6	6	5.25
Connolly	2	2	2	16	14	12	13	13	12	6.5	6.5	6
Sligo	2	2	2	15	15	12	11	14	12	5.5	7	6
Beaumont	4	5	4	40	40	41	35	35	35	8.75	7	6.1
Letterkenny	2	2	2	11	12	15	11	11	14	5.5	5.5	6.5
Drogheda	3	3	3	26	28	31	22	28	30	7.33	9.33	6.666
Mayo	2	2	2	8	12	14	7	12	14	3.5	6	7
St Vincent's	4	5	4	26.5	35	36	26.5	29	28	6.625	5.8	7
Temple Street	2	2	2	15.7	14	17	15.7	14	16	7.85	7	7
Limerick	4	4	4	27	31	37.5	22	24	36.5	5.5	6	7.25
Waterford	3	3	3	19	21	21	16	18	20	5.33	6	7.333
OLCHC	3	3	3	27	28	29	27	27	28	9	9	7.666
SJH	4	4	4	37	40	40	35	31	34	8.75	7.75	7.75
UCHG	6	5	5	42	36	40	38	36	39.5	6.33	7.2	7.9
Tallaght	4	4	4	23	30	32	23	27	32	5.75	6.75	8
RVEEH		1	1		6	6		6	6		6	8
CUH	5	5	6	44	48	53	35	45	52	7	9	8.6
Cappagh			none			6			6			none
Mater	4	4		39	40		39	40		9.75	10	
SIVUH	1	1		8	7		7	6		7	6	

Currently, 24% (n=6) of training sites are operating on an NCHD call frequency greater than the recommended 1:6, compared with 16% (n=4) in May 2021 and 36% (n=9) in September 2020. A further 28% (n=7) of centres are operating within the “borderline” category of between 1:6 and 1:7 call frequency, which has reduced significantly compared with earlier this year (52%, n=13).

Mullingar Regional Hospital is the most severely in breach of the Training Agreement, where trainees are currently experiencing the greatest NCHD call frequency, with a current average of 1 in 3. Both the Coombe and Rotunda have also dropped significantly on this audit due to leave and illness. Of note, over the last three audits, both Wexford and Holles Street have been persistently experiencing a call frequency greater than 1:6.

As yet, we do not have the exact data from the Mater due to a recent surge rota with an additional call tier meaning on-call frequency is in flux. However, we have been informed it is currently operating above a 1:6 frequency. The South Infirmary and Victoria University Hospital elected not to participate in the audit.

We have also endeavoured to further breakdown call frequency by tier to highlight any potential imbalances. We hope that this data will be made available to the college and trainees in due course.

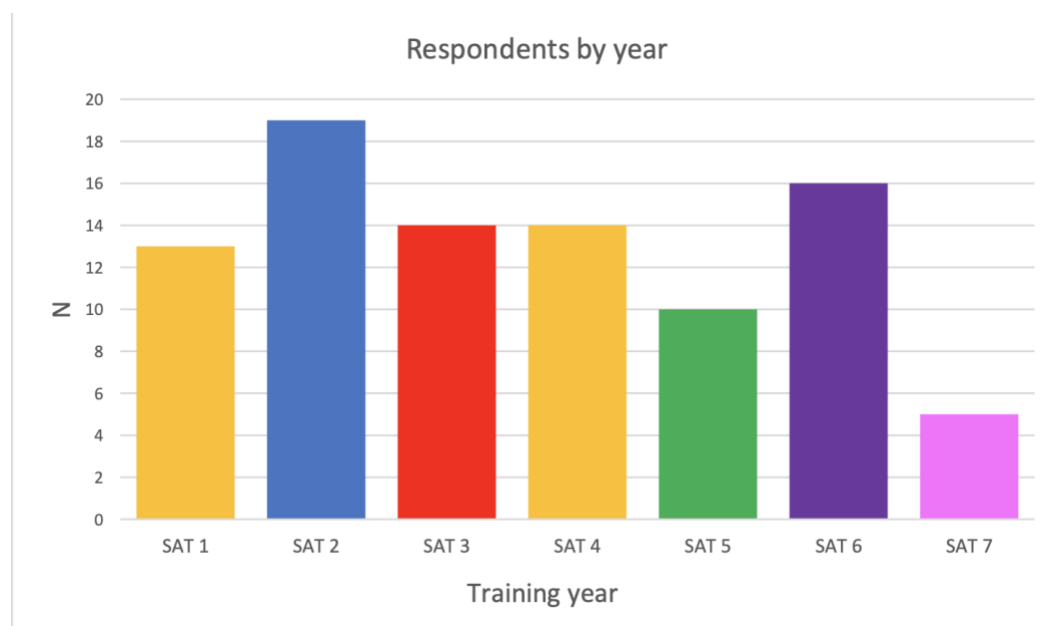
As the representative body for the trainees, we have historically worked hard in conjunction with the College to improve the trainee experience and improve general welfare and wellbeing of trainees in Ireland. We would like to thank all the individual rota-makers for taking the time to respond to the audit, and once again we acknowledge and thank the College for their support and hard work undertaken thus far. Call burden and its adverse effects on trainee mental health and wellbeing was frequently cited in our recent national trainee survey and our concerns relating to this have been formally raised. It is our hope these results will prove useful in addressing the continued call rota pressures at training sites going forward.

CAT Updates – SAT Training and Wellbeing Survey

Committee of Anaesthesiology Trainees, 2021

In 2018, the Committee of Anaesthesiology Trainees conducted a survey targeting trainees' attitudes to training, along with an assessment of their overall wellbeing. This survey was valuable as it highlighted focus areas for improvement for both the CAT and the college, including the recent development of an "ICU for Beginners" lecture series. In September and October this year, the CAT circulated a similar online survey, and going forward it is hoped that this will be done cyclically every three years. We are happy to present some of the preliminary data below.

Firstly, we would like to thank all those that took the time to respond – we appreciate that personal time is at a premium now more than ever! 103 trainees responded (53 male, 50 female), representing 41% of the total SAT complement, with good representation across the SAT years. There were 50 questions, where four themes were explored: training, wellbeing, practicalities of changeover and post-CSCST aspirations. Many of the questions involved free-text answers, on which we intend on performing content analysis in due course.



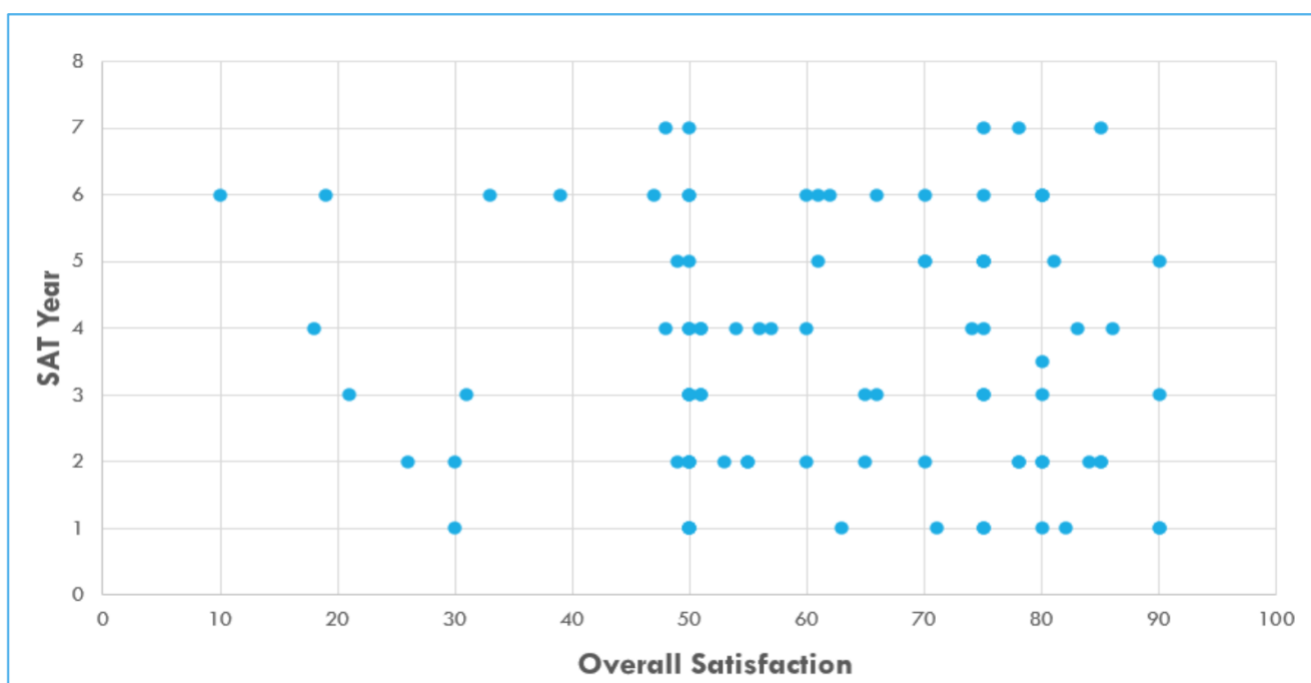
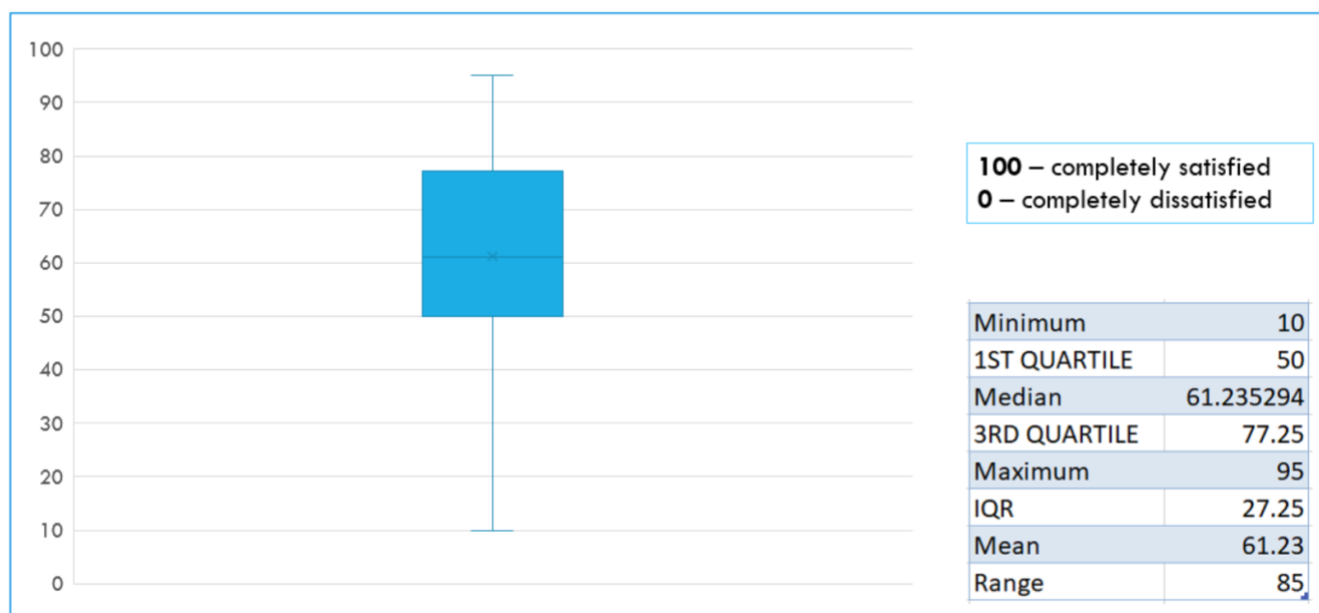
We invite you all to explore the preliminary results below, and we look forward to sharing the complete results in the near future.

Part 1 - Training

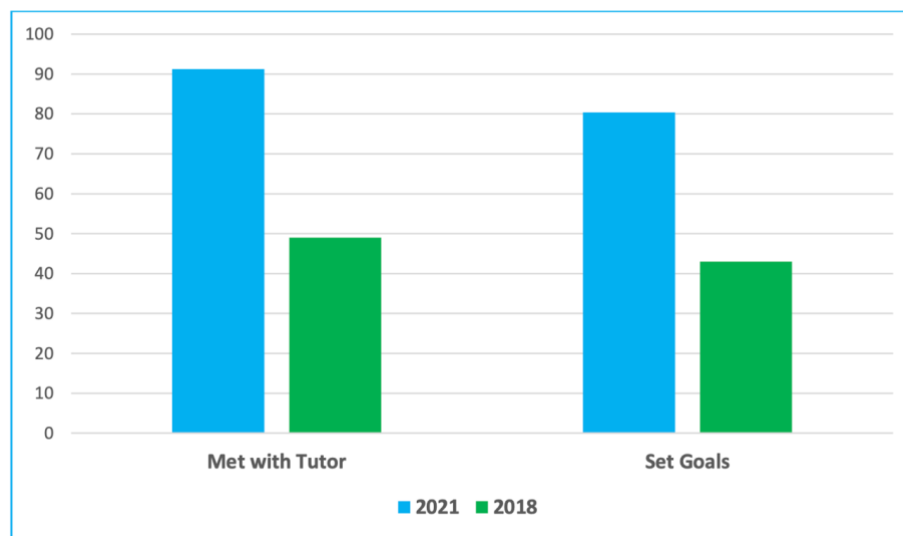
Using a modified Likert scale, respondents were asked to quantify their overall satisfaction with the training scheme, with 0 being “completely dissatisfied” and 100 being “completely satisfied”.

There was a wide range of responses as illustrated in the graphs below. The median score was 61.2 with an inter-quartile range between 50-77.25. While this was a different metric used to the SAT survey in 2018, the results appeared to be similar. There were no significant response clusters within any of the SAT years.

How would you rate your experience of training on the SAT Programme?



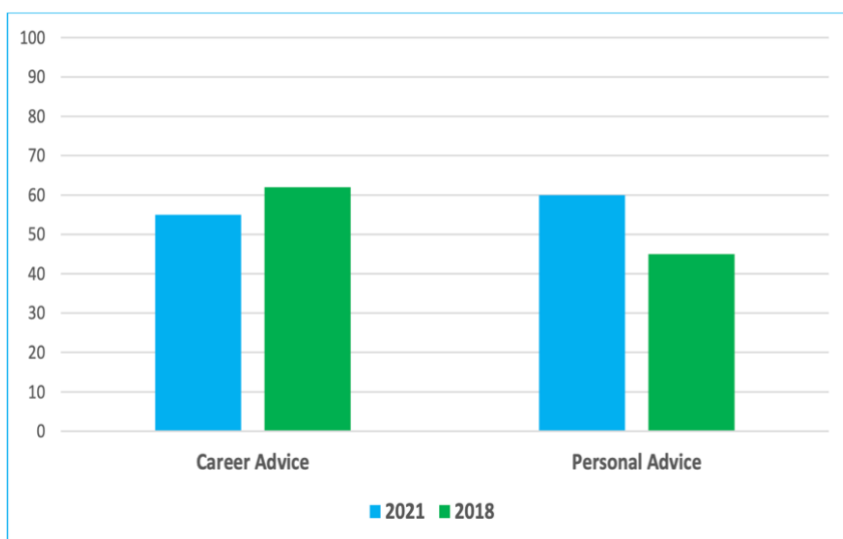
Have you met your College of Anaesthesiologists Tutor?



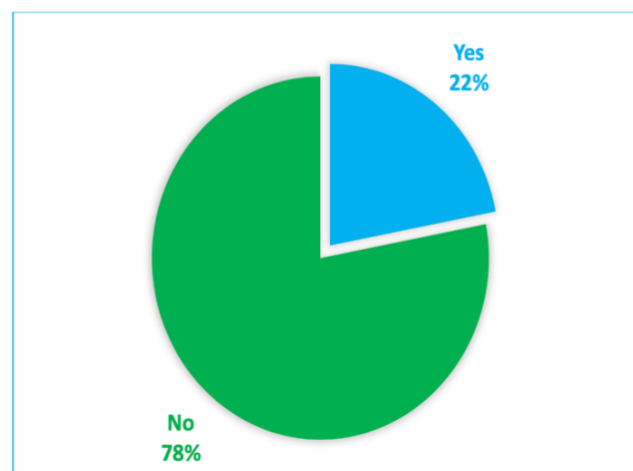
Compared with 2018, there was a marked improvement in the numbers of trainees that had met with College of Anaesthesiologists tutors and in those that had set goals for this rotation.

Over **98%** of respondents stated that their institutions provided formal teaching sessions outside of clinical duties.

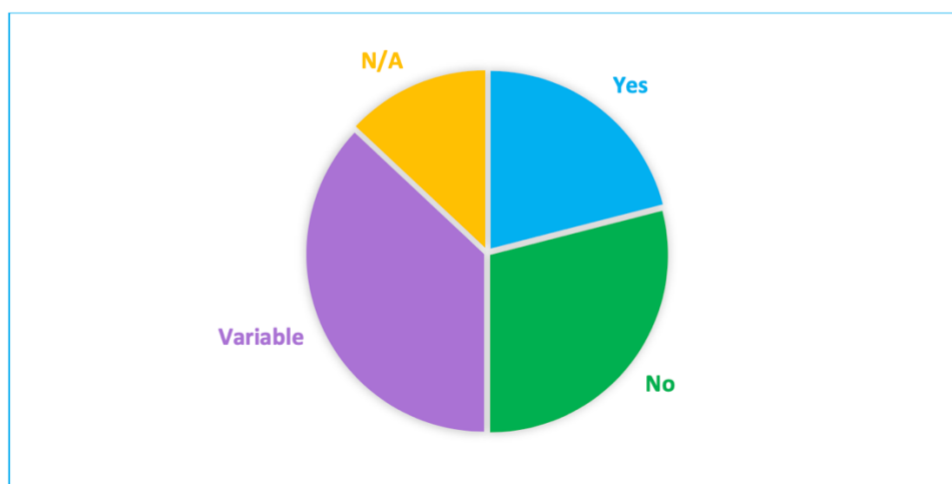
Do you have a trusted point of contact for career/personal advice?



Does your current hospital provide the opportunity for you to give feedback on your trainers?



Do you feel you get adequate time allocated to you during your modules?

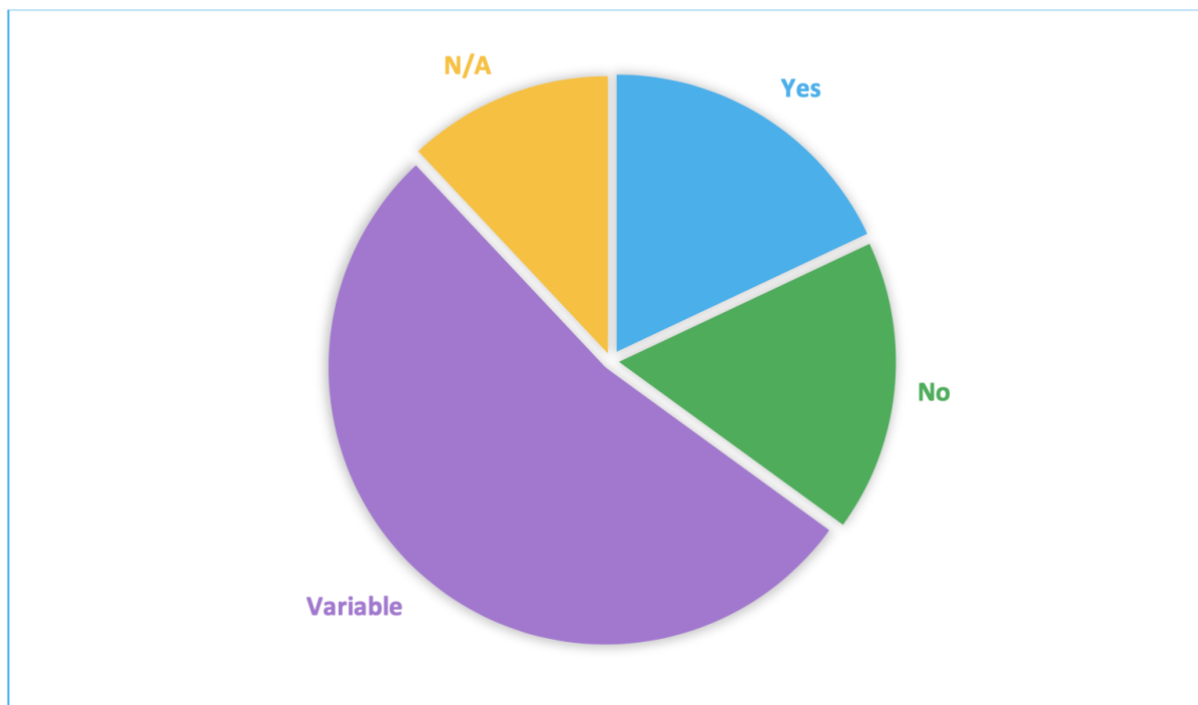


For those that modules are applicable to, less than one-third felt they were allocated adequate time to their module, and many felt underprepared after module completion.

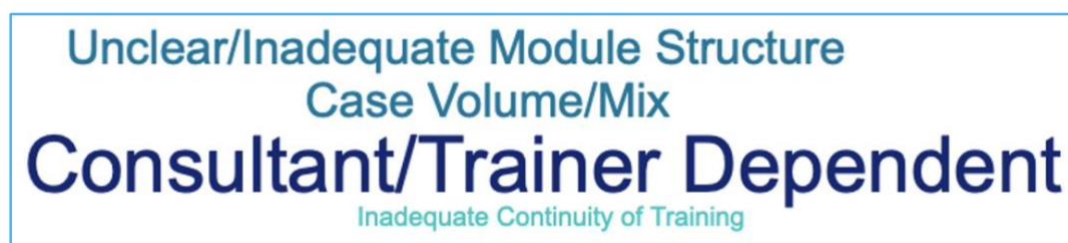
The most common cited reason (see word cloud below) for this was due to call frequency (pre- and post- call days, call requirements in other sites e.g. ICU etc.) as many modules offered are often only a few weeks to keep up with high trainee demand.



Do you feel you get adequate training during your modules?



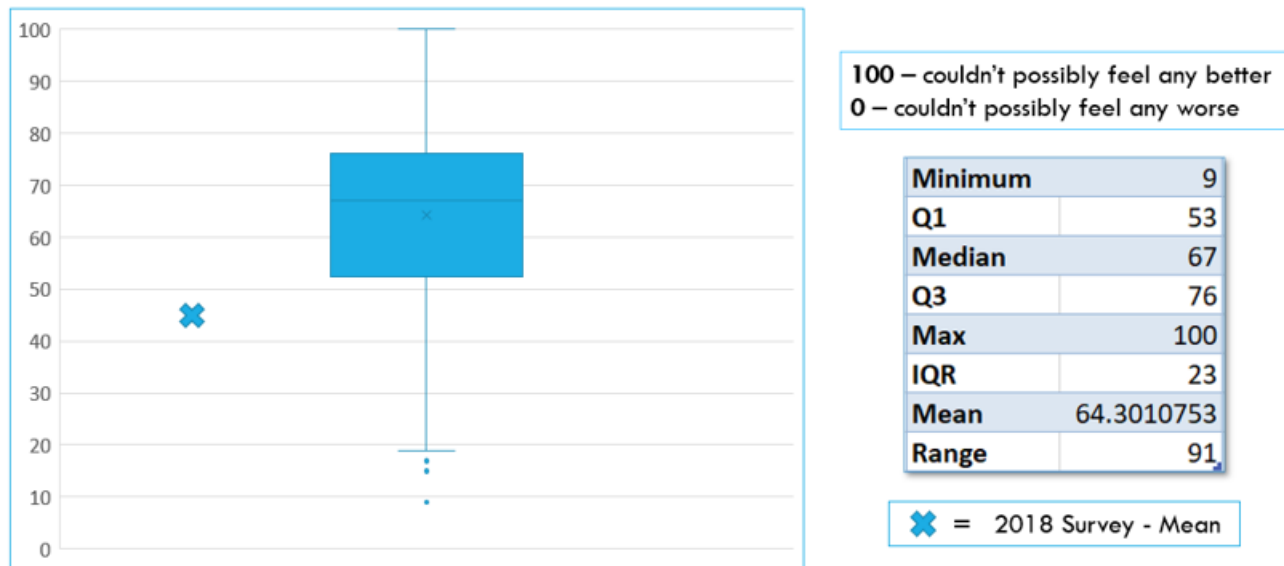
Regarding training during modular time, the overall opinion was variable, with many modules felt to be “consultant-dependent”. Unclear and variable structure to modules across training sites was also frequently cited.



Part 2 - Wellbeing

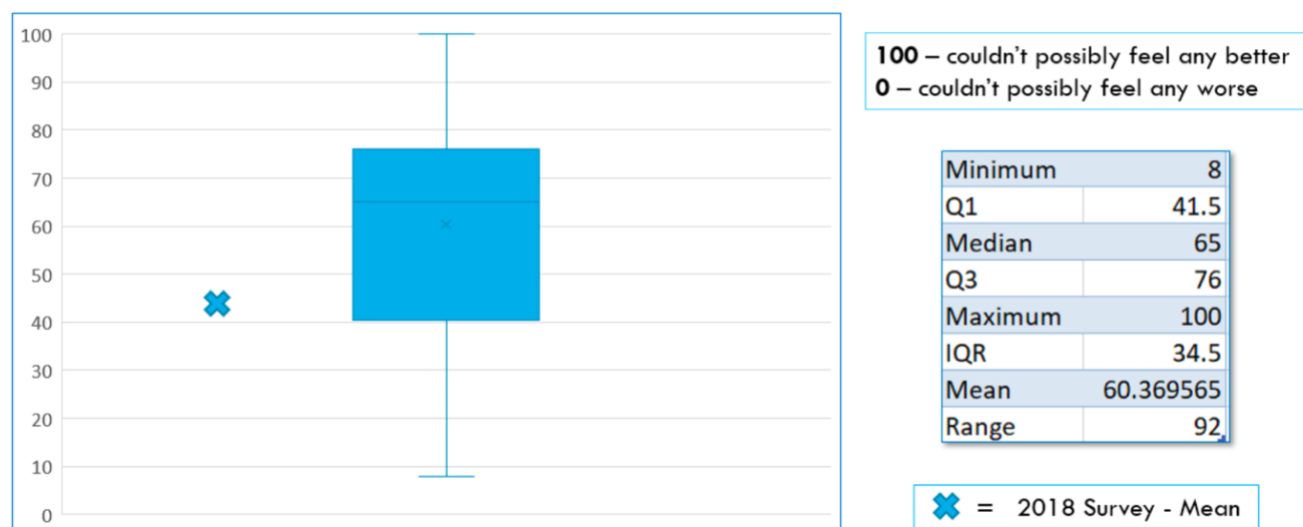
Similar to the 2018 survey, a modified Likert scale was used for the following two questions. Respondents were asked to quantify their perceived physical and mental health on a scale of 0 to 100, where 0 represented “couldn’t possibly feel any worse” and 100 being “couldn’t possibly feel any better”.

How well do you feel physically?



There was a wide range of responses, with an interquartile range between 53-76. Compared with the previous survey, there was an improvement in mean score (64.3 vs 45).

How well do you feel mentally?



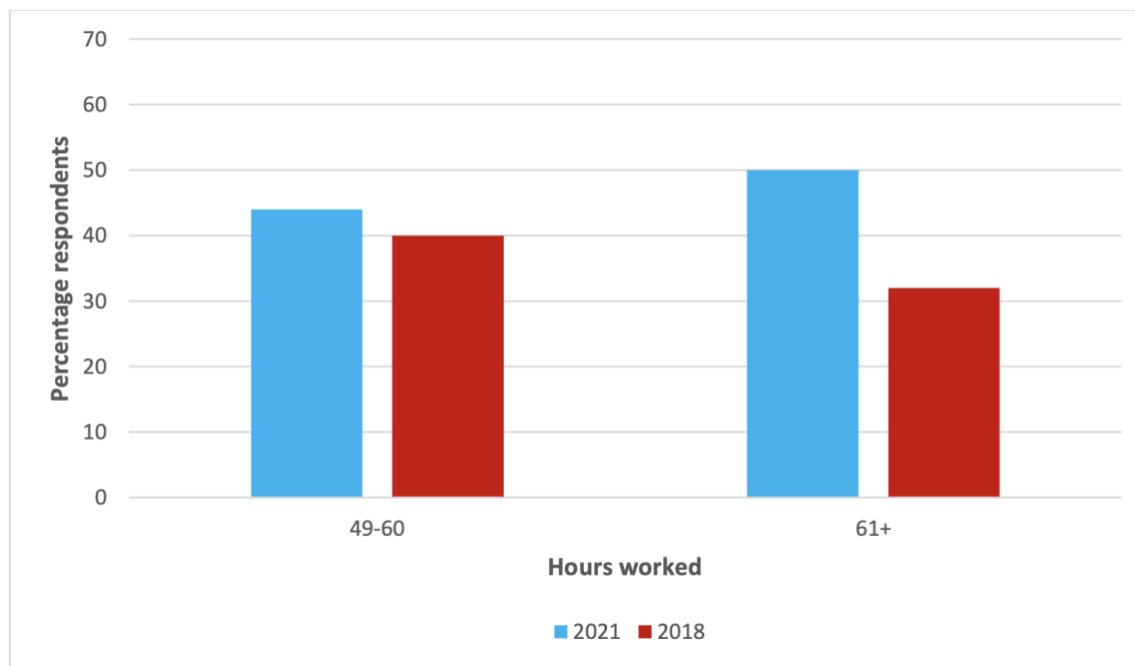
Again, there was a wide range of responses. However, the mean score was also improved in comparison with the previous survey (60.3 vs 45).

Does work have an impact on your personal life? In what way?

For this question we have created another word cloud to illustrate the proportions of responses by group. We received 100 free-text responses, of which 45 related solely to the impact of call frequency and hours worked on personal lives.



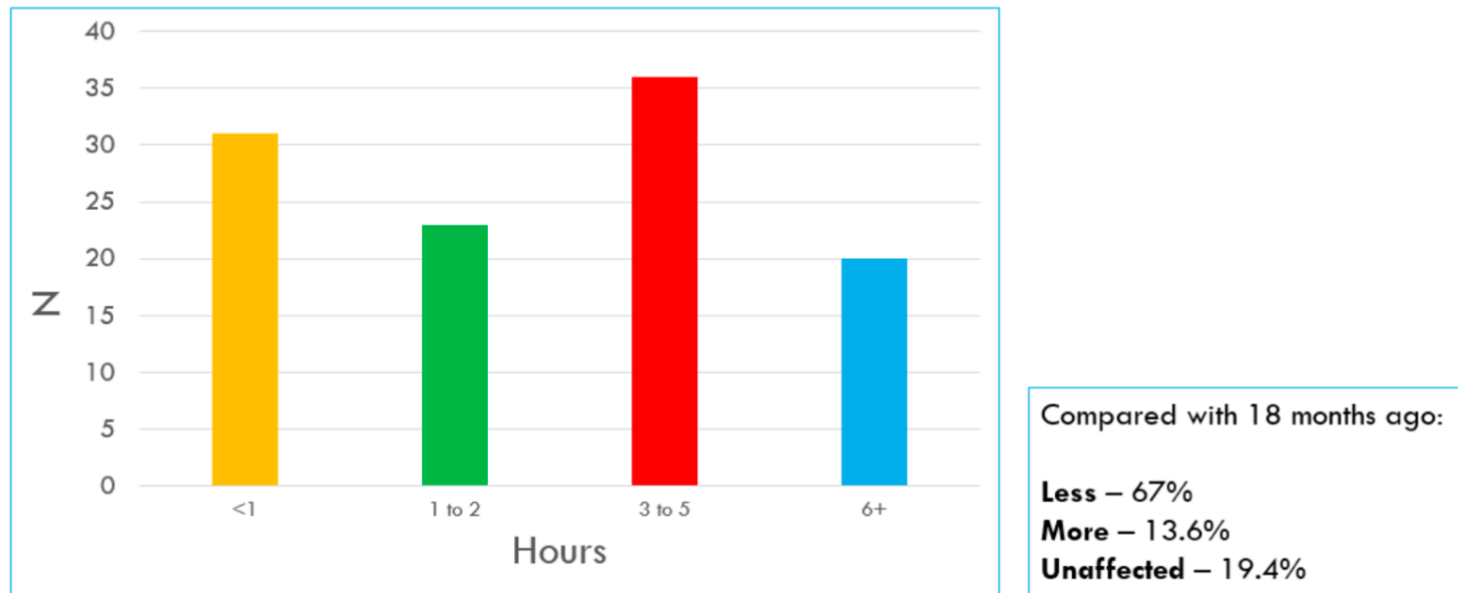
On average, how many hours per week did you work in the last month?



94.68% of respondents worked over 48 hours per week in the past month, with **50%** working 61 hours or more.

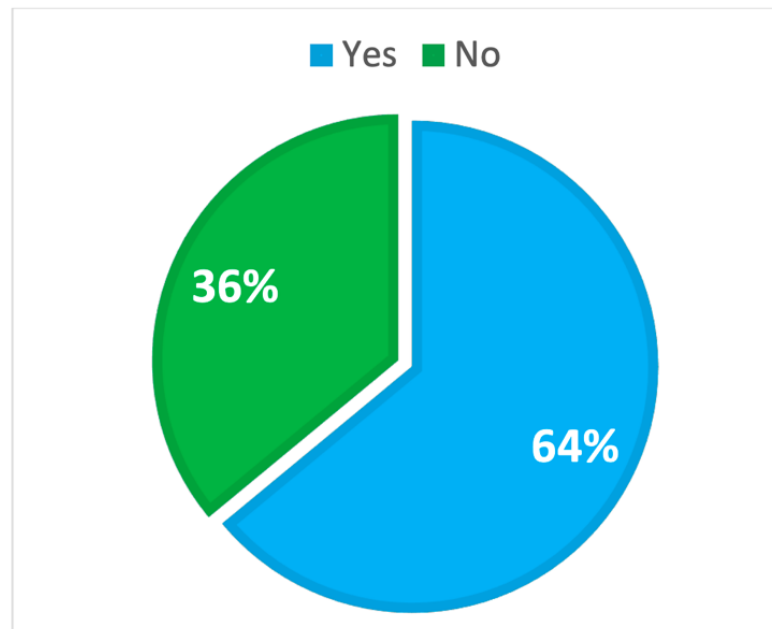
This is a marked increase compared with just 3 years ago.

How many hours do you exercise per week?



Almost one-third of respondents reported exercising less than one hour per week. **67%** of respondents reported exercising less compared with 18 months ago. Call frequency was the most cited reason for this (**33.3%** of free-text answers), along with Covid restrictions, health reasons and rotation/location changes.

Are you registered with a GP?

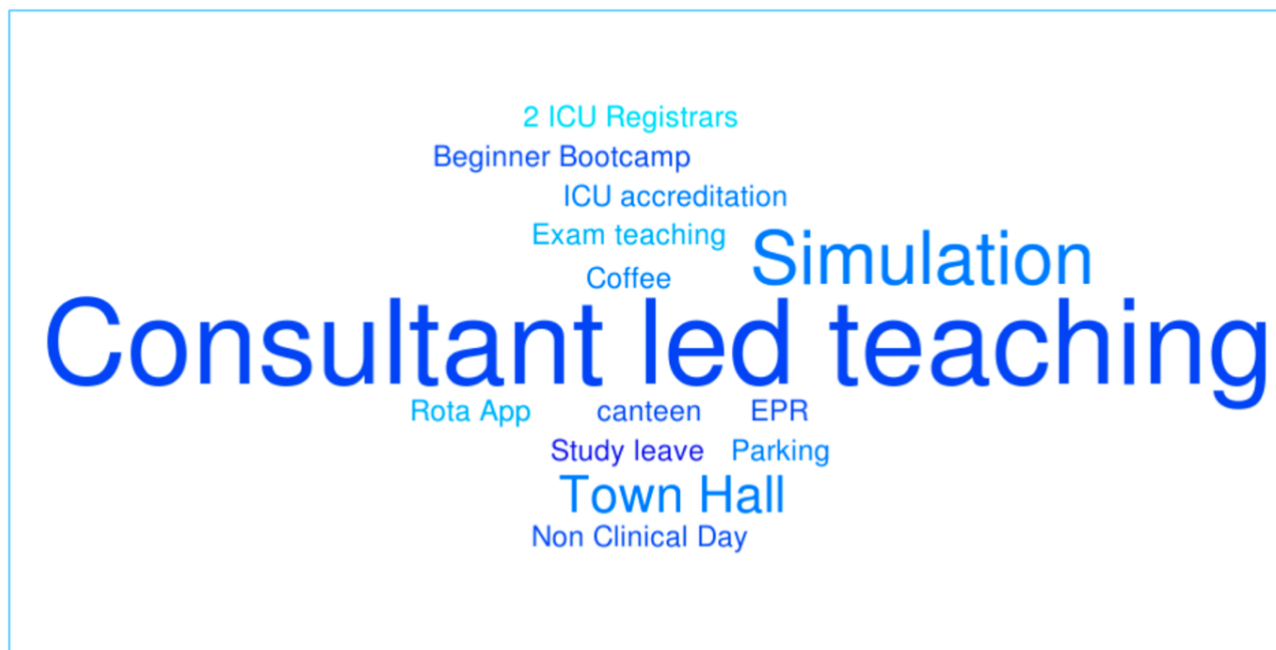


Over one-third of respondents are not registered with a GP.

What are the best things about your current working environment?



Is there anything in your current working environment that you would like to see in other departments?

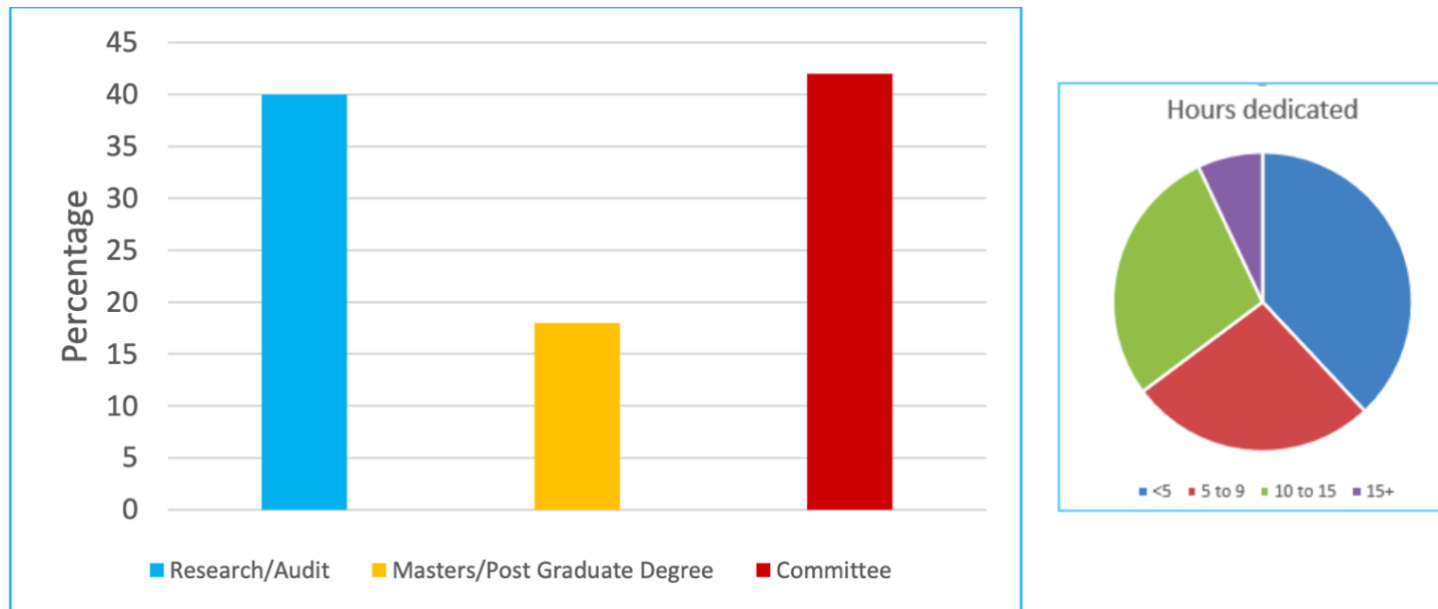


Again, using a word cloud generator, it is clear that trainees highly value their anaesthetic colleagues along with structured senior-led teaching sessions. Simulation training offered at individual sites was also praised as an excellent tool to aid recognition and management of clinical emergencies.

Sites in a position to offer more flexible call rotas, or with a reduced call frequency were also frequently mentioned.

Extra-curricular work

72.83% of respondents are involved in non-clinical endeavours

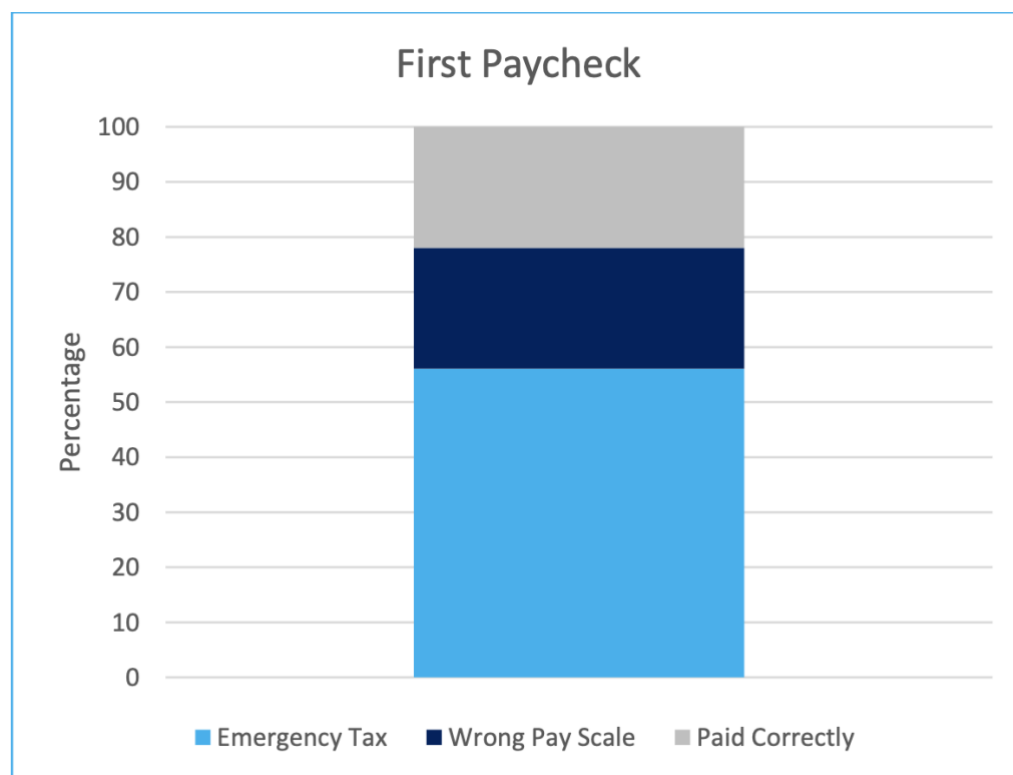
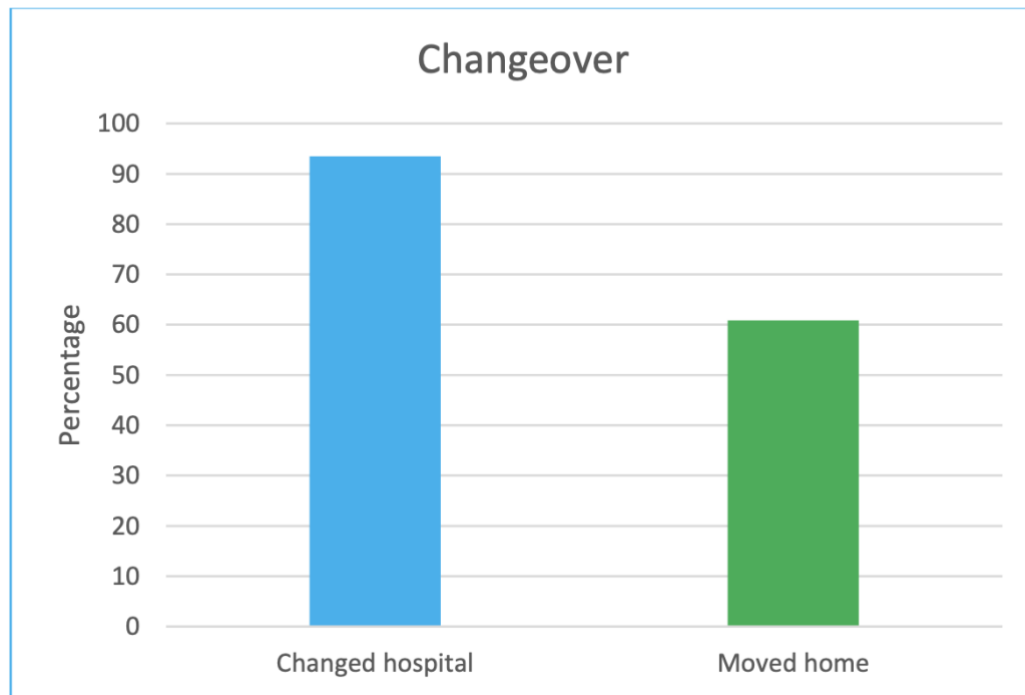


Over a third (**35%**) stated that this work equated to an additional 10 or more hours per week on top of their clinical duties.

86.2% felt this work was necessary to obtain a consultancy post in Ireland, with many citing their indication for doing so as “because everyone else is doing it” or “being told by current consultants that it is necessary”.

Part 3 – Changeover

Within the last 12 months...

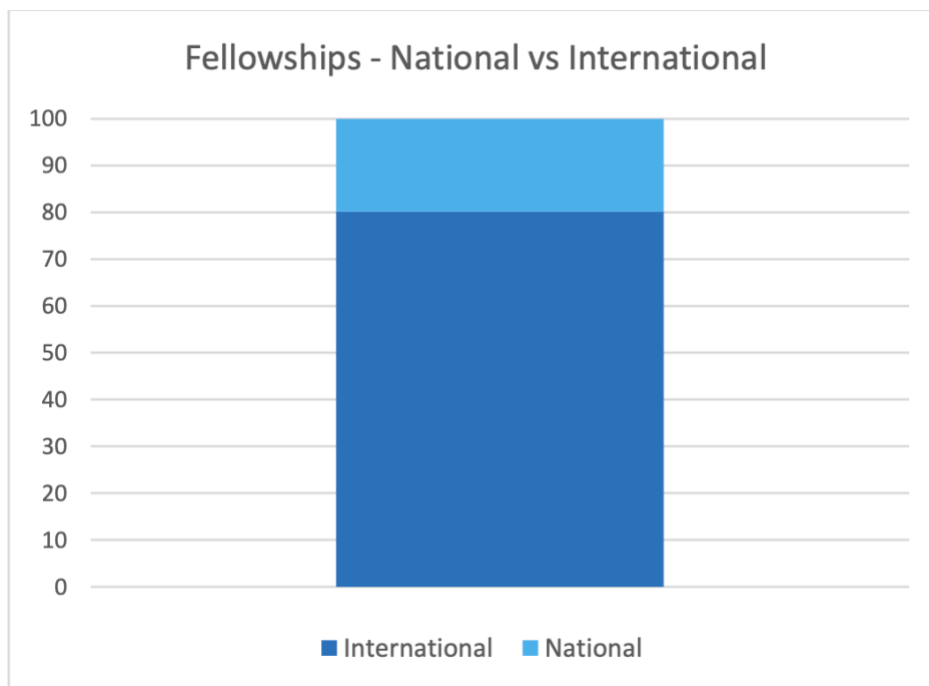


In the last 12 months, **93.48%** of respondents had changed hospital and **60.87%** had moved home. **78.26%** of respondents were paid incorrectly in the first month of new rotation, which comprise of emergency taxation in **72.06%** of cases, and wrong pay scale in **27.94%** of cases.

In **47.47%** of these cases, it took longer than 1 month to rectify, and in **27.83%** of cases the matter was still not rectified at the time of surveying (October 2021).

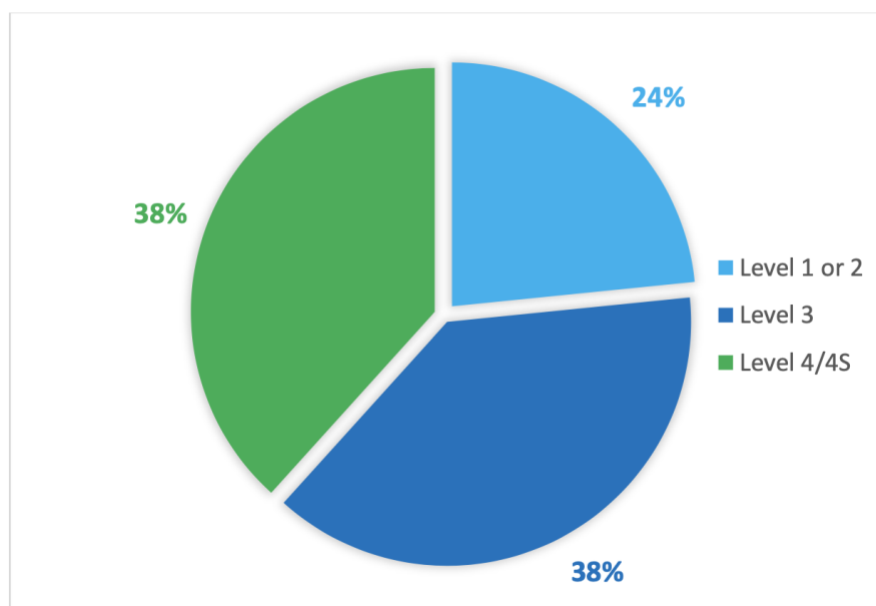
Part 4 - Post CSCST aspirations

100% of respondents intend on completing a Fellowship, with **19.78%** hoping to partake in a national fellowship programme, while **80.22%** would prefer an international programme.

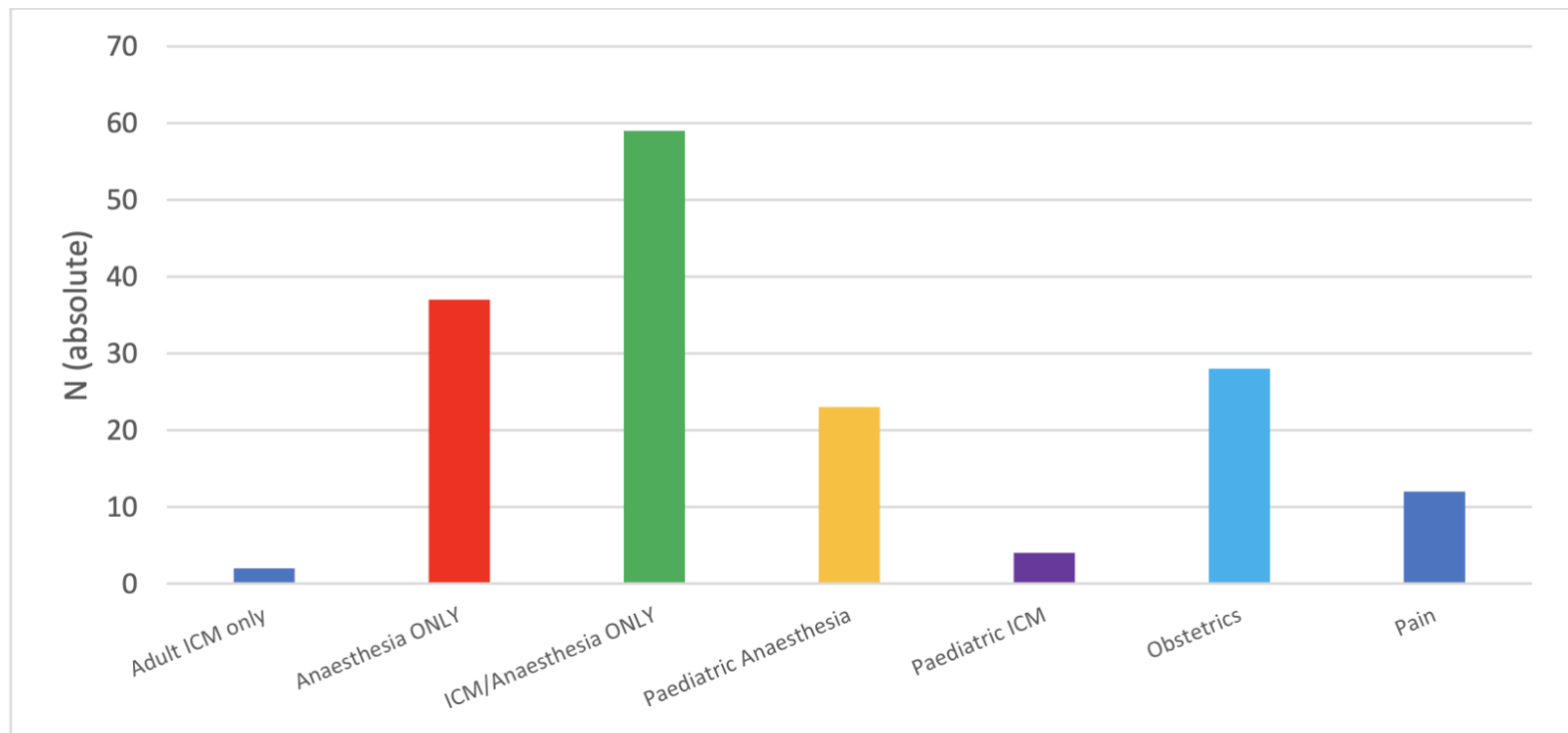


Out of the respondents, **33.61%** intend on taking leave post-CSCST. **89.89%** intend on working in Ireland long-term, although over **60%** of respondents did not believe it would be over two years beyond CSCST before obtaining a consultancy post.

What type of hospital do you wish to work in long term?



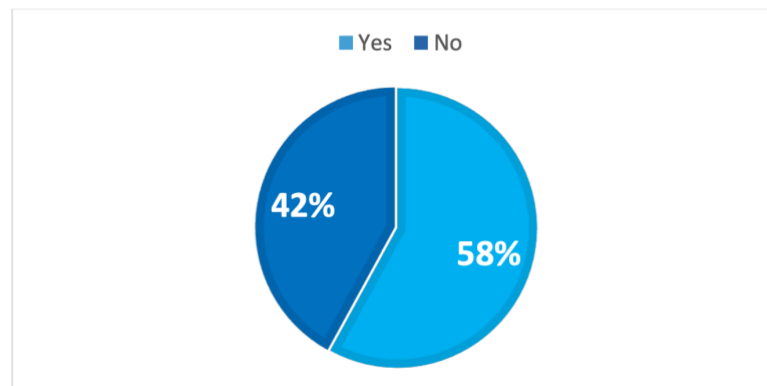
Sub-speciality interests



The majority of trainees reported a long-term sub-speciality interest in either adult anaesthesia or anaesthesia with intensive care medicine combined. The subspecialities with the lowest interest were sole-intensive care medicine consultancies and pain medicine.

Miscellaneous

Have you ever required the use of statistics software? (e.g. SPSS, GraphPad, Minitab etc.)



83.7% respondents said they would use statistics software if it were made available by the college.

End of survey results

An Olympian Among Us

Dr Carolyn Hayes

SAT1, CUH

Tell us about yourself?

My name is Carolyn Hayes, I'm from Newcastle West, Co. Limerick. I did my primary and secondary education through Irish at Gaelscoil O'Doghair and Laurel Hill Coláiste. I studied Physiology in Trinity before doing GEMS at the University of Limerick. After graduation I was an intern in St. James' – I'm informed I was the best Cardiology intern they had – and while working as a Junior Doctor I won the Royal College of Surgeons award for excellence in Clinical Medicine Teaching.

How did you start competing in elite triathlons?

I have always been a mad into sport and known as a bit of a tomboy. I played basketball, camogie, rugby, Gaelic football and swam in primary. In secondary school I took up hockey (it was the only sport on offer in an all-girls school) and kept up swimming until injury forced me to stop. During my time in Trinity I got back into swimming in and discovered water polo. I captained the both the Trinity swimming and water polo teams as well as representing Ireland internationally in both sports. It was a great way to balance things.



As for triathlon, I took it up when I started studying medicine in UL during my 2nd year. I didn't pick UL for Sport but as a result of having access to world class facilities I ended up diving into sport during my time there. I found it was a great outlet and helped me focus better on my studies. I competed in the National Standard distance champs in Kilkee and won it. The same year I won National Aquathlon Championships and because I was enjoying the variety triathlon allows you to have with training I kept at it. The decision to give it a go and see how far I could go in the sport was made at the end of my intern year. I contacted Gavin Noble, OLY and Eanna McGrath of HupHup Performance and I told them I wanted to train to be the best I could be at whatever distance in triathlon. I had no dreams of Olympic success I just wanted to be competitive at it.

I initially focused on 70.3 distance and had planned to compete in Ironman 70.3 Ireland but the week before the race I concussed myself and couldn't race. Having left medicine for the year to focus on training my coaches entered me into an ITU (international triathlon union) race in Hong Kong and Korea so my training wouldn't be wasted. I did relatively well over there and collected my first Olympic ranking points in Korea. After that we decided to focus on Sprint and Olympic distance racing for the rest of the year. I kept progressing with my training and the rest, as they say, is history. 😊

How do you balance elite sport training and medicine?



If I'm honest I try not to think about how to fit things in too much as I've always just managed combined sport with school, college and work and I find it forces me to be more organised. When we swam my parents used to commute nearly an hour from home to Limerick and would have to drop three kids off at three different pools for the same swim time 6pm-7pm so I learnt a lot from that! I'm a better person when I have sport and as a result of that it enables me to focus more on my work. When I'm Dr Hayes I'm focused solely on the job of providing the best care to my patients and then when I throw on my Asics I'm free to switch off and enjoy training. Having the escape makes me better at both sport and work.

At times it is hard, but anything worth doing is hard work. Elite sport is cruel and people don't see the work that goes on every single day to peak for one performance every few months. The highs of elite sport are incredibly high and the lows are painfully low. I've made great friends through sport but I've also had to sacrifice a lot of normal things in order to focus on training and competing internationally. Covid hit everyone.

Tell us a little bit about Japan - how did you find the experience?

Japan was amazing. The experience of a lifetime for sure. I had raced there before at the Tokyo test event in 2019 before any restrictions so I got to experience more of the city and culture. I'm very focused when I'm away racing so while you are away and in a beautiful country you really only see your hotel room and race venue. At the Games restrictions meant that you couldn't mix with other nations or sports like other games. Triathletes were in a bubble and so we would have to stick to our assigned training groups



Did you get to do much sightseeing?

None. I never do much when away racing. You only see the airport, your hotel and the race venue plus training venues. Any sight-seeing is done while training – so cycling the courses in Hamburg, Yokohama, Leeds etc. or running around parks near the hotels.

What was the atmosphere like in the Olympic village?

The Olympic village was amazing. Purpose built, cardboard beds (where would you get it only Japan), and the safest place to be in the World during the games. WE had the national guard, the military and Japanese Marines guarding the village- soldiers on foot, helicopters overhead, fighter ships parked up and mobile river patrols. You couldn't be safer! The atmosphere in the village was one of excitement for the first few days and then it became more serious as the opening ceremony finished and the first

medals were won. Everyone there was so focused. The only social place to mix was the 24hr food hall that served EVERYTHING at any time! Anything you wanted they would provide it. It was class. You also got special swipes that worked on every vending machine in the village. Everything is free and the transport around the village was via autonomous electric vehicles!



Are you planning on going to the Paris Olympics?

I can't think past Christmas and passing my SAT1 MCQ in June at the minute but I am training away...

Bonus Q: If Anaesthetics was a triathlon what would the three disciplines be?

Trauma, ICU and Cardiothoracics – you need all of them at some point along the way

Medical Careers Evening

*Dr Jillian O’Keeffe & Dr Barbara Cusack
SAT2, SIVUH & SAT6, St James’*

The annual CAI Medical Careers evening took place on the evening of 12th October this year. Similar to last week this was held as a virtual event. The event introduced the Specialist Anaesthesiology Training (SAT) Programme to over 40 online attendees, which comprised mostly intern doctors, prospective SHOs and some medical students. Alongside the Deputy Director of Training Dr Eilís Condon, myself and Dr Jillian O’Keeffe carried out a presentation and then helped to answer any questions attendees had.

Jillian is a SAT 2 trainee and took the lead on up to date guidance and tips for application and selection onto the SAT scheme. As a SAT 6 trainee, I focused on some clinical scenarios which highlighted the wide-reaching involvement of Anaesthesiologists in hospital based patient safety focused care, as well as ‘A Day in the Life of a SAT Trainee’ and introduced other CAT Initiatives that support trainee wellbeing such as the Buddy System and the Lead Anaesthesiology Trainee network. Being involved in the CAI Medical Careers evening made me reflect on how much I have learned in the last few years on the SAT scheme and I recognised the enthusiasm and work ethic of this year’s applicants in attendance.

NAPSAC & KP Moore Competition

Dr Sophia Angelov
SAT3, Mercy

The college's annual National Patient Safety in Anaesthesia Conference and KP Moore medal competition took place virtually in November this year. As always patient safety is paramount and the topics discussed throughout the day from world class speakers highlighted this further. The morning kicked off with a discussion around the most recent maternal and child safety report and what we can learn from it going forward.

The keynote lecture "Patient Safety in Anaesthesia – what can we do better?" was delivered by Dr Jannicke Mellin-Olsen from Norway, which was enlightening and inspiring. This was followed by the first session which was centred on the topic of "Working in a team". There was plenty of food for thought in there and we particularly enjoyed the talk given by one of our own SAT trainees Noelle Healy on her experiences in training for elite team performance. The second session focused on the global theme of "Innovation for Safety" with very stimulating, contemporary and original speakers.



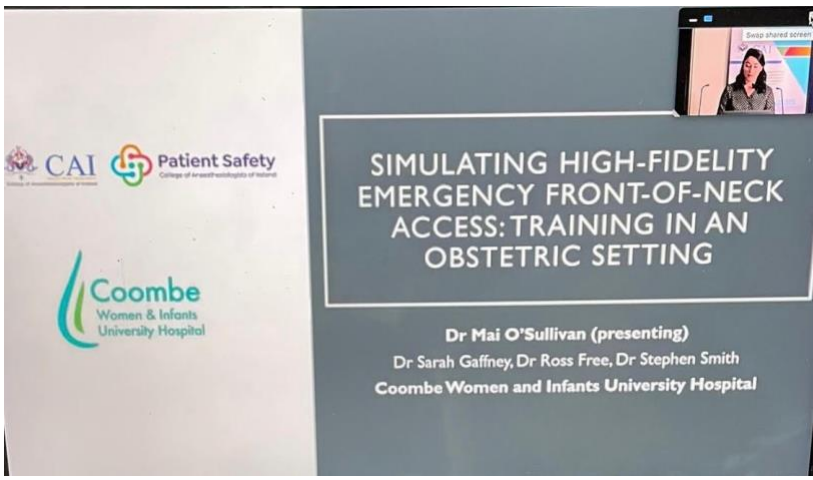
Dr Noelle Healy



Dr Jannicke Mellin-Olsen

Session three was the KP Moore Medal presentations. There were a total of eight speakers. Despite all speakers giving excellent presentations and showcasing the hard work done by trainees across all anaesthetic departments the winner of the KP Moore Medal for 2021 was Dr Mai O'Sullivan for her presentation titled "Simulating High-Fidelity Emergency Front-of-Neck Access: Training in an Obstetric Setting". Congratulations Mai on a fantastic achievement.

The day was rounded up by the Winter Lecture, given by the extremely inspiring and humble Mr Martin Bromiley. A fantastic and educational day all round, once again highlighting the ever important area of patient safety.



Dr Mai O'Sullivan, KP medal winner presentation

*Dr Mai O'Sullivan (centre)
KP Moore medal winner*



KP Moore medal Finalists (Dr Peter Mc Cauley, Dr Fiona Roberts, Dr Jack Collins, Dr Donal Rafferty, Dr Ciara Luke, Conor Farrell (Medical Student Essay Winner), Dr Mai O'Sullivan, Dr Ross Free) & Professor George Shorten (centre)

ISRA Update

Dr Colleen Harnett

SAT 5, Beaumont

Training in regional anaesthesia has been affected terribly by Covid with a lack of exams in 2020 and a reduction in workshops, courses and conferences in 2021. However, the Irish Society of Regional Anaesthesia (ISRA) are planning an exciting 2022!

In January, the first foundation course will be held in Cappagh Hospital. If you have never attended a foundation course, it's a really enjoyable day and will give you a good introduction to ultrasound scanning. For more information see our Facebook, twitter or have a look on our website. Spaces are limited so book early at:

[Buy tickets / Join the guestlist for ISRA Foundation Course @ National Orthopaedic Hospital, Cappagh at National Orthopaedic Hospital, Cappagh, Sat 22 Jan 2022 9:00 AM - 4:00 PM \(tickettailor.com\)](#)

On March 18th, the annual update day will host international speakers followed by some hands-on scanning at the afternoon workshop. Keep an eye out for our advertisement of this soon as again, spaces are limited. ISRA will also be hosting a session on regional anaesthesia at the CAI congress in May.

EDRA is always a popular exam for trainees. Part 1 is arguably more accessible to trainees now that it is online, but Part 2 has now been split up so that there is an A and B component. Part A is an online viva exam while part B remain a practical exam. EDRA exam dates for 2022 are not yet released but will likely fall around the ESRA congress 22-25 June in Greece. In preparation for this, ISRA will run a prep course on June 3rd aimed at the part 2 exam.

As your ISRA trainee rep please contact me if you have any questions about regional anaesthesia, events we will be running or chats about regional in general.

Do follow us on Facebook www.facebook.com/israireland and twitter @ISRA_Ireland so that you don't miss out on any event.

Lastly, be sure to sign up as an ISRA member for 2022 at www.isra.ie. Membership not only gives you a lower fee admission for ISRA events but also automatically makes you an ESRA member so that you can view academic material and attend ESRA events as well. Looking forward to seeing you all in 2022!

Dates for your diary:

January 22nd – Foundation Course, Cappagh

March 18th – ISRA update day

May 19th, 20th – CAI congress

June 3rd – EDRA part 2 prep course

Coll.harnett@gmail.com

Career in Pain Medicine

Dr Aine O’Gara

Consultant in Pain Medicine and Anaesthesiology, St James’ Hospital

What made you choose a career in Pain Medicine?

As I progressed through my anaesthesia training, I became increasingly interested in the pain medicine aspect of the speciality. I was fascinated and challenged by how much I did not understand about the complexity of pain. I was also very much drawn to the image guided interventions. During my Pain Module in the Mater Misericordiae Hospital my exposure to the many aspects of Pain Medicine solidified it as the correct career path for me. I particularly enjoyed the variety of clinic, ward rounds and intervention lists. Pain Medicine as a career presents a whole different set of rewards and challenges than Clinical Anaesthesia. For me it is extremely satisfying combining both as a career.

What did the training involve?

Training in Pain Medicine required 2 years of speciality training. I completed 1 year in St James’s and 1 year in the Mater. During this time, I gained expertise in assessing, diagnosing and treating patients with pain. The training gave me great exposure to hands on interventional training. This allowed me to develop the level of skill required to practice independently as a Consultant in Pain Medicine. During these two years I completed the Diploma in Pain Management exam followed by the Fellowship exam in Pain Medicine. These exams were comprehensive and challenging.

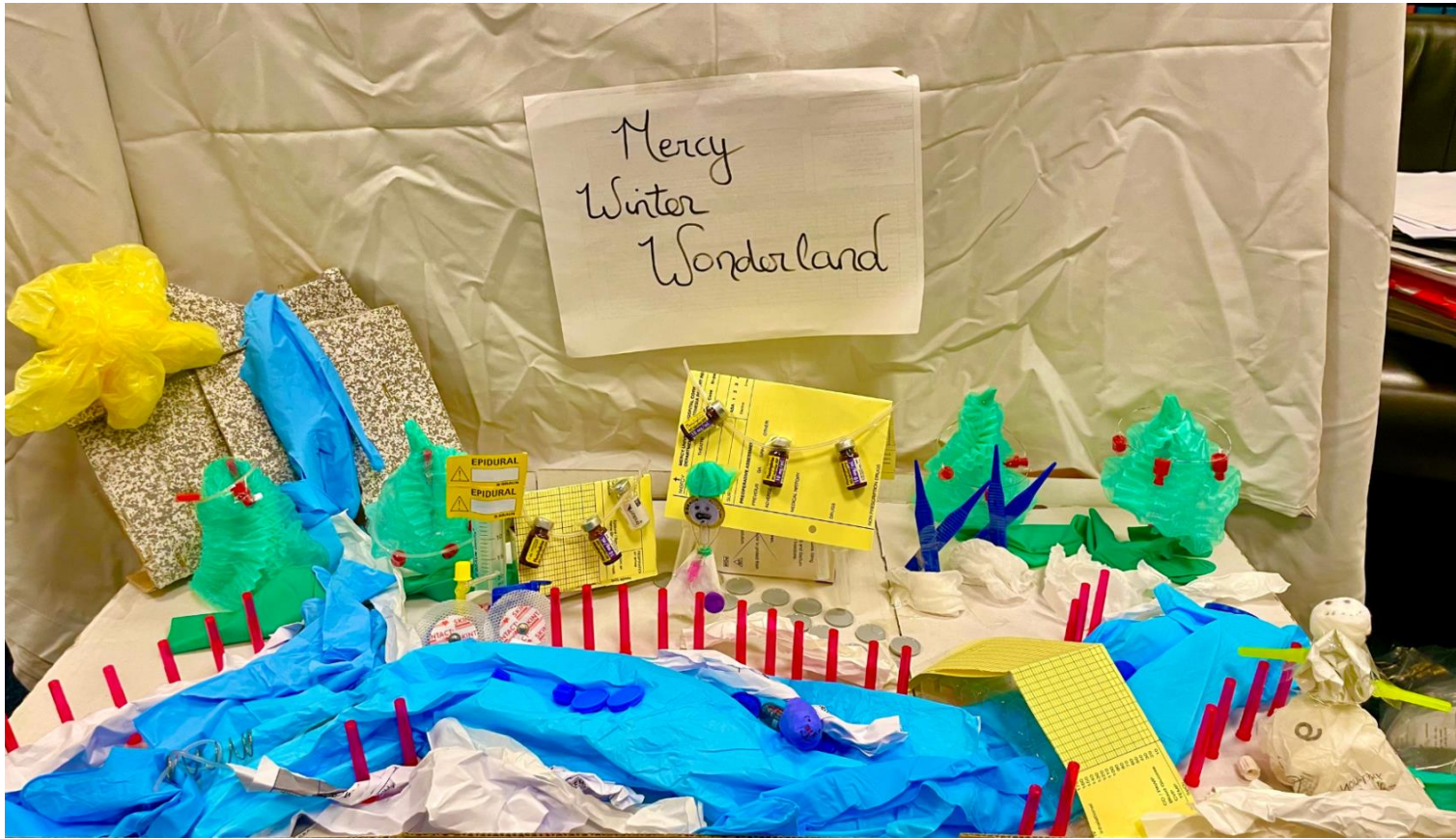
What does a regular work week look like for you?

My regular work week involves outpatient’s clinic (both face to face and virtual). It also involves a number of image-guided pain intervention lists. Regarding hospital acute pain management I link daily with the Clinical Nurse Specialists who round on the acute pain patients and troubleshoot any complex patients. There is often the need to link with other specialties regards complex inpatient consults. This can take the form of MDT meetings or case-based discussions. Teaching and training is also an important part of the week and of course I can’t forget my regular anaesthesia work!

What should someone who thinks they are interested in a career in Pain Medicine do?

I would recommend all trainees at least consider a career in Pain Medicine. Often the perceived challenges (arduous clinics, difficult interactions) end up being the most satisfying part of the job. You should speak to a senior pain trainee or consultant early on in your training to find out more and maybe get involved in some pain related projects. Preparing well for your pain module will also allow you to get the most out of it and put you on the right track for pursuing pain as a career. There is great information on the college website in relation to training in Pain Medicine. I would be happy to speak with anyone who is considering this great career option.

Annual Christmas Decoration Competition



Mercy University Hospital, Cork



Connolly Hospital, Dublin

LAT News

Despite the COVID blues there is also a lot of love and fun happening around our hospitals and we love to share it with you all. ❤️

Mercy University Hospital

The small Mercy crew had another social evening at the local Fran Well's Brewery, pizza and beer, what's not to love. They also did a big baked goods morning to thank all the nurses (ICU/OT) for their hard work over the last six months, which went down a treat! Congrats to Filip on his recent engagement!



Crumlin Hospital

Since the Christmas and end of year party was cancelled a different event took part this weekend, a wholesome morning run/walk/swim (for the brave) followed by coffee and toasties along the pier in Dun Laoghaire! Also, Jen Kierty will be ringing in the New Year with a brand new ring on her finger, congrats in advance on the wedding Jen! Congrats also to Christine Greene on her engagement!



Tallaght University Hospital

More wedding excitement in Tallaght, Conor Haugh congrats on the engagement and Andrew Smith good luck and congrats in advance on the upcoming wedding in January!!

St James's Hospital

Joe McGearry big congrats on your recent wedding day celebrations!

We love to hear from you! If you have any other good news that warrants celebrating – contact lat@coa.ie

Exam Tips

As exams continue in an online format, these tips remain relevant!!

The CAT Guide to Online Exams

Before the exam



Pick a quiet, well-lit room. Make sure the temperature is comfortable.

Try to minimise external noise.

Make sure nobody is going to walk into the room during the exam, lock the door or put a sign up to be sure.

Have a watch or clock (smart watches/fitness trackers are not allowed)



Plan your desk set up, make sure your screen is at a comfortable height to avoid eye strain. After years of sitting in uncomfortable chairs for exams, treat your self.

If you have a mouse – use it! Clicking and tracking with a track pad for 2 - 3 hours can be tiring.

Practice typing - seriously. There's plenty of free resources online. Plan your timing! And stick to it

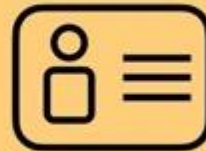
On the Day



Turn off your phone, you don't need it buzzing in the corner as you try to concentrate.



Be sure your laptop is fully charged. If possible keep it plugged in during the exam.



Have your ID card and login details to hand.



No bathroom breaks allowed - plan accordingly!



Snacks - have something to nibble on to give you a glucose boost.

Proximity to your kitchen = endless possibilities



Use the chat function on the exam system - support is available in real time.

Email exams@coa.ie

GOOD LUCK

Support Services

Despite our hopes that the pandemic would be a distant memory it still lingers on, this continues to be a stressful and intense time especially for SAT trainees. Here are some resources you may find helpful. The list is by no means exhaustive and there is constantly new websites/apps popping up. Please always look out for each other and reach out to fellow trainees if you think they might be having a bad day/week/month!



Available Resources

Your GP

https://www.icgp.ie/go/in_the_practice/doctors_health/national_gp_directory_for_nchds

Practitioner Health

<http://practitionerhealth.ie/>, Call 01 297 0356

Pieta House

<https://www.pieta.ie/>, Call 1800 247 247

Samaritans

Call 116 123

Employee Assistance and Counselling Service

Visit: <https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/employee-assistance-and-counselling-service/>

Websites

- HSE: <https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/home>
- CAI: <https://www.anaesthesia.ie/training/wellbeing/>
- Mind the Frontline: <https://www.mindthefrontline.com/>
- UK ICU Society:
https://www.ics.ac.uk/Society/Wellbeing/Society/Wellbeing_hub/Wellbeing_Hub.aspx?hkey=c4cc359f-caac-4198-b1f2-dabac29af11a

Calendar

Upcoming Exams

Title	Date of exam	Date of trial exam	Cost	Applications Close
MCAI MCQ	19/01/22 01/06/22 14/09/22	12/01/22 25/05/22 07/09/22	€600	17/12/21 26/04/22 05/08/22
MCAI OSCE/SOE	09/03/22 15-16/11/22 (<i>pending decision to be in person exam</i>)	02/03/21	€800	14/07/22
FCAI Written	16/02/2022			
FCAI Clinical	06/04/2022	-	€700	
EDIC Part 1	04/04/22		€480	CLOSED – Fully Booked
EDIC Part 2	31/05/22		€680	TBC Opening 10/01/2022
EDRA Part 1/2	2022 Dates TBC			

Courses and Conferences

Title	Location	Date	Cost	Link
CAI Annual Congress	Virtual	19-20/05/2022		https://cai.foleon.com/congress/programme-2022/welcome/
ESICM LIVES	Virtual	03-06/10/21	€300	https://www.esicm.org/events/34rd-annual-congress-copenhagen/#:~:text=LIVES%202021%20will%20offer%20discussion,from%2003%2D06%20October%202021.
AAGBI Winter Scientific Meeting	Virtual	13-14/01/22	£180-390	https://anaesthetists.org/Home/Education-events/Winter-Scientific-Meeting-2022
AAGBI Trainee Conference	Bristol	12-14/07/22		https://anaesthetists.org/Home/Education-events/Conferences
AAGBI Annual Congress	Belfast	14-16/09/22		https://anaesthetists.org/Home/Education-events/Conferences
BASIC Course	TBC	21-22/04/22 (Application open 18/01/22)		https://intensivecare.ie
Critical Care Reviews	Belfast	15-17/06/22	TBC	https://www.criticalcarereviews.com/