“WE CAN’T CARE FOR OUR PATIENTS IF WE DON’T CARE FOR OUR COLLEAGUES.”

Dr. Graeme Comerford, Medical Director, Vascular Health Group, Repatriation Health

Northern Neighbours
Northern Hospital's surgical education program comes of age.
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Laminis Acutis et Acutior Mentes
Welcome to Laminas;

Welcome to “Laminas,” the Austin General Surgery Training E-Zine. This is primarily aimed at supporting the General Surgery training program based at the Austin Hospital Training Hub in Melbourne in the State of Victoria, Australia. Laminas is a quarterly E-Zine dedicated to supporting the General Surgery training program and building a community of trainees and surgeons.

The Austin Hospital is one of eight General Surgery training hubs in Victoria. The program at present includes 23 accredited and 24 non accredited training posts spread across two metropolitan (Austin Health & Northern Health), three Victorian regional (Bendigo, Echuca & Sale) and four Interstate (Alice Springs, Burnie, Hobart & Launceston) hospitals. With a total of 47 trainees rotating to various hospitals the E-Zine was created as a vehicle to share training information as well as develop a community of trainees and trainers.

The name Laminas simply translates to “Blade” and what better description than to use the business end of the one instrument that surgeons are universally associated with, the scalpel. The more astute amongst our readers will note the motto on the cover page “Laminis Acutis et Acutior Mentes.” Roughly translating to “Sharp Blades & Sharper Minds” it is a reference to the modern surgeon who has to wield not only his scalpel but also the nine core competencies with consummate ease.
**BREAKING NEWS**

New GSSE Course at St Vincent’s Hospital

St Vincent’s General Surgery Training Hub is slowly reviving its surgical education and training program under the guidance of SET supervisor Michael Johnson and JDOC supervisor Michael Hii.

Demonstrating a definite change in direction and focusing on an area not well covered by other hubs this is an example of how each of the eight training hubs could provide unique opportunities and complement each other to the benefit of Victorian General Surgery Trainees. See page 25 for the full sized flyer for details.
Editor’s Ramblings
V Muralidharan

Overboard with Respect

The host of programs for fellows of the RACS

The past two years have seen the portrayal of surgeons and their culture splayed across the media in a very detrimental light following open disclosure by a number of surgeons and trainees. The presence of bullying, intimidation, workplace harassment and even sexual harassment by surgeons and a high prevalence of trainees being subject to such behaviour at some time in their training has been a very sobering fact. As a response to this, the College very commendably energised itself to be proactive with surprising urgency by establishing the Expert Advisory Group (EAG) to review the whole culture and recommend changes. This has led to various programs such as the Operating With Respect (OWR) E-learning Module, Foundation Skills for Surgical Educators (FSSE) and the OWR workshop.

It is even more commendable that the Board in General Surgery has been actively dealing with this issue for years by implementing a number of processes. These include quinquennial inspections of all training units, setting up anonymous feedback from trainees after each rotation which includes an assessment of their supervisors and being the first board to include trainee representatives in the inspection teams. Over the years a number of units in a number states have been identified as harbouring individuals with disrespectful or unprofessional behaviour and remedial processes instituted.

As the RACS leads the way in portraying respectful behaviour an increasing number of health services line up to sign on memoranda of understanding to improve their institutional culture. Simultaneously there is also a sense of disbelief pervading the fellowship as the requirements for fellows involved in training increase without any apparent evidence for their validity. This requires some careful thought.

It is worth considering that at minimum the proactive stance by the college has not only staved off external intervention and oversight but also likely improved the credibility of the entire profession in the eyes of the population and in particular potential future candidates for surgical training. The programs certainly provide some insight into behaviours and exposure to techniques that may be used for feedback and diffusing volatile situations. OWR workshop in particular was very well conducted and an excellent example of simulation based team training, though this particular program is applicable only to board members and hospital supervisors while the FSSE is mandatory for all surgeons in contact with trainees and the OWR E-Module mandated to all fellows by January 2018.

The flip side of the coin is that while these measures are likely to reinforce appropriate behaviour in the majority we have no evidence to support that they would change behaviour in the offenders who are thankfully in the minority. An excellent review of E-Learning modules has shown that while they improve knowledge and skills there is as yet no demonstrable evidence they change behaviour or patient outcomes. More disappointing is the fact that there is no clear and defined evaluation process for these systems now in place which essentially means that in years to come we will not be able to judge their efficacy in changing behaviour. Despite this we must persevere, accepting that in the absence of evidence logical reasoning based on the expected outcomes and natural history of events needs to prevail and we must embrace the new order of respect. In other words let common sense prevail until we can generate the evidence.
The Northern Hospital was previously known as the Preston and Northcote Community Hospital (PANCH) with principle surgical training links with the St Vincent’s hospital. Following the move to the current location as Northern Hospital it has grown in to a fully-fledged partner in Austin Hospital’s General Surgery training hub. In addition to providing five major surgical units to the training unit pool NH has been a major strength for the Austin Surgical Training Hub providing excellent surgical education opportunities and sharing the FRACS exam prep course.

The year 2017 sees the establishment of a formalized surgical education program at NH under the auspices of Krinal Mori who has been tasked with expanding surgical education. In addition to the existing Thursday afternoon forums and ad hoc surgical tutorials there will be more formalized structure complete with a surgical education program booklet.

**SURGICAL FORUM**
Every Thursday at 5.30 to 6.30 pm there is a Surgical Forum which is mandatory for all the Registrars and Surgical HMOs. General HMOs and Interns rotated in the surgical units are expected to attend.

**SURGICAL TUTORIALS**
Tuesday morning surgical tutorials are mandatory for all Surgical Registrars and HMOs. These tutorials will be regularly held from the beginning of March through to the second week of December 2017.

**OPERATIVE SURGERY / CASE PRESENTATION / JOURNAL CLUB**
Friday morning sessions will be conducted by one of the three fellows OR Post exam senior registrars.

**GASTRO-INTESTINAL MEETINGS:**
Gastro-Intestinal meetings are held on Thursday mornings at 7.30 to 8.30 am in the Conference room opposite the library. It is a joint initiative by the Surgeons and Gastroenterologist and covers various topics of discussion relevant to the gastrointestinal tract.

**WORKSHOPS:**
- **Laparoscopy Workshop:** Basic laparoscopy skills will be taught to the interns and HMOs. Registrars will be encouraged to attend advanced laparoscopy workshop, which will include learning and practicing about various operations in a simulated environment. Laparoscopic suturing and knot tying methods will be taught. Participants will get ample chances to practice various techniques. It will be conducted quarterly.
- **Basic Suturing Workshop:** Twice in the year this workshop will be conducted. It will be beneficial to Interns and HMOs interested in learning basic suturing and instrument handling.
The dawn of 2017 once again was witness to a large migration of trainees with three new SET trainees being inducted to the Austin General Surgery training hub. Here we give them the opportunity to introduce themselves.

**Ben Birch**

Throughout the years my association with The Austin has remained strong, being first introduced to the Austin network as a medical student, then working as an Austin doctor from internship to most recently as a NSET registrar last year. I am so excited to be continuing at the Austin in 2017 as a General Surgery SET trainee. I feel privileged to be a part of such a strong network renowned for its surgical education and multitude of training experiences.

Ever since I can remember I have always wanted to become a surgeon. At this stage, my interests are in Upper Abdominal surgery (UGI/ HPB), but I am keen to gain experience in all sub-specialty areas. This year I will be coordinating the Surgical Training Workshops and look forward to your continued support in running these fantastic interactive teaching sessions. Away from clinical work, I enjoy playing hockey and have been an active member of my local club for over 20 years. I also enjoy road cycling and watching AFL. Being a qualified barista, I love having a chat over a good coffee and searching for Melbourne's best cafes. However, the most rewarding time is spent with my wife and son and enjoying family holidays. I look forward to meeting and working with you over the next few years.
Carlos Cabalag
For those of you who don’t know me my name is Carlos and this is now my ninth year out of medical school now hopefully embarking (for a second time) on a career towards general surgery. I realise that Carlos is not a very “Asian” sounding name for most, especially when you first meet me, however this is due to my Filipino heritage owing to my father.

My path forwards was never a straight one indeed; it was fraught with tribulations, challenges and life events. I started as an intern at Eastern Health, and decided to explore surgery as a career at the Royal Melbourne Hospital for a number of years, only then to be uncertain and then embark upon a year of obstetrics and gynaecology. Career aside I’m a part of a family of three with a three year old son who is growing fast and asking all the “why” questions – some of which are really perplexing. Currently I am in Shepparton and will be in Hobart this year so if you’re ever around, I’m always keen to hit the tennis, badminton or squash courts and try out a restaurant and ordering that sparkling water with lemon or cucumber to give the chefs a fright!

Jasmina Kevric
Born and raised in Bosnia & Herzegovina I migrated to Melbourne 15 years ago following the Yugoslav civil war. During that time I moved from Bosnia to Croatia and Germany to Austria and Switzerland. As a result I now speak seven languages. Despite all this I did not speak English when I arrived to Australia and had to pick it up fairly quickly. I enrolled into Noble Park Secondary College and with their support was the first person from NPSC to enter medicine in over 30 years. I completed my medical school at the University of Melbourne (St Vincent’s/Geelong clinical school) and have a Master in Public Health.

Over the years I’ve worked at Monash Health, Alfred Health and in Western Australia. I particularly liked Monkey Mia and feeding the dolphins every morning. I am currently in Tasmania working at Burnie Hospital and enjoying the chance to explore the state. So far I have hiked up Mt Amos in Freycinet National Park, Mt Murchison to see the fagus, found nowhere else in the world except Tasmania, Cradle Mountain and Barn Bluff as well as Mount Field, Cape Raoul and Mt Wellington. Sticking to the travel theme, my interest in refugee health took me to collaborate with organisations such as United Nations, Burmese League for Democracy and Mission Australia in areas including Burma, Thailand, India and Cambodia, focusing on outpatient surgical clinics in these countries. In Burma I worked in a refugee camp on the border of Thailand and helped manage patients with war inflicted injuries. It was a truly heart wrenching experience. I have also been actively involved within the Australian community and established two award winning non-profit organisations, RYDF and Footprints Enterprise, and co-founded Connecting with Indigenous communities (CWIC), all working on improving the wellbeing of disadvantaged young people. I have an interest in surgical education, particularly the physical and mental wellbeing of surgeons and surgical trainees and have recently completed a research study on this topic. I hope to be able to make more contributions to this area in the future. In my spare time I enjoy traveling, hiking and ticking off bucket lists. My next mission, apart from completing SET training, is to tick off the 50th country that I would have visited and taking my dog Snoopy on my next hiking adventure (he’s a Borador).
Lily Bae
I decided that General Surgery was my calling after assisting in four lap appendicectomies in a row on day 3 of my internship despite all my medical student years at Monash aspiring to become a dermatologist (thought I could find a cure for baldness).

I have worked at Peninsula Health and Monash Health previously. I was fortunate to have six-month terms in each specialty of general surgery and I am really grateful for amazing mentors who not only taught me how to operate, but also how to appreciate work life balance. I enjoyed my colorectal term the most, as it provides opportunities to both diagnose endoscopically and treat operatively. I find it extremely satisfying to be able to resect the cancer and to do a good anastomosis wherever possible. During my gap year last year, I travelled 26 cities around the world and worked as a locum surg reg and a surgical assistant in private hospitals. It was very refreshing to have a control over my time and work, and I loved travelling so much that at some point I even considered being a professional traveller and devised multiple plans to maximise frequent flyer points. I must confess I didn’t go to too many museums or took selfies at famous architectural landmarks. My main focus was to find places to eat the best meal the city had to offer and at the end of each trip, I came home more than adequately nourished with probable hepatic insult.

Working as a locum registrar in country hospitals was an eye opening experience. It all sounded great to be paid attractive rates and get flown into different cities. In reality, it was a test for adaptability. I was constantly working with new team at new hospital everywhere I went, using different softwares to look up investigations, and I was given unfamiliar instruments (or not given my usals because the hospital couldn’t afford it). It was inspiring to work with surgeons who are so dedicated to serve the community and to treat the patients who were very grateful for the care they receive. After such humbling encounter in the country, I decided to retire from the indulgent life and go back to a life of surgical registrar and hopefully one day I will be able to care for the remote communities as a country surgeon. Now it’s been more than a month since I landed at the Northern Hospital, I realised that I missed the camaraderie in surgery –having a team of hard working people who care. It is definitely one of the busiest units I have worked for, but I am looking forward to many invaluable lessons here, as a wise surgeon at the Northern told me few weeks ago “if you can make it here, you can make it anywhere”
Pith So Beh

Hi my name is Pith Soh Beh, but everyone calls me by my last name “Beh.” I’m delighted to join the Austin family for this is my first year working as a Non-SET general surgery registrar.

Being born and raised in Malaysia, I came to Melbourne to attend medical school at Monash; as I didn’t make the cut for Melbourne Uni. Prior to reaching the Austin, I have worked at Frankston, overseas in Malaysia and St Vincent’s Melbourne (for 2 years respectively).

I have always been interested in General Surgery since my intern year and I’m interested in Oesophago-Gastric Surgery in particular, as it offers a good mix of oncology work, clinical nutrition, as well as the exposure to metabolic surgery.

Sara Mohammed Jinnah

I am a first year Non set registrar at the Austin. Born in Sri Lanka, raised in Saudi Arabia and then back Sri Lanka to study medicine at the University of Colombo. Internship was grueling but well worth it at the national hospital of Sri Lanka and straight to Neurosurgery after that for a year of operating and on calls. I then met my Husband and started a new adventure, and moved to Melbourne where I first worked at Western Health and then moved to Hobart and worked at Royal Hobart Hospital for two years.

I knew I wanted to do Surgery from the first day I stepped into an operating theatre in second year as a medical student. I kept my eyes open for anything else that would interest me, the other areas of medicine have their merits but none as much as Surgery for me. I am interested in pursuing a career in General Surgery, Trauma or Orthopaedics. Concentrating, cutting and fixing - that would give me maximum job satisfaction! Having worked as a research assistant in Surgery for a year I am also very interested in finding out the whys and the hows of everything we practice – and is this best practice?

I do not like to believe that we have reached the top of our potential as a human race and I think is up to the people of science to move us forward as a species. I would very much love to contribute to this. Volunteering has always been very much a part of the way I spend my free time, it has given me a vast amount of experience, from volunteering at prison health camps to milking venomous snakes at the venom lab, there is such a vast amount of work that I was able to contribute my time to.

Sports that interest me are soccer to watch and badminton to play. Travelling and food are a passion – Growing up in different parts of the world meant mixing with people from a lot of different cultures and backgrounds. It is a wonderful experience that helps me grow as a person every day. At home in my quiet time I like reading, painting, craft and amateur photography - but now I have a new favourite - My bubba Amelia. Nothing like having a mini version of half your genome to cuddle after a long shift! And my husband and pet rabbit.
Greetings! My name is Grace and I am one of the new NSET Registrars. I completed medical school at Melbourne Uni (Northern Clinical School) and stayed on for internship at Northern. Last year I came across to Austin for surgical residency which further developed my passion for General Surgery. Working at Austin has changed my life forever, having the opportunity to meet and work with some of the most prolific and inspiring doctors.

This year I am fortunate enough to experience the variety of relieving (mostly TNH and Tassie) and then six months of rural surgery life in Sale. In my free time I enjoy training for Ironman triathlon, going for brunch and steaks and discovering new beaches. I also love unicorns and am a massive Nipponophile (I speak and fluently eat Japanese). This year I aim to improve my gaming skills which I hope translates to improved laparoscopic skills. I look forward to meeting everyone and hopefully work together in the near future. Bring on 2017!

Eliza Muir
I started out this long adventure at Sydney University studying History and European politics. After realising my Bachelor of Unemployment might not be the greatest idea, I finished with a B.Sc in immunobiology. Mesmerised by Sydney University’s amazing pathology museum, I went on to an MBBS at Deakin in order to see these specimens in their natural habitat. The paranoia and anxiety of watching my first ‘primary operator’ patient live (and thrive) to discharge in Timor Leste cemented my plan to pursue surgery.

I came to Melbourne principally for the food, but happily landed in what I think is the best surgical training hub. I started first as an Intern at the Northern then following on with surgical residency years at the Austin/Northern. My surgical experience to date has been very broad, with rotations in most surgical subspecialties. I look a year out to see how the rest of Victoria operated, with rotations in Geelong, Warrnambool and the Alfred. I’m very happy to be back at the Austin now, heading down the general surgery pathway. I am busily working on ticking boxes and chasing opportunities to make myself a good candidate for selection, and more importantly a valuable and respected surgical colleague.

My interest in regional and remote area health, and my love of pus, is leading me to Alice Springs later this year, and is another step toward my ultimate goal of regional General Surgeon. Unfortunately there is no fellowship in ingrown toenails and abscess (my current passion) so I’m hoping to gain some more experience in hepatobiliary and upper GI specialties in the next few years. I’m seeking out opportunities to teach and mentor, to get the next generation as excited by surgery as I am. I’m currently working on a thyroid project, but would be very keen to be involved in any projects that could be incorporated into my time in the NT.
Joyce Ma

I completed my medical degree at the University of Melbourne in 2013. Austin has been my home since starting clinical school as a medical student – I also completed my internship and two surgical resident years at the Austin, and am currently working as an unaccredited registrar through the Austin. Of course, I have rotated to other hospitals during my medical career, including The Northern Hospital, Mildura Base Hospital and North West Regional Hospital.

I must admit, I did not think I would choose surgery as my career path when I was a medical student. I first developed an interest in General Surgery during internship, after completing my Hepatobiliary term at the Austin. Although it was a demanding and hectic rotation at times, I found managing complex patients and their post-operative recovery to be an educational and rewarding experience. Last year, I chose to undertake another General Surgical rotation at North West Regional Hospital in Burnie, Tasmania. Being the senior resident on the unit, I worked as an intermediary between the registrars and interns. I was also given ample opportunity to operate in theatre and assist with major cases, which was a fantastic experience.

For the first six months of this year, I am working as an unaccredited registrar at Sale Hospital. Despite the newly discovered challenges and responsibilities of being a registrar, I am loving the rotation so far. My main goal for this year is to sit and pass the GSSE (hopefully in June!) I am also in the process of looking for a new research project – my urology article on radiotherapy complications has just been submitted and is awaiting publication.

In terms of family, I am still shamelessly living off my parents (although I won’t be in Melbourne for most of this year anyway). I also have a cat named (gastro)Graffin who is the love of my life (disclaimer: I did not give him the name – he was adopted!)

I am a massive nerd and I enjoy playing video games in my spare time. Unfortunately, with upcoming exams, I have had to cut back on the amount of games I play. However, I am looking forward to my first weekend post-exams, when I will be enjoying a 48-hour marathon of The Legend of Zelda: Breath of the Wild (rated as one of the best games ever made – CAN’T WAIT!!)
Held on the weekend of 11th to 13th of November, General Surgeons Australia in conjunction with the Victorian Training Committee collaborated and organised its 3rd trainees weekend since its inception in 2014. The whole event was held at Peppers Moonah Links Resort situated at Mornington Peninsula. With attendance of more than 80 it was by far the most successful trainees’ weekend ever held. What’s noticeably different this time around was the large contingent of interstate trainees including NSW and Queensland. Not to disappoint as well, Victorian trainees showed up in large droves with heavy representation and involvement from all 8 surgical hubs, encompassing most SET levels.

Key addition to this year’s conference was the opportunity for trainees to present their research papers and therefore able to tick off the research requirements of SET training. With quality presentations from both domestic and interstate, there were certainly much to learn about research work carried out within the country. What’s more, it did serve as an opportunity to acknowledge the efforts put in by trainees with the final research prize awarded to Royal Melbourne trainee Dr Angelica Na highlighting her work on predicting survival of patients with oesophageal cancer based on nodal status.

One of the positive aspects of the trainees’ weekend was its small tutor to trainee ratio. With thorough and meticulous effort, trainees were grouped up in small numbers for a mixture of simulations and didactic teachings, allowing for greater uptake of knowledge and wisdom passed on by eminent surgical experts. The trainees were assembled for lectures from time to time, allowing again for Q&A sessions. For many, the lecture about Part 2 fellowship exam by Mr. Simon Banting in particular serves as a dire reminder of what awaits many of us and a wakeup call for the intermediate SET trainees (3/4).

I was particularly impressed by the surgical supervisors’ role in the weekend. With attendance of more than half (5/8) surgical supervisors of the eight Victorian hubs, each being involved in coordinating or hands on teaching, there is no question that the SET
supervisors do care about the trainees’ welfare. After all, these supervisors sacrificed weekend time away from their family to ensure its success.

The program itself was well received by all trainees, irrespective of the SET level. What’s made it so appealing was the ability and diversity of the programs offered, ensuring each trainee got something out of it. It’s not just learning and preparing for exams though. Kudos to the event organisers for spicing up the weekend with some entertainment, with the biggest highlight being the debate between the Victorian hubs.

With the exception of no-show from St. Vincent’s, trainee representatives from other seven hubs battled it out in debate, displaying their eloquence and oratory skills with the debate titled “Surgical education is a continual process, therefore fellowship exit examination should be abandoned.”

It turned out to be a mega blockbuster for all who were present for the debate. With teams split into “North of the Yarra” hubs including Austin/RMH/Eastern/Western (who were the affirmatives) against the “Southerners” (Alfred/Geelong/Monash) who sought to keep the exam. It was full of laughter and jokes as each team sought to “trump” the others, with impressions of Donald Trump and colourful but appropriate comments made. Both teams turned out to be formidable with convincing and persuasive arguments made from each sides. In the end, there can only be one team winner and perhaps due to backroom pressure and those in attendance, the affirmatives won the debate, much to the chagrin of the SET supervisors and Mr. Banting! Not to be disappointed though, the negatives could go home smiling as the best debator award was awarded to their team (Guess who it was?)

Trainees’ dinner reflected yet another social event in part of the program. Attended only by half of those registered, it was still very well received and enjoyed by those present. Perhaps due to the cost or timing, half the trainees did not come but this was offset by attendance of relatives and partners of trainees who did. Yet another milestone that GSA Victoria can be proud of as it seeks to remodel itself as a 21st century organisation, mindful and aware of trainees’ and their family. The 3 course meal itself was great with a selection of beef/fish as main with various high quality wines to go with the meals.

For me as a SET 2 trainee, the event was without any doubt an immense success. It did serve as an opportunity for me to catch up and get to know trainees from other hubs. From an Austin perspective, I am certain our supervisor would be thrilled to see “the other birds who have left the nest” and thrived in the non-Austin hubs. New bonds of friendships were made and for the keen competitors, no doubt it was a good platform to benchmark themselves against others in terms of the quality of their placements/training and knowledge.

There is no question GSA has put in great effort to host the event. A combination of superb advertising, idyllic venue placement, amazing selection of keynote expert speakers from all over the state, excellent tutor to student ratio, 2016 trainees’ weekend was the most successful trainees weekend. With more efforts to make it family friendly and possibly extending the weekend to 4-5 days event, I can only hope it will be an annual get together for many SET trainees not just for professional development but also just for “stress relief and respite from work.” My advice to trainees or tutors, start pencilling in dates for 2017 and see you there!
The SET trainee induction sessions run by GSA for new trainees is held concurrently at the Trainees Weekend and shows that diversity is well and truly alive in General Surgery training.
A Mornington Dinner Party
GSA Victorian Trainees’ Weekend Dinner

It’s not often trainees like us have the opportunity to escape the city and take that curved highway down to the tip of the bay; luckily for us we combined that trip to the Mornington Peninsula with an educational Trainee’s weekend.

And on the Saturday after a day’s worth of sessions, with full and exhausted minds, those who stayed then wound down in the evening in the company of friends, peers…and bosses too. Welcome to the Trainee’s Dinner at Peppers Moonah Links Resort.

In verdant green golf country with the promise of summer weather, at the tip of the peninsula, this dinner was a showcase of what the surrounding country has to offer. Where in most hands a tasting menu is an exercise in self-promotion, putting the chef’s skills to the fore and the produce to a footnote, here it was the food front and centre for us to enjoy.

The pop-up restaurant was situated two or three buildings away from the main complex and the main restaurant, and overlooked the golf course. The dining area was defined by the lofty heights of the ceiling, which in combination with the glass doors and walls made an impression of roominess. The sun was setting at the far end of the room and the 5 tables arranged to fill the room. On one wall was a crackling fireplace, subdued as part of the scenery.

Our host introduced us to the fare laid out on the tables – three kinds of wines, a selection of cheeses and appetisers. First up the alcohol. The sparkling shiraz is from Foxeys-Hideout a vine-yard up the road once located at the eponymous ‘Foxeys-Hideout’ this biodynamic and organic winery is now located in Red Hill on the peninsula. The shiraz is aged in an old French Oak barrique, which brings a full round bodied flavor, predominantly fruity and...
spicy it was a bold start to the evening. The Geppetto Chardonnay comes from a family run vineyard – Crittenden Estate which grows its grapes too on the slopes of Red Hill. The chardonnay itself is more suited to a spring or summer dinner out overlooking the bay, with a more acidic taste making it feel more light and bright; citrus flavours amongst melon aromas come through on the palate. To round out the trio is the Red Claw Pinot Noir from Yabby lake, yet another prime example of Mornington vineyard produce. The winery itself is situated further north from the previous two and is cooled by the nightly sea breezes producing a pinot noir with a silky and velvety mouthfeel. The peppery taste of the Montalto olive oil went well with the dukkah and breads, and the three cheeses, though not Mornington Peninsula fare, were well received and complimented the wines quite adequately.

What makes these affairs a ‘do is of course a hearty convivial atmosphere. All doctors love to talk shop, compare notes, and beat their chests; surgeons perhaps with our trademark competitive streak more so. The dinner though began as a sit down affair, with minimal space to mingle and mix, making it that bit more of a hurdle to de-clump us out of our staid tribal groups. Nevertheless, a round of speeches from Sarah Martin and Murali kicked off the evening, importantly thanking both Kate Galloway and Sarah Martin for their hard work convening and organising the weekend.

As the sun set and the evening got on, seats around the tables filled, and even a child or two joined in the festivities. With families being such great supports in trainees’ lives, its great to see them around at events where we all get together. What are evenings like this for? Not just to pass the time and to fill our bellies, nor is it just the ‘grown up’ thing to do; they are important to catch up with old friends, to see colleagues who have gone to other hubs, and even to see peers who haven’t been in town for a while. This is the point where I gush and say we’re a community, not a gaggle of individuals and that is what dinners like these should reflect.

The main meals, yes, took a little while, but that simply meant we were well ready to receive them when they arrived. The two dishes on offer were a hearty beef dish, or an Asian flavoured barramundi. The lay of the alternations meant that I had a go at the white fish, sitting next to a neat pyramid of coconut rice. At this point in the evening the conversation always turns to the pros and cons of the surf or turf dish, and I must say mine was cooked perfectly as fish should, thereby escaping the rare/medium rare/well done quandary. The black bean glaze added that necessary salty component without overpowering the balance of the dish. I can’t speak for the vegetarian alternative, but I do recall some objections at the table emanating from someone who shall remain nameless.

Dessert, ah dessert, ended in a boisterous sing-along, well lubricated by the supply of wine and beers. A platter of small cakes and tarts in the center of the table, did away with the need to be rooted to chairs, plates and utensils. This enabled the free flow of bodies around tables, resulting in fluid groups of conversations, popping up here and there and reforming elsewhere. And then of course, it all had to end eventually, with a slow trickle of people through the door into the inky night, some stumbling, so that Mornington could become morning.
New Non SET Trainees

Unaccredited General Surgery Registrars new to Austin in 2017

Michael Smits

Hi Team, my name is Michael Smits and although born in the land of the long white cloud, I grew up on the Gold Coast in QLD. Growing up I was a keen rugby player until my shoulder decided it didn’t like staying in its socket for more than 20 minutes at a time. I went on to complete my undergraduate degree and do some laboratory research at Griffith University.

I’ll never forget the day I was sitting at my desk about to sign a contract for a PhD scholarship when I heard the e-mail alert for a medical school interview offer. I think I tried to rip the paperwork in half before realising it was about 25 pages deep and I hadn’t been to the gym in a long time. Managing to narrowly avoid a southern cross tattoo on my calf I ventured down to Victoria to complete medical school at Deakin University. I had a fantastic experience in Geelong and decided after a couple of days on my first clinical rotation that surgery was for me.

I have been at the Austin since internship and have never looked back. I’m currently PGY3 and very keen to embark on the next stage of my career. Interests of course include general surgery and I really hope to complete my training in the Austin network.

Research-wise, I’ll be the first to admit that I’m new to the game but am currently working on a trial to improve post-operative blood pressures in conjunction with the Orthopods and ICU. Apart from studying for GSSE, my hobbies include being on the Gold Coast waterways, eating too much of my girlfriends Lebanese cuisine and playing terrible tennis. I’m generally very laid back and love having a good old fashioned belly laugh. Looking forward to working with all of you soon!
Jason Toniolo
I am a PGY4 unaccredited general surgical registrar. I grew up in the Eastern suburbs of Melbourne and studied undergraduate medicine at Monash University, with an additional year devoted to a bachelor of medical science. Since graduating, I undertook my internship year at The Alfred, followed by two surgical residencies. After my residency, I took a ‘gap year,’ in which I completed the Diploma of Surgical Anatomy at Melbourne University, as then passed the first part surgical exams in June 2016. I then travelled around Europe and Central America for 7 months – an experience I will never forget or regret. I find myself fond of many surgical specialties that I have rotated through and as such I am pursuing a career in either general surgery or urology.

My first venture into evidenced based medicine was during my bachelor of Medical Science, in which I published three papers in the field of Ophthalmology. This was my first venture into evidenced based medicine and the process of writing a peer-reviewed article. Since then, I have taken on research papers in urology, with a particular interest in bladder cancer and the prevention of bladder tumour recurrences. Bladder cancer affects 4% of males at some stage in their life and has a 70% recurrence rate. It is not a cancer that is frequently mentioned in the public eye, but I feel it poses a huge financial burden on society, as well as a huge emotional burden on the individual.

Outside of medicine, I have an unusual obsession with Australian flora, which most people find to be an unexpected quality in me. I have volunteered for the Mullum-Mullum bushcare group that maintains the reserve near my childhood home for 12 years. Whilst I am less involved in the group since moving towards the city and working fulltime as a surgical registrar, I still enjoy the process of cutting down infected trees and replacing them with native evergreens. I play basketball (albeit poorly) with my brother and friends. I enjoy riding my motorbike on a nice day along the coast or through the ‘twisties’ of the Dandenong mountains or Yarra Ranges. Finally, I love an afternoon at the pub.

Hein Maung
Born in Burma, raised in Fiji and New Zealand, and medically educated in Monash. I have had unaccredited general surgical experience at the Royal Hobart Hospital and Eastern Health Network. This is my first year working for the Austin Network and I’m currently working in the Northern Hospital AGSU.

My hobbies include, cooking, eating and learning how to drink wine, with an air of snobbery.

While my subspecialty interests change often, I currently have an interest in Colorectal surgery - because one must always start from the bottom to get to the top.
Ryan Newbold
I am one of the new Non-SET Trainees at the Austin. Here is a little bit about me!

I grew up in little old Adelaide and moved over to Victoria to start university, fresh out of high school. I was part of the last intake of the undergraduate medical degree at the University of Melbourne, finishing in 2013. During my clinical years I was attached to the rural clinical school, and continued my time in the country as an intern at Bendigo Health in 2014. I then worked as a HMO2 at St Vincent's Hospital in 2015 with external terms at Werribee Mercy Hospital and Peter Mac, and then moved on to the Austin in 2016 for my HMO3 year. This included a term at North West Regional Hospital (Burnie, TAS) that I enjoyed so much, I asked to come back! I am currently back in Burnie in my first role as a registrar, and am enjoying the variety of general surgery on offer. My long term plan however, is a career in Urology.

As for life outside the hospital, I am more of an outdoors person, and try to get out of the city to ride my mountain bike when time permits. During the winter months I head to the same destinations to go skiing on whatever little snow is available. I enjoy most sports, but in particular AFL. I’ve sadly had to ‘hang up the boots’ in 2015 after a few years playing for greatest club in amateur football, the Melbourne University Blacks! I am an avid Crows supporter and try to go their games whenever they’re playing in Melbourne. On a completely unrelated topic, I believe Patrick Dangerfield is a highly overrated football player.

Although relatively new to the Austin, I’ve felt more at home here than anywhere else I have previously worked. As the 2017 clinical year rolls on, I’m looking forward to meeting more of the people make up Austin Surgical Training, and getting more involved in the program.

Sonja Sokolovska
My undergraduate education was at the University of Melbourne, where I obtained a Bachelor of Dental Science with Honours in 2009. I was then employed by Westmead Hospital in Sydney as a resident dental officer in 2010. I returned to the University of Melbourne the following year and completed the Doctor of Medicine in 2104, graduating with Distinction.

After my intern year at the Austin in 2015, I moved to St Vincent’s for a Surgical HMO 2 year, which involved rotations to Swan Hill, the Peter Mac Callum Cancer Centre, and Werribee Mercy Health. These rotations resulted in my current career pursuit in general surgery. I have research interests in breast surgery and melanoma, as well as craniofacial reconstruction and maxillofacial trauma.

Outside of work I am an incredibly devoted tennis fan and less incredible amateur tennis player, and enjoy long distance running and skiing. I’m also fond of the beaches along the south coast of NSW where I grew up, and often visit my family at home and do locum dental work in my hometown of Wollongong.
Temoor (Tay) Naeem
My name’s Tay and I’m one of the newly appointed NSET registrars at Austin Health. I join the general surgical team at The Austin six months after arriving in Australia from the UK, having previously worked in the emergency department at The Northern.

I completed my medical and foundation training in the UK at Imperial College and Cambridge University Hospitals, encompassing jobs in general and trauma and orthopaedic surgery and acute medicine. This included pursuing research interests in management of T1 rectal tumours and the use of CT scanning in younger patients. I also undertook a number of audit projects, with one in particular being used to illustrate the benefits of optimal record keeping to ensure best patient outcomes.

In the nascent stages of my training, I hope to consolidate my basic surgical skills and improve my ability to manage acutely unwell surgical patients. It is my ambition to become a general surgeon with a special interest in the management of colorectal cancer. During my advanced training, I’d love the opportunity to undertake postgraduate research into the pathophysiology of peritoneal malignancy. I’d also relish the chance to be involved in teaching of medical students and junior colleagues and am open to any such opportunities.

Despite being a long way from family and friends, I’m enjoying my time in Australia and have found those around me to be very friendly and supportive - not least my colleagues who I’ve called for advice in the early hours! I’ve had a number of visits since being here from family and friends, but the one I’m looking forward to the most is my parents’ visit later this year to take in The Ashes - not sure how excited mum is about the cricket but dad and I can’t wait!

Outside of work, I’m a huge sports fan. I spend a lot of time playing cricket, golf and squash and have recently rediscovered my love of boxing. If I show up to work with a bruise on my face, it’s probably because my hands weren’t fast enough in the gym! I’m also a keen reader and love discussing any and all global political issues - never short of material in today’s world. I look forward to meeting new colleagues and improving my skills over the course of this job, and I hope that I can become a valuable member of the team.
Given it is called Eastern Health, as you have correctly guessed, its hospitals are located out east! Eastern Health encompasses three main hospital sites for surgery in Melbourne – Box Hill, Maroondah and Angliss Hospital. Its rural rotation is Bendigo where two trainees from Eastern go as well as two from Austin. In fact it also encompasses a number of smaller hospitals that also supply healthcare delivery to the region including Yarra Ranges, Healesville, and Peter James Centre. Adrian Fox is the current supervisor there, one of the HPB consultants working at Box Hill. Focusing on the Melbourne posts, there’s a wide variety available at Eastern Health ranging from fairly specialty specific at Box Hill, ie. CR/HPB/bariatrics to true general surgery in both Maroondah and in particular Angliss Hospital.

**Box Hill Hospital**
A shiny new building which was only opened roughly two years ago with a slightly nauseating appearance for both staff and patients alike given its green exterior. But the inside is actually very pleasant and with 11 theatres (1 a potential hybrid) and a brand new Zouki appearing inside soon, what more could you ask for?
There are four trainee posts available here:
Surg A – Bariatrics
Surg B – HPB/UGI
Surg C – Colorectal
Surg D – general/thoracics (previously breast/endo before moving to Maroondah in 2016)

All are accredited posts with Surg A, B, D participating in general surgery on call and Surg C doing their own call. In addition, there is an AGSU here (no more trying to fit emergency pilonidals at 0200!) which mostly works fairly well with a dedicated list during the day Monday to Friday. An unaccredited registrar covers this post but is supervised by a fellow and the accredited registrar can attend, with some discussion, if no other activities are on. Surg A, B, C has at least one fellow each (Surg B with a clinical and research fellow) with good supervision and Surg B and C tend to be the busier units at Box Hill with a good mix of major and minor cases as well as endoscopy. Surg A does a lot of major cases with their bariatric operations. Surg D seems to still be a work in progress currently since the moving of breast/endo to Maroondah but the thoracics is good and all considered majors although it probably require slightly more independence.

Around the area it is only a very short walk to good food for lunch and dinner and even late night eating after those long evening covers that finish at 8pm. Most importantly bubble tea to help beat that caffeine addiction. It is fairly easy to get to from multiple directions being close to the Eastern Freeway. Even for those from the other side of town, it is against traffic and doesn’t provide the same headaches as the Bulleen road exit at Eastern Freeway.

In terms of education and research there is a fortnightly tutorial of approximately one hour with various general surgical topics with the session chaired by a consultant of that specialty. The presentations are delivered by registrars and HMOs alike and certainly a good non-confrontational way to get your presentation skills up. Trainees are involved in an online type journal club where articles are appraised once a week – a great idea given our lifestyles oriented more and more towards online activities! Junior staff are encouraged to participate in unit research whilst going through the jobs.

Hopefully this gives you some idea of the opportunities available to you at Eastern and hopefully you will join us for some yum cha soon! Please do not hesitate to contact me for any questions you might have about Eastern!

Maroondah Hospital
Established in 1976, Maroondah hospital is claimed to be of the busiest emergency departments within eastern health. It should be roughly around 30mins on a good day from Austin hospital, with easy access from Ringwood bypass, toward Ringwood East.

This year the hospital has changed its rotations for SET trainees. There are three surgical units with two accredited trainees, one unaccredited trainee and a breast/endocrine fellow. Commencing only this year all breast and endocrine referrals and/or procedures are only carried at Maroondah Hospital. The unit, also known as Surg 3, has David Stoney as the head (also the director of surgery at MHI), and Mr Michael Low, the hospital supervisor for SET. This unit has a busy elective breast and endocrine workload as well as sharing in on calls once per week and occasional weekends. There are around 10 consultants on the unit.

Surg 2 is another new unit again commencing this year. This is the AGSU unit. There are still ongoing audits to find the best setup for the unit, but with my rotation, we had three lists during the week days and two dedicated morning lists for the weekend. The original setup (which is currently being reviewed) was to have 30% on the list as elective(s) and the rest to be emergency procedures. This is the busiest unit of all three. The average patients per day is sitting around 25. As the unit registrar, you will be on take every day of the week except on Wednesday (when Surg 3 is on take). It has similarities to the Northern Hospital in terms of emergency admissions. Eight consultants are attached to this unit.

The last unit is Surg 1 with the unaccredited position. This unit is only colorectal, and doesn’t share in on call roster. Currently only two consultants are on the unit, with two elective lists per week and a clinic alternating with a scope list. It is the least busy of the three and often the registrar on that unit will be helping the AGSU on most days.

Overall Maroondah Hospital is a very good rotation for SET3+ trainees.
William Angliss Hospital
Further south east, at the foot of Dandenong Ranges, in Upper Ferntree Gully is the Angliss Hospital. It is the oldest of all three eastern health metropolitan hospitals (established 1939). Mr Pucius (General Surgeon) is the SET supervisor, who like Mr Low (from MH) is very supportive and approachable.

The atmosphere over there reminds me of the Surgery Centre. The hospital has a very busy elective general surgical workload. There are approximately 15 consultants attached to the surgical unit, two accredited registrars, a resident and one intern. Usually one registrar is attached to around 6-7 consultant some of whom also work at Box Hill or Maroondah Hospitals. The main electives are general surgical, minor plastics and colorectal although major colorectal is rare.

There is also emergency on call, albeit not as busy as Maroondah. However, the general rule there is if the case is too complicated and/or has a BMI >40 then it’s not for the Angliss, as there is only a sub acute care ward and no ICU. Having said that, they are currently building a new ICU, hopefully to open next year. The challenge with after hour’s emergency is that you share it with Obs and Gyn, so planning is crucial. Again, very good rotation for SET 2+.
St Vincent’s Generic Surgical Sciences Exam Education Program

The Generic Surgical Sciences Exam is mandatory for entrance into surgical speciality training programs. Previous surgical residents have found the anatomy component of the exam the most enjoyable and easiest to study. However often physiology and pathology are unfamiliar and challenging.

We have designed an intensive three day education program to kick start those difficult subjects. The lectures are based on subjects that have the highest yield for your study, and will be presented by expert lecturers from various medical disciplines.

We hope you will take up this opportunity to promote your success in GSSE this year.

The lectures will cover key topics from:

Day One (Physiology):
- Cellular Principles of Medical Physiology
- Gastrointestinal Physiology
- Respiratory Physiology
- Renal Physiology
- Endocrine Physiology
- Cardiovascular Physiology

Day Two (Pathology):
- Cellular Responses to Stress + Toxins
- Neoplasia
- Haemostasis
- Acute Inflammation + Innate Immunity
- Adaptive Immunity

Day Three (Pharmacology + Microbiology):
- Pharmacokinetics
- Common Medications
- Microbiology
- Antibiotics
- Statistics

Lunch and course material will be supplied

Fee:
- SVM SRS Members $75 per day
  or $200 for 3-day program
- Non SVM SRS Members $100 per day
  or $250 for 3-day program

For further information please contact:
Dr Odette Rodda
odette.rodda@svha.org.au

Dates of Course One:
Target GSSE June
- Sunday 26th March 2017
- Sunday 2nd April 2017
- Sunday 9th April 2017

Dates of Course Two:
Target GSSE October
- Sunday 16th July 2017
- Sunday 23rd July 2017
- Sunday 6th August 2017

Location:
Michael Chamberlain Lecture Theatre
Ground floor, Aikenhead Building,
St Vincent’s Hospital Melbourne,
Victoria Pde, Fitzroy

Link to register for course one in 2017 (March-April):

Link to register your expression of interest for course two in 2017 (July-August):
goo.gl/forms/TpC953b0jys1pa7S2
Move on!
Changes in the SET & NSET Registrars

Like a roller in the ocean, life is motion
Like a wind that’s always blowing, life is flowing
Like the sunrise in the morning, life is dawning
How I treasure every minute
Being part of it, being in it
With the urge to move on


Suellyn Centauri (3) moves to east to Monash Hub while Shantanu Joglekar (4) and Yit Leang (5) go west to South West Regional Hub.

Nikhil Chandra (6) and Steve Kunz (7) expand their horizons in 2017 as Cardiac Surgery NSETs at Austin while Scott Robson (8) and Anthony Navaretti (9) take time away from training to reflect on their future.

Another solar cycle ends signifying the time that yet another a large cohort of trainees begin the annual migratory process from the Austin General Surgery training program. We take a moment to reflect and remember them as they begin yet another of life’s journeys.

We begin by congratulating five of our NSET trainees who have made that much cherished leap to enter General Surgery SET. Sadly Austin did not have the adequate spots to house them all so some have spread away to explore other training hubs. Ben Birch (1) and Carlos Cabalag (2) return to Austin as SET trainees.
Successfully completing their FRACS exams on their first attempt four trainees prepare to move out in to fellowships to further their training. Luke Bradshaw (10), ending his term as inaugural chairman of the ASTEC committee takes up the general surgery fellow post at Northern Hospital attached to the HPB unit to pursue his passion of liver surgery. Wei Ming Ooi (11) moves to the endocrine surgery fellow position at St Vincent’s Hospital while Hann Liew goes to Bendigo as a surgical fellow. Katharine Guggenheimer stays at Austin to complete one more term after which she will move on either to a fellow post or consultant position in general surgery.

The Last Supper: A tradition was begun in January 2016 with the congratulatory dinner for trainees leaving after completion of the fellowship, hosted by their supervisor. One event does not however make a tradition so this lot also were asked to attend the informal debrief at “prohibition - Restaurant & Bar” along with their partners. Congratulations to the foursome and particularly their better halves as they move on to fellowship posts around Australia. This system of forced feedback will continue to be instituted as standard for all trainees completing their fellowships in subsequent years.