



Hepatology ATP

Addenbrookes Liver Unit



Cambridge University Hospital Trust

Last Updated: 14.01.2022

Overview

3, 6 or 12 month rotation to the Addenbrookes Liver Unit

Oncall rota shared with 2 East of England gastro trainees, and 5 clinical/research fellows

Inpatient work is purely on the transplant unit (G5), plus mix of hepatology and transplant patients on HDU and ICU

1 in 8 on-call (non-resident overnight)

Close working with MDT – daily ward rounds with transplant surgeons

Opportunity for specialist clinics and research

Good exposure to inpatient and outpatient transplant, and tertiary referrals

The Rota

2 ATPs at any one time, alternating weeks with one on transplant unit (G5) and other off ward (see example Rota on right)

Ward weeks = cons ward round Tues and Fri, plus catch up at end of every day/can go through immunosuppression queries etc. Spr-led ward round with transplant surg reg the other days

Non-ward weeks: post-transplant clinic, new referrals gen hep clinic, OP liver transplant assessments (present these at Friday MDT), endo list as above, holding bleep for in-house hep referrals plus external referrals

OOH GI bleed cover (with consultant coming in to supervise scopes)

Endoscopy lists for varices assessment/banding/thrombin injection on Mondays and Thursdays, shared between other 2 (or 3) gastro regs

Overnight oncalls are non-resident (can stay in free accomm overnight if commute too far)

ATP 1

ATP 2

	ATP 1	ATP 2
SUNDAY PM		
MONDAY AM	bleep am	0830-13:00 G5 ward
MONDAY PM	ENDO	13:00-1730 G5 ward
TUESDAY AM	OLTx assess/bleep am	0830-13:00 G5 ward
TUESDAY PM	bleep pm	13:00-1730 G5 ward then o/n hep oncall
WEDNESDAY AM	am OLTx clinic	0830-13:00 G5 ward
WEDNESDAY PM	13:00-1730 G5 ward/bleep pm	
THURSDAY AM	ENDO	0830-13:00 G5 ward
THURSDAY PM	Hep New clinic	13:00-1730 G5 ward
FRIDAY AM		0830-13:00 G5 ward
FRIDAY PM	present OLTx assess/bleep pm	13:00-1730 G5 ward
SATURDAY AM	08:30--08:30 hep oncall	
SATURDAY PM		
SUNDAY AM		
SUNDAY PM		

On-call: Referrals

Large geographical area for referrals

On-call is divided into 3 shifts, 08:30-1pm, 1pm-1730, and 1730-0830 overnight non-resident, usually can get away by 8/9pm.

Day time oncall bleep occasionally needs to be held at same time as doing the ward- this is actually very do-able.

Most common external queries on-call:

- POD
- non-POD ALI/ALF
- Post-transplant patients with abnormal LFTs
- Immunosuppression queries in unwell/septic/Covid patient post-transplant
- Decomp cirrhosis with view to transfer for IP transplant assessment, vascular issues – e.g. blocked TIPS/budd-chiari/PVT
- Variceal bleeders for emergency transfer for TIPS.

Internal referrals/ED

- Index presentations of decompensated liver disease
- Patients with newly deranged LFTs
- Incidental radiological features suggestive of chronic liver disease
- Peri-surgical cirrhosis patients for advice/Mx post-op decomp cirrhosis

WEEKENDS

When covering a Saturday or Sunday this is a 24hr shift 0830-0830. (non-resident overnight, can usually leave by 8-9pm-ish and come back at 07am-ish unless called in). All patient notes/bloods/scans etc. viewable on remote-access via laptop so can answer many calls overnight without needing to go in)

The consultant is present on both days and will over the weekend do a full round of both D5 (gen hep and some gen med patients, approx. 30) and G5 (transplant patients, approx. 16) You will split up who does which ward in the morning with them. Usually ATP reg does transplant ward round rather than D5 round, then catches up with consultant after round, gets handover for D5 and supports SHO thereafter on D5 and G5.

The Ward

- G5 is the transplant ward, made up of 3 teams- liver transplant, renal transplant and multi-visceral transplant. Usually 3 SHOs (1 for each team), sometimes just 2 (one on liver, one on renal, with them covering multi-visceral between them). Usually around 15-20 liver transplant inpatients altogether, including G5, ICU and any outliers (usually only 1 or 2 if any).
- 1 SpR covers the ward at any time (occasionally 2 if there is a 3rd visiting clinical fellow getting transplant experience). Spr ward rounds 3 x a week together with transplant surg reg/fellow which is great – get to learn lots about surgery, and usually have team coffee after the round.
- Consultant ward rounds Tues AM or PM and Fri AM
- SpRs present patients at the listing MDT on Fri PM – prepare proforma for this during the week (G5 inpatient work-up patients presented by ward spr, and OP work-up patients seen by the non-ward spr on Tuesdays and presented at the same MDT on Fridays.)

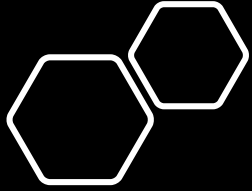
	AM	PM
Mon	SpR-led WR	
Tues	Cons WR	
Weds	SpR-led WR	
Thurs	SpR-led WR	
Fri	Cons WR	Transplant MDT
Sat	Cons + on-call SpR	
Sun	Cons + on-call SpR	

Meetings/MDTs

Day	meeting
Monday	Hep educational meeting every Monday 1-2pm (M&M 2 nd Mon of month, liver transplant audit 3 rd Mon of month)
Tuesday	Every 2 nd Tues of month liver research meeting
Wednesday	1-2pm weekly Grand round
Thursday	1-2:30pm weekly HCC MDT
Friday	12-1pm weekly hep radiology MDT 1:30-2:15pm weekly hep histopath MDT 14:30-16:30 weekly transplant MDT (followed by spr presenting a handover of all the inpatients at the end)

Clinics

- Post-transplant clinic 2nd and 3rd Wed of month (mix of F2F and telephone)
- Hep New clinic on Wed and Thurs pm (all new patients gen hep, usually all telephone appointments)
- Discuss any cases as needed with consultant post-clinic or by email
- OP liver transplant assessments every Tuesday in clinic 5 (patients come to clinic 5, usually stay there for 2-3 days to get their investigations done, staying in hotel overnight), present these assessments at Friday MDT
- Additional clinics (if interested/time)
 - Liver waiting list clinic
 - Autoimmune
 - ALD
 - NASH
 - complex portal HTN
 - Hep C
 - Hep B
 - PSC



Useful contacts: Consultants

- Bill Griffiths (genetics/specialty lead)
bill.Griffiths@addenbrookes.nhs.uk
- Mike Allison (ArLD/NAFLD)
michael.allison@addenbrookes.nhs.uk
- Will Gelson (viral)
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- George Mells (AI/research)
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- Vicky Snowdon (portal HT/HCC)
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- Gwil Webb (transplant/AI)
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- Jyoti Hansi (decomp cirrhosis)
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- Matt Hoare (HCC/research)
Matthew.Hoare@cruk.cam.ac.uk
- Fotios Sampaziotis (research)
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- Stuart Kendrick (ArLD/GSK)
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ATP

Current ATP trainee (12m
2021-2022): Freya Rhodes

Contact:

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