**Health Education England**

**Yorkshire and the Humber School of Radiology**

**Sub-Specialty Training in Interventional Radiology**

# Programme Description

The ST4/5-6 Interventional Radiology posts will be part of the Yorkshire School of Radiology and will comprise of 2 or 3 years of training (dependent on whether entering at ST4 or ST5).

Posts are available in the following training schemes:

**East:** Hull Royal Infirmary and Castle Hill Hospital

**South:** The Northern General and (The Royal Hallamshire)

**West:** Leeds (Leeds General Infirmary and St James’ University Hospital), York, Mid Yorkshire Hospitals, Bradford Royal Infirmary, Calderdale Royal Hospital and Huddersfield Royal Infirmary.

The Interventional Radiology (IR) sub-specialty training programmes have RCR approval and are designed to fulfil the RCR training requirements for a Consultant Interventional Radiologist as outlined in the sub-speciality training curriculum for and are in line with the 2021 Interventional Radiology curriculum. The posts will incorporate both vascular and non-vascular interventional radiology training.

Applicants should demonstrate a strong background and/or interest in IR and should have been following the RCR IR curriculum at the start of ST4 if entering at ST5.

# Training and Education

Interventional sub-specialty training requirements are set out in the Royal College of Radiologists 2016 IR curriculum and have been updated in the 2021 curriculum.

To assess your eligibility for the above position, please review the person specification.

**The Training Schemes:**

# The East

Hull is a friendly city with a prosperous economy and relatively low cost of living, all of which makes for an excellent quality of life. It has good rail and road links, with a direct train to London Kings Cross which take 2h 15min. Manchester Airport is also just over an hour and a half away with an ever-expanding repertoire of routes to national and international destinations. The city of Hull was recently the UK city of culture and has a busy cultural scene. There are several museums which pay tribute to Hull’s rich maritime heritage. The newly built Bonus arena attracts big names in the music industry. With a thriving cultural industries quarter and a range of city-wide events throughout the year, there is something on offer to suit everyone’s taste and interests.

## Organisation Profile

Hull University Hospitals NHS Foundation Trust (HUTH) is one of the UK’s busiest vascular units. We provide a full range of local hospital and community services for people in Hull and extending to York, Scarborough, and Grimsby for specialist vascular services.

## Vascular Radiology

The team of six Vascular Radiologists provide a full vascular imaging service including all modalities (angiography, CT, MRA, Duplex), and this includes both routine and emergency work.

The interventional vascular suite has 3 endovascular suites (including full theatre conditions) with a modern Day Case facility. The Day Case facility is an 8 bedded facility dedicated to vascular interventional procedures and is managed by Vascular Radiology. There are a further two interventional room at the Castle Hill Hospital site primarily for non-vascular intervention.

The Consultant Vascular Radiologists participate in out-patient work and have regular weekly outpatient clinics. It is expected that the successful candidate would contribute to this activity. The unit has a high profile in endovascular and health economic research and was the major contributor to the ACST, IMPROVE and BASIL trials. Hull is the first unit in the country training up peripheral vascular IR in Stroke thrombectomy. As a fellow there will be an opportunity to get involved.

A full range of Vascular interventional procedures are routinely performed in the unit, and a TIPSS programme has recently begun. Other recent developments include fEVAR, bEVAR, TACE and PACE. We also do prostate embolization, pulmonary AVM embolization and cardiac imaging. The radiology department has five multislice CT scanners with a 6th currently being installed. The total number of interventional angiographic procedures are increasing, diagnostic activity is now nearly all done using non-invasive imaging, particularly MR angiography.

## Duties of Post

Clinical Diagnostic and Endovascular Interventional up to 7

MDT (Vascular and Neurovascular) 2

Out-patient clinic 1

CT/MRA 1

Research/Audit/Teaching 2

## Non-vascular Radiology

A team of five non-vascular radiologists provide a breadth of imaging services, working closely alongside the hepatobiliary surgeons, upper GI surgeons and urological surgeons. This includes both routine and emergency work. They are mainly based at the Castle Hill site and have two IR rooms. They do cases at the Hull Royal Site in a dedicated non-vascular IR suite (room 5).

Hull has a busy hepato-biliary service with a high volume of biliary interventional work. One of the radiologists, does their own upper GI endoscopy and teaches endoscopy to gastroenterology and radiology higher trainees. There is an opportunity to work with them to perform complex GI procedures and to get an opportunity for OGD training leading to JAG accreditation. Trainees will gain experience in PTC and biliary stenting, gastrostomy insertion, gastric band adjustment, oesophageal stent insertion, duodenal stent insertion, colonic stent insertion, nephrostomy insertion, ureteric stent insertion, PCNL, CT guided biopsy and drainage procedure, USS guided biopsy and drainage procedures.

## Duties of Post

Endoscopy 1

Fluoroscopic Intervention up to 6

USS/ CT Intervention 2

MDT 1

## Staffing: Vascular Radiology

Dr Vivek Shrivastava (TPD – East Yorkshire)

Professor Duncan Ettles

Dr Graham Robinson

Dr Saira Sayeed

Dr Paul Scott (clinical lead)

Dr Raghuram Lakshminaryan (dTPD IR for all of Yorkshire)

Dr Shahid Seedat

Dr Kartik Ganga

## Staffing: Non-Vascular Radiology

Dr Lynn Ling

Dr Siva kumarmuthusamy

Dr Oliver Byass

Dr James Cast

Dr Abdul Razack

Dr Georgios Antoinides

## On-Call Commitments

The trainee will form part of the general radiology on-call rota for ST4 and ST5. During ST6, the trainee will be expected to undertake on-call vascular radiology. The trainee will always be on call with a Consultant Vascular Radiologist.

## Teaching

Active participation in the Hull Radiology Teaching programme will be expected as required. Teaching for radiology Specialty Trainees would be encouraged as required.

## Research/Audit

The trainee would be encouraged to participate in departmental research projects and to present the research at national conferences. Attendance/presentations at an international meeting would be encouraged and supported.

# The South

Sheffield is England's fourth-largest city, with a population of over half a million, with the wealth of facilities you would expect to find in a major city, yet it is compact, welcoming and accessible. It is a friendly city with a prosperous economy and relatively low cost of living, all of which makes for an excellent quality of life.

It has good rail and road links, with a typical train journey to London St Pancras taking 2 hours. Manchester Airport is also just over an hour away with an ever expanding repertoire of routes to national and international destinations.

The city of Sheffield contains an abundance of entertainment and cultural activities including award-winning theatres, (the Crucible and Lyceum are world-class theatres and major regional attractions), museums and galleries, a variety of clubs and live music venues, and a range of spectator and participation sports. With a thriving cultural industries quarter and a range of city-wide events throughout the year, there is something on offer to suit everyone’s taste and interests.

Sheffield also boasts two of Britain's most popular and successful Universities, which between them attract more than 38,000 students a year

Located on rolling hills and dissected by river valleys, Sheffield is one of the greenest and most wooded cities in Europe. More than a third of the city lies inside the beautiful Peak District National Park, and it is virtually surrounded by open countryside – over half the city’s population live within 15 minutes of open countryside. It is also the greenest city in England, with 175 woodlands and 75 public parks. There is also a wide range of affordable housing and excellent schools on offer.

## Organisation Profile

Sheffield Teaching Hospitals NHS Foundation Trust is one of the UK’s busiest and most successful NHS foundation trusts. We provide a full range of local hospital and community services for people in Sheffield, as well as specialist care for patients from further afield, including cancer, spinal cord injuries, renal and cardiothoracic services.

In addition to community health services, the Trust comprises five of Yorkshire’s best known teaching hospitals.

* The Royal Hallamshire Hospital
* The Northern General Hospital
* Charles Clifford Dental Hospital
* Weston Park Cancer Hospital
* Jessop Wing Maternity Hospital

The Trust has a history of high quality care, clinical excellence and innovation in medical research. The Trust has been awarded the title of ‘Hospital Trust of the Year’ in the Good Hospital Guide three times in five years and we are proud to be in the top 20% of NHS Trusts for patient satisfaction.

We strive to promote a culture of continuous quality improvement and encourage our staff to innovate and adopt ‘best practice’ in order to deliver the highest standard of care to our patients.

The Northern General Hospital is the home of the City’s Accident and Emergency department which is also now one of three adult Major Trauma Centres for the Yorkshire and Humber region. A number of specialist medical and surgical services are also located at the Northern General Hospital including cardiac, orthopaedics, burns, plastic surgery, spinal injuries and renal to name a few.

A state-of-the-art laboratories complex provides leading edge diagnostic services. The hospital also provides a wide range of specialist surgery such as orthopaedic, spinal cord, hand and kidney transplantation.

The Royal Hallamshire Hospital has a dedicated neurosciences department including an intensive care unit for patients with head injuries, neurological conditions such as stroke and for patients that have undergone neurosurgery. It also has a gastroenterology department, a large tropical medicine and infectious diseases unit as well as a specialist haematology centre and other medical and surgical services.

Sheffield Teaching Hospitals is home to the largest dental school in the region, a maternity hospital with a specialist neonatal intensive care unit and a world renowned cancer hospital.

The Trust is also integrated with the City’s adult NHS community services to support our work to provide care closer to home for patients and preventing admissions to hospital wherever possible.

We have a long tradition of clinical and scientific achievement, including the development of one of the UK’s first Academic Health Sciences Networks. Through our partnerships with the University of Sheffield, Sheffield Hallam University, other health and social care providers and industry we remain at the forefront of advancements in clinical services, teaching and research.

We have around 15,000 employees, making us the second biggest employer in the city. We aim to reflect the diversity of local communities and are proud of our new and existing partnerships with local people, patients, neighbouring NHS organisations, local authority and charitable bodies.

We strive to recruit and retain the best staff: the dedication and skill of our employees are what make our services successful and we continue to keep the health and wellbeing of our staff as a priority.

Our vision is to be recognised as the best provider of healthcare, clinical research and education in the UK and a strong contributor to the aspiration of Sheffield to be a vibrant and healthy city. We have begun this journey with our staff, partners and patients and we will continue to explore every aspect of our business to ensure we are doing our very best to achieve our vision.

For further details of our services and organisational structure, including our Board of Directors, and our future plans please visit [www.sth.nhs.uk/about-us](http://www.sth.nhs.uk/about-us)

## The Sheffield Vascular Institute

In 1995 Vascular Services throughout Sheffield were amalgamated into the Sheffield Vascular Institute, based at the Northern General Hospital. The service has developed substantially since this time following the success of a fully integrated service. The SVI is a collaborative service comprising Vascular Surgeons, Vascular Radiologists, Medical Physicists, Clinical Nurse Specialists (including dedicated Research Nurses), physiotherapists, rehabilitation and support specialists. Initially set up to serve the population of Sheffield, the SVI now provides a comprehensive “hub and spoke” service to include Rotherham, Barnsley and Chesterfield. The SVI has significant research links throughout the UK and abroad and attracts substantial research monies from national bodies, charitable institutions and commercial sources.

Please visit our website at <http://www.sth.nhs.uk/services/a-z-of-services?id=79>

## Vascular Radiology

The Vascular Radiologists are managerially a part of the Vascular CMT, but retain the strongest of links with the Radiology CMT with regard particularly to training and access to CT and MRI. The Vascular Radiologists provide a full vascular imaging service including all modalities (angiography, CT, MRA, Duplex), and this includes both routine and emergency work.

The interventional vascular suite has 2 endovascular suites (including full theatre conditions) with a modern-Day Case facility. The Day Case facility is dedicated to vascular interventional procedures and is managed by Vascular Radiology. There is a 3rd interventional room at the Royal Hallamshire Hospital. All 3 rooms have state of the art Phillips Allura technology.

The Consultant Vascular Radiologists participate in out-patient work and have regular weekly outpatient clinics. It is expected that the successful candidate would contribute to this activity.

The unit has a high profile in endovascular and health economic research and was the major contributor to the CAVATAS study (carotid disease), and was a major participant in the BASIL One (critical limb treatment) and EVAR trials (aortic aneurysm stent grafting), and there is continued input into the current BASIL 2 and 3 trials, and other clinical trials, and research into the organisation of vascular services, as part of a NIHR programme grant held at the University of Sheffield’s School of Health and Related Research (ScHARR). These reflect the specific interests of the unit, which include the endovascular treatment of carotid disease, thoracic and abdominal aortic aneurysm stent grafting, vascular malformations and health care modelling.

A full range of Vascular interventional procedures are routinely performed in the unit, and a TIPSS programme has recently begun. Other developments include fEVAR, bEVAR, TACE and PACE .

The radiology department has three multi-slice CT scanners, 3 dedicated vascular CT lists, as well as 5 dedicated vascular MR lists.

## Duties of Post

* Diagnostic and Endovascular Interventional up to 7
* MDT (Vascular and Neurovascular) 2
* Out-patient clinic 1
* CT/MRA 1
* Research/Audit/Teaching 2

## Non-Vascular Radiology

The non-vascular radiologists provide a breadth of imaging services, working closely alongside the hepatobiliary surgeons, upper GI surgeons and urological surgeons. This includes both routine and emergency work.

The main radiology unit has an interventional fluoroscopy suite at both the Northern General and Royal Hallamshire sites. Regular interventional work is also carried out in the ultrasound and CT departments.

Sheffield has a busy hepato-biliary service with a high volume of biliary interventional work (over 150 PTCs per year). In addition, the majority of oesophageal stents are inserted by radiology and the gastrostomy service is managed almost exclusively by radiology (approx. 150 insertions per year). Sheffield is a quaternary urology centre, receiving referrals from around the country.

Trainees will gain experience in PTC and biliary stenting, gastrostomy insertion, gastric band adjustment, oesophageal stent insertion, duodenal stent insertion, colonic stent insertion, nephrostomy insertion, ureteric stent insertion, PCNL, thermal ablation of the liver and kidney, CT guided biopsy and drainage procedure, USS guided biopsy and drainage procedures. Trainees will also have the opportunity for OGD training, with a view to JAG accreditation.

## Duties of Post

* Endoscopy 1
* Fluoroscopic Intervention up to 6
* USS/ CT Intervention 2
* MDT 1

## Staffing: Vascular Radiology

Dr V Burrows Full-time NHS Consultant (Vascular Radiology)

Dr S Goode NHS Consultant (Vascular Radiology)

Dr D Kusuma Full-time NHS Consultant (Vascular Radiology)

Dr D Manoharan Full-time NHS Consultant (Vascular Radiology)

Dr S M Thomas Full-time NHS Consultant (Radiology lead, Vascular and Cardiac Radiology)

Dr M Abbas Full-time NHS Consultant (Vascular Radiology)

## Staffing: Non-Vascular Radiology

Dr N Hersey Full-time NHS Consultant (NVI)

Dr S Kennish Full-time NHS Consultant (Uro-intervention)

Dr F Lee Full-time NHS Consultant (NVI)

Dr F Salim Full-time NHS Consultant (Uro-intervention)

Dr j Smith Full time NHS Consultant (Uro-intervention and NVI)

## On-Call Commitments

The trainee will form part of the general radiology on-call rota for ST4 and ST5. During ST6, the trainee will be expected to undertake on-call vascular radiology. The trainee will always be on call with a Consultant Vascular Radiologist.

## Teaching

Active participation in the Sheffield and North Trent Radiology Teaching programme will be expected as required. Teaching for radiology Specialty Trainees would be encouraged as required.

Teaching of medical students on the Northern General Hospital site is expected to be part of the regular commitments of the post.

## Research/Audit

The trainee would be encouraged to participate in departmental research projects and to present the research at national conferences. Attendance/presentations at an international meeting would be encouraged and supported.

# The West

Leeds is a vibrant city, It has a large variety of restaurants, bars, cafes and for those enjoying a bit of culture, Leeds Art Gallery, The Grand Theatre and The West Yorkshire Playhouse. It has an excellent rail network, with a direct line to London and also an international airport. The spa town of Harrogate and historic York are only a short drive away, each of which are home to Bettys’ cafes. For those loving the outdoors, the Dales, Moors, Yorkshire Coast, and the Yorkshire Sculpture Park are only a short drive away.

## Organisation Profile

These posts will be part of the Yorkshire School of Radiology and will be based in the West Yorkshire locality. The appointed Trainees will be part of the Leeds and West Yorkshire Radiology Training Scheme.

The posts will be coordinated by the specialty interest leads for vascular intervention (Dr Karen Flood) and non-vascular intervention (Dr Oliver Hulson) and will involve attachments in the Leeds Teaching Hospitals NHS Trust and the associated surrounding trusts (Mid Yorkshire Hospitals NHS Trust, Bradford Teaching Hospitals NHS Foundation Trust, Calderdale and Huddersfield NHS Foundation Trust and York Teaching Hospital NHS Foundation Trust). The posts will include training in both vascular and non-vascular intervention and comply with the Royal College of Radiology 2021 curriculum for interventional radiology.

The trainee will rotate through six-month attachments in each of ST4, ST5 and ST6. Placements will ensure curriculum coverage and ensure development of specialty interests, particularly in year 6.

Trainees are supported to become active members of the MDT process and be competent in the reporting and interpretation of relevant non-invasive imaging. Ability to understand the clinical context and wider treatment options (including surgical, medical and conservative options) for a patient is a vital skill that is emphasised throughout the programme. By the end of training trainees will be competent clinicians in their chosen sub-specialties. The scheme does not support the training of pure technicians undertaking procedures in isolation from the clinical and imaging context.

## Vascular Intervention

Vascular intervention is very strong on the Leeds and West Yorkshire scheme with a national and international reputation. Vascular training is delivered in all hospitals in the locality and opportunities exist to encounter the full range of vascular interventional procedures covering the interventional radiology curriculum to level 1/2. There are day case units at St. James’ Hospital (renal and liver), gynaecologic intervention, vascular access, limb salvage procedures and(Leeds), in Mid Yorkshire and in York. There are very close working relationships with the vascular surgical teams, and the trauma and liver services in particular.

Particular interests within the locality are EVAR, thoracic EVAR, emergency EVAR (for rupture), fenestrated abdominal EVAR, hepatic intervention including transarterial chemoembolisation, TIPSS, transplant intervention treatment of vascular malformations.

Non-invasive imaging is used extensively throughout the locality, with invasive imaging reserved for problem solving or with a view to proceeding to intervention. Training in MR angiography, MR venography, cardiac MR, CT angiography, CT peripheral angiography, cardiac CT, MR for assessment of fibroids and all forms of vascular ultrasound will be provided to level 2.

## Non-Vascular intervention

Non-vascular intervention education will be delivered in all hospitals in the locality. There are three uro-oncology centres (Leeds, Bradford and Mid-Yorkshire) covering a population of 2.6 million. Within these centres, all aspects of uro-intervention are performed including ureteric stenting, PCNL access, thermal ablation, extraanatomic stenting, prostate brachytherapy and intra-operative USS for robotic nephron sparing surgery. There are dedicated uro-radiologists within the locality with training provided to level 2 in all procedures except tumour ablation (where training will be observational only - core). This is supported with full diagnostic USS, CT, PET-CT, nuclear medicine and MR Uro-radiology including multiparametric MR and targeted prostatic biopsies.

The interventional oncology programme in Leeds is well established with a national and international reputation. Image guided delivery of a wide range of oncological treatments is undertaken (eg. thermal- cryo-, microwave and RF- ablation) in liver, lung, adrenal and renal tumours. Pilot evaluation of other techniques (eg. electroporation and thermal ablation in other less established organs) is performed. IR trainees will be offered the opportunity to gain observational experience at ST4 and hands-on experience at ST6 in the technical aspects of ablation techniques. In addition, training is offered in appropriate decision making, workup and the wider aspects of care of these complex patients. There are opportunities for audit and research.

There are active colorectal and upper GI intervention services within the locality based within the regional cancer centres and affiliated to the Yorkshire Cancer Network. Oesophageal, colonic and gastroduodenal stent placement and radiologically inserted gastrostomy training are offered to level 2. Most biliary intervention in region is performed endoscopically though there are small numbers of percutaneous biliary procedures performed in Leeds, Mid-Yorkshire and Bradford.

Ultrasound guided aspirations and biopsies of neck masses and thyroids, ultrasound guided chest aspirations and chest drain insertion, pleural and chest biopsies, CT guided lung biopsies and abdominal biopsies and drainages are performed extensively across all sites in the locality.

## On call arrangements

The trainee will participate in the general radiology on call rota in years 4 and 5. During year 6 trainees will participate in the IR out-of-hours on-call, with some cross-sectional on-call work. Trainees will contribute to the Leeds and Bradford/Calderdale on-call rotas.

## Research / Audit / Teaching

Trainees will be encouraged to participate in undergraduate and postgraduate teaching and to develop training programmes. They will be expected to participate in departmental audit and research projects with a view to attending and presenting at National/International meetings.

## Example Timetable

This can be tailored to the interests and training requirements of the appointee. A typical weekly timetable might involve:

Intervention (vascular and non-vascular): 5 sessions

IR Clinic / MDTMs: 1 session

US (vascular and general): 1 session

CT / MRA reporting: 1 session

Plain film reporting: 1 session

Study / teaching / audit / research: 1 session

On-call

There are dedicated MDT’s chaired by interventional radiologists in a wide range of subspecialist areas including vascular, renal access, diabetic foot limb salvage, vascular anomalies, HPB, and renal transplant.

During their 3 years of interventional training, trainees can expect to rotate through several of the centres in the locality to maximise experience in the different range of procedures and operator preferences.

## Appraisal and assessment

There will be appraisal by educational supervisors prior to taking up the post and at 3 monthly intervals during tenure to establish initial and ongoing training objectives and to assess progress. Clinical supervision in individual placements will ensure adequate progress.

Formal assessment of progress at 12 monthly intervals will be through the ARCP process.

The scheme actively seeks feedback from trainees to monitor and improve the training provided.

Locality trainers, educational resources available and on-call arrangements

Leeds Teaching Hospitals NHS Trust

## Vascular intervention

Dr Simon McPherson

Dr Jai Patel

Dr Christopher Hammond (Radiology Clinical Director)

Dr Sapna Puppala

Dr Karen Flood Specialist Interest Lead for vascular intervention

Dr James Lenton

Dr David Shaw

Dr Paul Walker

Dr Constantinos Tingerides

Dr Christopher Miller

## Non-vascular intervention

Dr Tze Wah

Dr Simon Burbidge (Clinical Lead for Interventional Radiology)

Dr Ese Adiotomre

Dr Oliver Hulson (Academy Specialty interest lead for non-vascular intervention)

Dr Atif Khan

Dr Hannah Lambie (TPD)

Dr Elen Thomson

Dr Thomas Kaye

Dr Adam Laverty

Dr Josh Bell

Dr Taryn Cruikshanks

## Resources

Four angiographic intervention suites, including three with full theatre conditions and an additional neurovascular (biplane) suite. All of these suites have been recently refurbished with Philips Allura XD40 machines (3) and Siemens Artis Zee (1)

Five multislice CT scanner (GE and Siemens) Four 1.5T MRI scanners (Siemens).

Three dedicated vascular US labs and 17 sessions of vascular US per week across the trust.

One dedicated non-vascular intervention US lab running 10 sessions per week

25+ sessions vascular intervention per week

3 sessions dedicated line placement lists

3 sessions non-vascular intervention in the angio-suite per week

10 sessions US guided non-vascular intervention per week

Dedicated consultant on-call vascular and non-vascular intervention rotas

## Mid Yorkshire Hospitals NHS Trust

Vascular and non-vascular intervention

Dr Rish Ratnalingham

Dr David Shaw

Dr Paul Turner

Dr James Lenton

Dr John Brittenden

Dr Stuart Kerr

Dr David Stockell

Dr Aarushi Gangahar

Resources

1 theatre grade angio suite (Siemens)

1. vascular/cardiac intervention suite (Siemens)
2. non-vascular intervention suites (Siemens and Philips)

One 128 slice, one 64 slice and one 40 slice CT scanners (Siemens)

Three 1.5T MRI scanners (Philips)

12 sessions vascular intervention per week

3 sessions non-vascular intervention per week

Dedicated on-call intervention rota.

## Bradford Teaching Hospitals NHS Foundation Trust

Vascular intervention:

Vascular intervention:

Dr Jonathan Barber

Dr Shoaib Mohammed Shaikh

Non-vascular GI intervention

Dr Amjad Mohammed

Dr Naeem Jagidar

Dr Donal Bradley

Dr Timothy Guest

Non-vascular GU Intervention:

Dr Harry Bardgett

Dr Nicola Lee

Dr Andrew Walsh

Resources

* Single vascular intervention suite with Siemens C-arm flat panel unit
* Single non vascular interventional suite for GI and GU procedures with floor mounted Siemens flat panel unit.
* Three CT scanners (Toshiba One and Prime, 320; 140 and 64 slice scanners)
* Three 1.5T MRI scanners (Siemens/GE/Toshiba)
* Three ultrasound suites with a total of 17 machines.
* 9 sessions vascular intervention per week
* 3 sessions non-vascular intervention per week (including 2 dedicated GI intervention sessions)
* Dedicated consultant on-call intervention rota

## Calderdale and Huddersfield NHS Foundation Trust

Dr Hossam Elgebali

Dr David Shaw

Dr Chris Miller

Two intervention suites

Two 32 slice CT scanners (Philips and Toshiba)

Two 1.5T MRI scanners (Philips)

7 sessions of mixed vascular and non-vascular intervention per week

Dedicated consultant on-call intervention rota via link with Bradford

## York Teaching Hospitals NHS Trust

Dr Tony Bowker

Dr Niall Warnock

Dr Marcus Nicholls

Dr Jon Poels

Dr Bahir Almazedi

Two intervention suites (Philips)

Three CT scanners (2 x 64 and 32 slice - all Siemens)

Two 1.5T MRI scanner (Siemens) + mobile unit

5 US rooms (with mixture of Philips and Siemens machines)

10 sessions mixed vascular and non-vascular intervention per week plus up to 5 ultrasound/CT sessions with intervention

Dedicated consultant on-call interventional rota

## Study and Training

Health Education Yorkshire and the Humber is committed to developing a postgraduate training programme as laid down by the GMC, Colleges and by the Postgraduate Dean’s Network. At local level, college tutors work with Unit Director or Postgraduate Education in supervising these programmes. Trainees will be expected to take part in these programmes (including audit) and to attend counselling sessions/professional review. Study leave will form part of these education programmes and will be arranged in conjunction with the appropriate tutor.

All posts are recognised for postgraduate training.

Study leave is granted in accordance with Health Education Yorkshire and the Humber policy and are subject to the maintenance of the service.

## Main Conditions of Service

The posts are whole-time and the appointments are subject to:-

1. The Terms and Conditions of Service for Hospital Medical and Dental Staff

(England and Wales)

1. Satisfactory registration with the General Medical Council (London)
2. Medical Fitness – You may be required to undergo a medical examination and chest x-ray. Potential applicants should be aware of the Department of Health and GMC/GDC requirements with regards to HIV/AIDS and Hepatitis viruses. Candidates must be immune to Hepatitis B. You will be required to provide, in advance of appointment, evidence of immunity or have a local blood test (as deemed necessary by the Occupational Health Department)

**Salary Scale**

The current nationally agreed pay scale for this grade is payable.

## Unforeseen Circumstances

In accordance with the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales) paragraph 110, Junior Doctors shall be expected in the run of their duties and within their contact and job description, to cover for the occasional and brief absence of colleagues as far as is practicable.

European Working Time Directive (EWTD)

All posts on the rotation comply with European Working Time Directive regulations.

**Junior Doctors’ Monitoring**

From 1 December 2000 there is a contractual obligation to monitor junior doctors’ New Deal compliance. In accordance with Health Service Circular 2000/031 junior doctors have a contractual obligation to monitor hours on request; this will include participation in local monitoring exercises.

## Health and Safety

Each Trust participating in this Training Scheme recognises its duties under the

Health and Safety at Work Act 1974 to ensure, as far as is reasonably practical, the Health, Safety and Welfare at Work of all its employees and, in addition, the business of the Trust shall be conducted so as to ensure that patients, their relatives, contractors, voluntary workers, visitors and members of the public having access to Trust premises and the facilities are not exposed to risk to their health and safety.

Agreements will be made for the successful candidate to receive copies of the Health and Safety policies, which are relevant to the appropriate Trust.

## Removal expenses

The removal expenses applicable to this post will be the policies issued by the Administrative Trust. You should not commit yourself to any expenditure in connection with relocation before first obtaining advice and approval from the Personnel Department at your Administrative Trust, otherwise you may incur costs, which you will be unable to claim.

## Use of Information Technology

Under the Computer Misuse Act 1990, any individual who knowingly attempts to gain unauthorised access to any programme or data held on a computer can be prosecuted. An individual who modifies any programme or data in a computer which they are unauthorised so to do is also liable under the Act. If found guilty of these offences a person may be given a custodial sentence of up to six months or a fine or both. The person would also be subject to disciplinary action which may result is dismissal.

Similarly, in accordance with copyright law, any person involved in the illegal reproduction of software or who makes, acquires or uses unauthorised copies of computer software, will be subject to disciplinary action, which may lead to dismissal.

Notification of Termination of Employment

Specialty trainees are required to give the Administrative Trust a minimum of three month’s notice of termination of their employment.

## Visiting

Candidates wishing to visit the hospitals concerned are at liberty to make arrangements direct with the Consultants named in this job description.

**East Yorkshire**:

Dr Vivek Shrivastava - Vivek.Shrivastastava@hey.nhs.uk

Consultant Interventional Radiologist and Training Programme Director

Department of Vascular Radiology

Hull Royal Infirmary

Anlaby Road

Hull HU3 2JZ

**South Yorkshire:**

Dr Naomi Hersey - n.hersey@nhs.net

Consultant Interventional Radiologist and Training Programme Director

Department of Interventional Radiology

Royal Hallamshire

Glossop Road

Sheffield

S10 2JE

**West Yorkshire:**

Dr Karen Flood - karen.flood2@nhs.net

Consultant Interventional Radiologist and IR Education lead

Department of Vascular Interventional Radiology

Leeds General Infirmary

Leeds

LS1 3EX