



You are the Executive Director of Medical Services at a teaching hospital.



Perfect Anaesthesia

2014 Day 1 – (Supplementary)

Medical Leader	
Medical Expert	•
Communicator	
Advocate	
Scholar	
Professional	
Collaborator	•
Manager	•

The Clinical Director of Anaesthetics makes an appointment to talk to you about a younger consultant

The Clinical Director of Anaesthetics makes an appointment to talk to you about a younger consultant that he has concerns about.

The consultant is an international medical graduate who has recently passed their College exam and been granted Fellowship. They are very proud of their accomplishment.

The Clinical Director has reviewed five recent cases that the young consultant has been responsible for. Three of these cases ended up, unexpectedly, in ICU following apparent routine anaesthesia. The other two cases required very prolonged stays in recovery (PACU) and the NUM raised her concerns with the Clinical Director.

In reviewing the records of these patients, the Clinical Director has noted that each patient received a very high dose of Fentanyl. The dose is explained as being between 5 and 10 times what the Clinical Director believes is a reasonable dose for the patient concerned.

The Clinical Director has briefly discussed the cases with the consultant. The young consultant explained that she is committed to providing the "Perfect Anaesthetic". She believes patients should suffer no pain as a consequence of surgery, and so require sufficient analgesia to remove all awareness. She sees no problems with the anaesthetics that she has given. She identifies a range of other comorbidities that she believes lead to the patients' admission to ICU. She apparently noted that her relationship with the NUM of PACU could be improved, but that the NUM was well known for being prickly and did not like working with younger consultants.

The Clinical Director is very upset and expresses the opinion that he cannot work with this young woman any longer. He is seeking your advice before writing to her terminating her appointment with the health service.

What are your options and what is your recommended way forward?







Censor's Notes

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Issues to raise:

- HR processes immediate termination in public v private
- Identify potential barriers to communication:
 - o Gender
 - o Culture
 - o Age
 - o Religious beliefs
- Mandatory reporting to AHPRA
- M&M review processes? Unplanned admits to ICU?
- Role delineation of hospital proper ICU or HDU?