

## Thinking of General and Acute Care Medicine?

General Medicine is the diagnosis and management of conditions that may be complex, difficult to diagnose or involve multiple organs and systems of the body.

## Overview of General and Acute Care Medicine

General physicians are highly trained specialists who provide a range of non-surgical health care to adult patients. They care for difficult, serious or unusual medical problems and continue to see the patient until these problems have resolved or stabilised. Patients are generally referred to them by other doctors.

**Global Approach:** Whether the referral identifies one health problem or many, the general physician's assessment is always comprehensive. This global approach enables problems to be detected and diagnostic possibilities to be considered which might otherwise be missed.

**Complex Care:** General physicians are especially trained to care for patients with complex illnesses, in which the diagnosis may be difficult. The general physician's broad training provides expertise in diagnosis and treatment of problems affecting different body systems in a patient. They are also trained to deal with social and psychological impact of disease.

**Procedures:** General physicians are trained to carry out a variety of medical procedures for the diagnosis and management of patients with severe and complex illnesses.

**Diagnosis:** General physicians have special training in the usefulness, limitations and costs of most diagnostic tests. General physicians use diagnostic tests logically, safely and effectively to investigate difficult diagnostic problems.

**Treatment:** General physicians are trained in the critical analysis of research reports and drug industry claims about new treatments. They are knowledgeable about complex interactions of medications given simultaneously to treat multiple illnesses in a patient. General physician have special expertise in making treatment decisions to help patients with complex and serious illnesses.

**Pre- and Post-operative assessment:** General physicians are frequently asked to review patients before surgery. They advise surgeons of a patient's risk status and can recommend appropriate management to minimise the risk of the operation. They can also assist in postoperative care and ongoing medical problems or complications.

## Specialty Training

Physician training is undertaken through the Royal Australasian College of Physicians (RACP) and consists of:

- a minimum of 36 months of Adult Medicine Basic Training followed by
- a minimum of 36 months of Advanced Training in General and Acute Care Medicine (a minimum of 4 years if dual training with another specialty)

Trainees may apply to enter the Advanced Training program if they:

- have completed Adult Medicine Basic Training programme

- have successfully completed the RACP Clinical and Written Examinations
- hold current medical registration and
- secured an accredited training position.

All advanced training occurs in supervised clinical placements within RACP accredited sites.

Over the course of the training program, all trainees must carry out a variety of teaching and learning activities, assessments and other program requirements in consultation with their supervisors.

Once the training is satisfactorily completed, Fellowship of the RACP (FRACP) is awarded.

**It is highly likely that you need to complete placements in multiple DHBs whilst completing vocational training**

### Personal qualities required to be a General and Acute Care Medicine Specialist

- fostering of a patient-centred approach to health care
- maintenance of a balanced and broad perspective on health care delivery
- preparedness to learn and adopt new and validated approaches to diagnosis and management, despite logistical difficulties, and to change work practices when appropriate
- willingness to reflect on, and learn from, mistakes
- preparedness to change management plans
- tolerance of uncertainty
- ability to cope with unexpected disappointments, equanimity, resiliency and calmness in the face of challenging clinical demands
- desire to contribute to improvements in the health system
- desire to foster clinical practice, research and teaching in general internal medicine
- preparedness to acknowledge doubt and uncertainty in clinical practice.

### Specialty Training Programme Information

#### Medical College

[Royal Australasian College of Physicians \(RACP\)](#)

#### Fellowship/Qualification

Fellowship of the Royal Australasian College of Physicians (FRACP)

#### Application and selection process

Application/selection [Basic training](#)

Application/selection [Advanced Training in General and Acute Care Medicine](#)

Contact details New Zealand: [GeneralMedicine@racp.org.nz](mailto:GeneralMedicine@racp.org.nz)

To find out more about physicians/paediatricians and other specialty areas, [click here](#). This also provides a useful Q&A section.

Further information can be obtained on [Royal Australasian College of Physicians \(RACP\)](#)

## Resident Medical Officer (RMO) Information

Demand for vocational training posts is currently not available

### RMO training registrar positions contracted

Northern*	Midland*	Central*	South Island*	Total*
148.7	42	103.6	80.5	374.8

(September 2016 RMO census)

\*The number is not separately available but included in the total registered in Internal Medicine

## Regions

### **Northern:**

Northland, Waitemata, Auckland, Counties Manukau DHBs

### **Midland:**

Lakes, Tairāwhiti, Bay of Plenty, Waikato, Taranaki DHBs

### **Central:**

Hawke's Bay, Wanganui, MidCentral, Wairarapa, Capital and Coast, Hutt Valley DHBs

### **South Island:**

Nelson Marlborough, Canterbury, South Canterbury, Southern, West Coast DHBs

## Senior Medical Officer (SMO) Information

Year	Number of NZ New Fellows
2015	*
2014	*

Average Age of SMOs*	Number registered with the Medical Council *	% of international medical graduates in the workforce*
51	1024	42

**Number by Region** (September 2016 SMO census)

Northern		Midland		Central		South Island		Total	
FTE*	Headcount*	FTE*	Headcount*	FTE*	Headcount*	FTE*	Headcount*	FTE*	Headcount*
159.1	188	50.5	52	47.2	57	83.3	116	340	413

\*The number is not separately available but included in the total registered in Internal Medicine.