TITLE OF FELLOWSHIP	Christchurch Upper Limb Fellowship	
Chief Supervisor	Alex Malone	
Contact Details	Name	Alex Malone
	Address	Leinster Orthopaedic Centre 165 Leinster Road Merivale Christchurch 8014
	Phone	03 355 3500
	Email	amalone@leinsterortho.co.nz
	Website	N/A
Co-supervisor (if applicable)	Khalid Mohammed	
Back up Supervisor		
Length of Fellowship	6 or 12 months	
Initial start date	1 August / 1 Feb	
Institution(s)	University of Otago, Christchurch	
Sub Specialty (ies)	Shoulder and Elbow	
Education Goals and Characteristics	The fellowship will provide a broad training in managing all Shoulder and Elbow Conditions, including upper limb trauma, reconstruction, arthroscopy and arthroplasty including complex and revision cases.	
Requirements for Fellowship Applicants	Successfully completed vocational orthopaedic training in an equivalent healthcare setting. Be eligible for registration with the New Zealand Medical Council.	
How is the Fellowship being funded?	Industry funding to the University of Otago.	
How to apply (where do applicants send enquiries)	Applicants should contact the email above.	

Description of Fellowship	The post is a 6 or 12 month fellowship in upper limb surgery (Shoulder and Elbow). We prioritise applicants who have recently finished their general orthopaedic training and have a demonstrated academic interest in this field. The Fellowship supervisors are Khalid Mohammed and Alex Malone with practices incorporating a wide spectrum of Upper Limb Orthopaedics. Alex Malone trained at the Royal National Orthopaedic Hospital in the UK, Sydney and the Mayo Clinic, USA, and both surgeons are trained and practice extensively in Upper Limb Surgery. Ian Penny also contributes to the fellowship. The fellowship will provide a broad training in common upper limb trauma reconstruction, Upper Limb arthroscopy and arthroplasty including complex tertiary cases. The program also facilitates collaborative research. In Christchurch we are fortunate to have a large clinical workload and an established clinical research unit. Exposure to operating: You will be exposed to approximately 5 operating sessions per week. There is a good variety of cases and some lists with parallel operating with the potential for a fellow's elective list with cases to match level of surgical experience. Here is a breakdown of my case mix for the past 12 months: Shoulder 80% Elective and Trauma Reconstruction Elbow 10% Elective and Trauma Reconstruction 5% complex upper limb acute trauma 5% Primary lower limb arthroplasty I operate on about 15 cases per week. My open / arthroscopic mix is approximately 50:50 for shoulder / elbow cases. The majority of the shoulder work is soft tissue reconstruction including rotator cuff repair, stabilisation and labral repairs, arthroscopic AC joint stabilisation and open reconstruction. Other open cases include conventional and reverse shoulder arthroplasty, Latarjet, and acute fixation or arthroplasty for proximal humeral trauma. Elbow procedures include arthroscopic osteocapsulectomy, distal biceps and fracture reconstruction. Khalid Mohammed has a similar mix: Shoulder 70% Elective and Post Trauma Reconstruction Elbow 15% Elective and Post Trauma Reconstruction Other 15% Lower limb / sports reconstruction Khalid also does some sports knee, but there are also a couple of dedicated knee surgeons in the unit who do the volume of knee work.

	Ian Penny is a general orthopaedic surgeon with mainly knee and shoulder work. Trauma cases: There is access to trauma operating sessions through the public hospital each fortnight with 2-3 parallel trauma theatres with the opportunity to operate independently according to case mix and experience. We also have some cold acute trauma lists at Burwood Hospital which the fellow can utilise. Much of the post trauma reconstruction occurs in the private setting under ACC, our National Injury Insurance provider. On Call commitment: 1 in 10 with internal cover as a Senior Registrar. This equates to 10 weekend day shifts per year and one evening shift per fortnight. You must be capable of independently managing the majority of common orthopaedic trauma including ATLS assessment and surgical management. The hospital and the Orthopaedic department have extensive experience in managing mass casualty events with over 120 major trauma casualties in the aftermath of the 2011 Earthquake and 40 multiple GSW cases after the 2019 Mosque shooting. http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(12)60313-4/fulltext#article_upsell Exposure to new patient clinics: You will be allocated 3 private and 2 public clinics per fortnight. In the private clinics you will have your own list of new patients to practice clinical assessment and formulate plans of management. Fellow's role in public/private settings. The Fellow comes to 2 Public academic clinical meetings, 2 public operating sessions, 2 public clinics and 2 research sessions per fortnight, the rest is private. **Research:** We have allocated 2 research sessions per fortnight, regular mentor meetings and monthly academic unit meetings. All registrars and fellows are involved in setting up and running trials and you would be expected to take on at least one major project in your fellowship period. **Teaching:** The fellow has an official appointment as a Professional Practice Fellow with the University of Otago and undertakes formal teaching and assessment of Medical students. **Salary:** NZ $ 100,000 per annum. A small allocation of CME funding is available on request.

	Induction: Induction will take place during the first month in order to introduce the Fellow to the structure of the Health Service in New Zealand, including legislation affecting everyday practice, cultural awareness, lines of referral, available support and focus on best practice and safety. A peer mentor will be identified with a similar background to help with the induction process. Meetings will be arranged the following key members of the Orthopaedic department: Mr Alex Malone, Fellowship Programme Director Mr Gary Hooper, Professor of Orthopaedic Surgery and Head of department Mr Kris Dalzel, Clinical Director Janine Ingram, Surgical Services manager Jan Armstrong, Outpatients Clinic Co-ordinator Separate inductions will take place for work at each of the hospitals (Burwood Hospital, St George's Hospital, Southern Cross Hospital, Christchurch Public hospital, Forte Hospital) to identify individual Hospital procedures and registration requirements. The Fellow will be referred to Medical Council publications 'Good Medical Practice' and 'Cole's Medical Practice in New Zealand', for further reading. **Supervision and Monitoring:** Performance monitoring will take place on a regular basis and in addition, formal supervision meetings will occur daily during the first week, weekly for 3 months and monthly thereafter. Initial meetings will be to ensure the induction process is completed, clarify the performance objectives, set out the goals and expected standards of the fellowship including academic and teaching commitments. A three-month meeting will be arranged to assess the ongoing performance, identify any areas for concern and ensure that adequate progress has been made in all aspects of the key performance objectives. A final meeting at the end of the Fellowship period is designed to facilitate 360 degree feedback on the overall performance with respect to key performance objectives and clinical and academic outcomes. Feedback will be obtained from the Fellow regarding the value of the Fellowship and the areas for subsequent improvement. NZ medical council: http://www.mcnz.org.nz/ The English proficiency requirement is very high if you cannot provide documentation that English is your first language.

	The Medical council has recently accepted an additional test, the Occupational English Test (OET) as well as IELTS. https://www.mcnz.org.nz/assets/Policies/ad921b8a7f/English-language-policy.pdf Immigration: www.immigration.govt.nz/ More information can be obtained from previous fellows from USA, Scandinavia, Australia, NZ, UK, Ireland, India and Canada: Chethan Nagaraj: chethanortho@gmail.com Karthik Selvarajan: karthi@doctors.org.uk Fredrik Einnarson: karl.fredrik@gmail.com Diarmuid Moloney: molonyd@eircom.net Luis Corrales: lcorrales1@gmail.com Luke McDermott: lukemcd@live.com.au Danielle Stachiw: dmstachiw@gmail.com Dave Barlow: daveybarlow@hotmail.com Ewan Bigsby: drewan@doctors.org.uk John Galbraith: galbraith.john@gmail.com Caleb Netting: calebnetting@gmail.com Richard Lloyd: rlloydie@googlemail.com Huw Williams: huwlmwilliams@gmail.com Helen Ingoe: helen_ingoe@hotmail.com Alastair Konarski: ajkonarski@doctors.org.uk Spencer Albertson: saa5484@gmail.com