

Christopher Van Issum – Oculoplastic Clinical Research Fellow for 2012/2013

The Fellowship:

The Fellowship aims to prepare you to becoming a consultant. Your bosses will hence expect the utmost commitment on your behalf.

The initial 3 months in surgery were more observational in my case. This is due to the fact I had only limited previous surgical exposure to oculoplastics and needed to grasp the concepts before starting to operate. You have to learn the different methods of your different consultants and stick with them. The more you prepare, the more likely you will be invited to get on with procedures.

Your consultants will provide you with core articles to read. Keep up to date with them as discussions in surgery will often point to one or the other article.

During clinics, your supervisors expect you to present all patients to discuss the assessment, diagnosis, outcome plan and if surgery is required your proposed method. You also have 1-2 solo clinics though a supervisor is always in house or available by phone if need be.

There are no proper on-calls per-se though you are expected to remain available by phone and email at all times. You will answer the registrars' questions and if necessary make yourself available at the weekend or evening for urgent situations. This however does not happen regularly. Further on during your Fellowship and providing the consultants are happy to let you do so, there is a possibility to take on extra clinics or lists if there is a specific need. These are usually held in the evenings or on Saturdays. The person to contact for this is Matt McAlpine in Greenlane. These usually come with extra pay.

There is an orbital radiology meeting held in Greenlane +/-every first Thursday of the month. Your role is to collect all the cases from your colleagues via email (get patient NHI number and send it to the head radiologist consultant the Tuesday before so he can up load them from PACS if coming from another hospital). You are expected to know the cases and present them during the meeting (no worries, it's informal and a nice environment to learn).

Thursday afternoons are either free (Study / Research) or devoted to University student teaching. An oculoplastics powerpoint is available at University which you can modify to fit your and the university's objectives. There is also a session with optometry students, usually on a Friday afternoon every second week. The object of the session is to see live patients with them in the ophthalmic A&E department and talk them through the assessment, diagnosis and management. You receive extra money for this via the university. These moneys should either be spent on congresses or training related material (books, other). Make sure to spend it all before New Year as the accounts are zeroed!!!

Make sure you sign off your 3 monthly performance review, as this is a MCNZ prerequisite to obtaining a certificate of good standing at the end of the Fellowship.

Living:

At this stage, you might still be looking for a flat, a car, insurance ...

Renting: the market is pretty tight in Auckland though if you have lived in London, Amsterdam, Geneva or New York it will seem like a breeze. The main website to look through is: www.trademe.co.nz, it's the other side of the worlds' answer to ebay and the kiwis are crazy about it. It's pretty much a monopoly so all the real estate agents publish their offers on this site. Expect to be paying between 400-650\$ a week for decent accommodation in a decent area.

“My wife and I found a flat in Devonport on the waterfront. To be honest, we've never lived in such a nice area. This implied a little bit of commuting though. Catching the ferry and riding up to the hospital on a scooter parked for free downtown (Downtown covered car park)” The real estate will ask for proof of employment and a NZ bank account number.

Car: Once again, www.trademe.co.nz is a good place to start. By swiss standards the market is relatively cheap (expensive by UK standards though). The car needs a valid WOF (warrant of fitness) and licence (dated and exposed on main wind screen). Make sure you check the car has no money owing as by acquiring the car you also acquire its debt. Another place to buy a car is the Ellerslie carfare close to the Greenlane Hospital grounds. This is held on a Sunday morning only. You can have the car checked by some car mechanics for approx 100\$. Money well spent in my opinion. Scooters can also be a good option. They aren't very popular in NZ and consecutively relatively cheap. Make sure you have good rain gear, as it can get quite rainy in the winter.

Car insurance: it is not compulsory to have car insurance in NZ (this is just absurd!!!). Make sure you have one. If you run into trouble with a non-insured driver your own insurance will pick up the tab and chase the other party.

Mobile phone: Vodafone seems to have the best coverage. Not the cheapest though.

Medical insurance: You will need to subscribe a private insurance as the health care system only applies to long term NZ residents. “Accuro” provides one year insurances for about 70\$ a month per person. No need for accident insurance. The NZ ACC covers everybody on the territory.

Make sure you get out and visit the country! It's an amazing privilege to be living in such a place and there are so many unspoiled landscapes here to see. The concept of crowds in NZ is... in fact it's not a concept here. You will never look at a European beach with envy after you have been to NZ! Black beaches with consistent rough surf on the Tasman side, soft white beaches on the Pacific side. There is an array of things to do in the vicinity of Auckland (30 mins to 2hrs away from Auckland). Walks in the Waitakere range, Coromandel range, Tawharanui, surf where it's up (Raglan, one of the world surf Mekkas) ... and SO MUCH MORE.

My feeling about the fellowship:

The dedication, training level and patience shown by all three of my consultants, Brian Sloan, Paul Rosser and Richard Hart have set the foundations of my future surgical career. I started off from virtually nothing surgery wise, which meant having to go through some basic knowledge initially. Despite this all 3 consultants were totally committed to their mentor role,

teaching me the art of oculoplastic surgery but also the discipline and seriousness expected from a surgeon trainee. This Fellowship will remain a lifelong model to emulate. I recommend this Fellowship wholeheartedly to anyone wanting to undertake a career in oculoplastics surgery.