**How to…discuss with the Med Reg**

The medical registrar is a key part of any hospital team.. No matter what your hospital grade, you will likely need their support from time to time. This is particularly relevant when on call, on nights or when working on non-medical wards. The Med Reg is often an extremely busy animal, so you need to make sure you use their time carefully! **The trick to getting the most out of a call to the Med Reg is solid preparation.**

Before ringing the medical registrar, consider the following:

**STEP 1**. What do you want from the medical registrar?

* Advice?
* A patient review?
* It’s an emergency!

If it’s an emergency don’t delay ringing them and telling you need them now. Some hospitals have medical emergency systems which will bypass this telephone call and bleep emergency teams (which include the Med Reg) in a flash. These can be triggered by high EWS scores, or by any member of staff you is concerned the patient is in immediate danger of harm.

**STEP 2**. Familiarise yourself with the patient’s notes:

* What is the patient’s age?
* Why were they admitted and what is the working diagnosis?
* What is the patient’s past medical history?

**STEP 3**. What you have done.

* Have you actually *seen* the patient? (This is important!)
* Have you looked checked the patients paperwork?
	+ Drugs chart
	+ Observations
	+ Fluid balance
* Have you started to think about a differential?
* Have you started the basics?
	+ Investigations
	+ Management

Once you have an answer to all these questions, you can call them. This can be quite daunting, but as long as you have answer to all the above questions you will be just fine.

An example of such a phone call is as follows:

* Hello my name is ….. I am the FY1 on nights. Would it be ok to ask your advice on a patient?
* They are a ….. year old who came to hospital with …… they have a background of ……… I have assessed them and found……. I have started the following investigations ….. and management.
* I’m not quite sure what to do next/I would like you to assess the patient and help plan the next step in management/ I wanted to check if my plan was ok/ Do you think I need to add anything to my plan?