

# Sample orientation checklist for GP registrars

Use and adapt this orientation checklist for your registrar when they commence with your practice.

Practice organisation	Completed: Tick
History of practice and general structure	<input type="checkbox"/>
Organisational Chart	<input type="checkbox"/>
Introduction to all staff and their roles	<input type="checkbox"/>
Who to ask for help	<input type="checkbox"/>
Staff roster – who's working what days	<input type="checkbox"/>
Contact protocol for after hours issues	<input type="checkbox"/>
Practice information sheet	<input type="checkbox"/>
Practice and procedures manual	<input type="checkbox"/>
Practice facilities	<input type="checkbox"/>
Passwords, keys, security codes	<input type="checkbox"/>
Lunchroom facilities, toilets	<input type="checkbox"/>
Local services, café's, where to buy lunch	<input type="checkbox"/>
Car parking arrangements	<input type="checkbox"/>
Fire/emergency procedure, use of duress buttons	<input type="checkbox"/>
Clinical/Admin meeting schedule	<input type="checkbox"/>
Pastoral care meeting schedule	<input type="checkbox"/>
Working conditions	Completed: Tick
Working hours, breaks, roster changes, room allocation	<input type="checkbox"/>
Method and timing of salary payment	<input type="checkbox"/>
Policy and procedure for leave arrangements	<input type="checkbox"/>
Registrar teaching - dedicated time blocked off	<input type="checkbox"/>
Policy on grievance procedures	<input type="checkbox"/>
Bullying and harassment policy	<input type="checkbox"/>
Doctor's trays - correspondence	<input type="checkbox"/>
Reporting incidents and adverse events	<input type="checkbox"/>
Safety and privacy information	Completed: Tick
General safety rules and OH&S guide/manual	<input type="checkbox"/>
Overview of medical and non-medical emergency procedures	<input type="checkbox"/>
Blood and body fluid precautions	<input type="checkbox"/>
Procedure for needle stick injury	<input type="checkbox"/>
Zero tolerance violence and aggression policy	<input type="checkbox"/>
Practice isolation policy for managing possible infectious patients	<input type="checkbox"/>

Thank you for creating  
a positive learning environment



Use of practice equipment and systems	Completed: Tick
Telephone, internal numbers	<input type="checkbox"/>
Fax, photocopiers and scanner	<input type="checkbox"/>
Appointment system and booking procedures - preferences	<input type="checkbox"/>
Requests for reports, w/comp telephone advice (how to bill)	<input type="checkbox"/>
Procedure for X-rays radiology/pathology and follow-up	<input type="checkbox"/>
Medicare item numbers and billing protocols	<input type="checkbox"/>
Phone messages and practice communication methods	<input type="checkbox"/>
My Health Record and uploading Shared Health Summaries	<input type="checkbox"/>
After hours care for patients	<input type="checkbox"/>
Principal/Practice Manager	Completed: Tick
Overview of practice philosophy, type of patients and areas of special interest care, etc.	<input type="checkbox"/>
Patient record systems and procedures	<input type="checkbox"/>
Cultural safety, diversity and inclusion processes	<input type="checkbox"/>
Privacy notifiable data breach	<input type="checkbox"/>
Australian Open Disclosure Framework	<input type="checkbox"/>
Mandatory reporting	<input type="checkbox"/>
Dealing with patient feedback	<input type="checkbox"/>
Computer - medical software program	<input type="checkbox"/>
Prescription requests policy and procedure	<input type="checkbox"/>
Accreditation process and responsibilities	<input type="checkbox"/>
Local networks and professional support	<input type="checkbox"/>
Referral pathways	<input type="checkbox"/>
PHN Health Pathways	<input type="checkbox"/>
Reference books/resources/online	<input type="checkbox"/>
Learning plan	<input type="checkbox"/>
Methods of teaching, importance of 2 way and multisource feedback and consideration of cultural elements for learning	<input type="checkbox"/>
Immunisation status	<input type="checkbox"/>
Overview of practice philosophy, type of patients and areas of special interest care, etc.	<input type="checkbox"/>



Nurses	Completed: Tick
Tour treatment room	<input type="checkbox"/>
Oxygen and emergency trolley equipment including defib, adrenaline	<input type="checkbox"/>
Management of anaphylaxis	<input type="checkbox"/>
Correct use of PPE	<input type="checkbox"/>
Brief on steriliser/log book	<input type="checkbox"/>
Equipment use - INR, Liquid nitrogen	<input type="checkbox"/>
Equipment use - Spirometer, ECG,	<input type="checkbox"/>
Ultrasound	<input type="checkbox"/>
Pathology results protocol	<input type="checkbox"/>
Recall of clinically significant results	<input type="checkbox"/>
General recall and reminder systems	<input type="checkbox"/>
Pap result entry	<input type="checkbox"/>
RN scope of practice	<input type="checkbox"/>
RN appointments	<input type="checkbox"/>
Vaccinations, batch number records	<input type="checkbox"/>
Cold chain including cold chain breach reporting	<input type="checkbox"/>
Contaminated wastes, sharps disposal	<input type="checkbox"/>
Infection control/spills kit	<input type="checkbox"/>
Stock of rooms	<input type="checkbox"/>
Request procedure for specific medical supplies	<input type="checkbox"/>
Drug cupboard - documentation required	<input type="checkbox"/>

Registrar signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Principal signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

