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Title: Training of junior doctors into pleural procedures – The impact of a new pleural service

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Body: The British Thoracic Society and Royal College of Radiologists have set up guidelines for pleural services (PS). Specialist registrars (SpR) in Wales rotate every 12-18 months. Aims: To evaluate 1. PS across Welsh Hospitals; 2. the impact of a PS on the training into pleural procedures. Methods: 1. A questionnaire was sent to all 16 hospitals where SpRs train in Wales; 2. Pleural procedures, supervision, use of pleural ultrasound (US), timing of the procedure from admission to hospital were compared for a year prior to and following the setting up of a PS in a large hospital (630,000 - 21% population of Wales). Results: 61.5% had one respiratory Consultant trained at level 1 pleural US, 46.2% had US in clinic. 76.9% had practical training. A PS reduced the waiting time from admission to pleural aspiration (PA) and intercostal chest drain (ICD) insertion; mean (range) 2.9 (0-12) and 4.5 (0-15) days before the PS to within 24 and 48 hours respectively. Prior to the PS respiratory trainees (all grades) performed a mean of 5 pleural procedures (4 ICDs) per month, none Consultant supervised. After the PS started SpRs performed a mean of 4.6 PA - in-patients, 3.9 - out-patients and 4.5 ICDs per month. 50% of PA and 30.2% of ICDs were Consultant supervised, all done under US guidance after PS was set up, none before). pH was done on 20% of samples and 26.6% had no cytology on initial sample; after PS cytology was performed on 100% of samples sent and pH on 90%. In conclusion, the provision of PS and training varies across hospitals in Wales. The opening of a PS reduced waiting times and improved the analysis of the samples. The referrals to PS, number of procedures, use of US and supervision increased.