

SAMPLE CRITICAL CARE HMOS PLANNING STREAM AND ANNUAL LEAVE **

** Rotations outlined below are subject to change due to COVID requirements

Select your name

Options	Your preferences	TERM 1				TERM 2					TERM 3					TERM 4					Annual Leave arrangement					Weeks of AL	Options																								
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25		26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49
1	<input type="checkbox"/>	Anaesthetics	BHH ED					BHH ED					ICU					1	2	3	4	5	5	1																											
2	<input type="checkbox"/>	Anaesthetics	BHH ED					BHH ED					ICU					1	2	3	4	5	5	2																											
3	<input type="checkbox"/>	Anaesthetics	MH ED					MH ED					ICU					1	2	3	4	5	5	3																											
4	<input type="checkbox"/>	ICU	BHH ED					BHH ED					Anaesthetics					1	2	3	4	5	5	4																											
5	<input type="checkbox"/>	ICU	AH ED					Anaesthetics					MH ED					1	2	3	4	5	5	5																											
6	<input type="checkbox"/>	ICU	BHH ED					Anaesthetics					MH ED					1	2	3	4	5	3	6																											
7	<input type="checkbox"/>	ICU	BHH ED					Anaesthetics					AH ED					4	5	2																															
8	<input type="checkbox"/>	ICU	AH ED					Anaesthetics					BHH ED					1	2	3	4	5	5	8																											
9	<input type="checkbox"/>	ICU	MH ED					Anaesthetics					AH ED					1	2	3	4	5	5	9																											
10	<input type="checkbox"/>	BHH ED	BHH ED					Anaesthetics					ICU					1	2	3	4	5	5	10																											
11	<input type="checkbox"/>	MH ED	MH ED					ICU					Anaesthetics					1	2	3	4	5	5	11																											
12	<input type="checkbox"/>	MH ED	Anaesthetics					ICU					BHH ED					1	2	3	4	5	3	12																											
13	<input type="checkbox"/>	MH ED	Anaesthetics					ICU					BHH ED					4	5	2																															
14	<input type="checkbox"/>	AH ED	Anaesthetics					ICU					BHH ED					1	2	3	4	5	5	14																											
15	<input type="checkbox"/>	AH ED	ICU					Anaesthetics					MH ED					1	2	3	4	5	5	15																											
16	<input type="checkbox"/>	BHH ED	ICU					MH ED					Anaesthetics					1	2	3	4	5	2	16																											
17	<input type="checkbox"/>	BHH ED	ICU					AH ED					Anaesthetics					3	4	5	3																														
18	<input type="checkbox"/>	BHH ED	ICU					AH ED					Anaesthetics					1	2	3	4	5	5	18																											
19	<input type="checkbox"/>	BHH ED	ICU					BHH ED					Anaesthetics					1	2	3	4	5	3	19																											
20	<input type="checkbox"/>	BHH ED	ICU					BHH ED					Anaesthetics					4	5	2																															

Week commencing date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52
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Comments / special considerations:

Save my preferences