

# Curriculum vitae

**Mr Rory Norris**

MB ChB, MSc, FRCS (Tr & Orth),  
Dip Hand Surg

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- Personal details

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

GMC registration no. 6101486

BSSH associate member

MDU indemnity 385532H/UKPISTD/0006

- Qualifications

MB ChB  
University of Dundee Medical School  
Graduated Jul 2004

MSc (Tr & Orth) with Merit  
Warwick University  
Graduated Feb 2016

FRCS (Tr & Orth)  
The Royal College of Surgeons of England  
Awarded Feb 2016 (RCS membership no. 60240)

Diploma in Hand Surgery (Vivian Lees Gold Medal)  
University of Manchester  
Passed Mar 2018

CCT date was 31<sup>st</sup> July 2018 (NTN - WMD/024/036/C)

- Prizes and awards

The 'Vivian Lees' Gold Medal,

Awarded by the BSSH for the highest score in the British hand surgery diploma  
BSSH  
2018

The 'Jacques Duparc' award for e-poster presentation at EFORT 2011,

Diabetes and hip fracture; a study of 5966 cases. **R Norris**, M Parker.

The 'Jacques Duparc' award for e-poster presentation at EFORT 2011,

Occurrence of secondary fracture around intramedullary nails used for trochanteric hip fractures; a systematic review of 13,568 patients. **R Norris**, D Bhattacharjee, M Parker.

The 'Ranald Martin' prize for Military Medicine,

Post Graduate Medical Officers course  
Defence Postgraduate Medical Deanery (DPMD)  
2006

- Current appointment

*Aug 2018 – current* Consultant Orthopaedic Hand Surgeon  
North West Anglia NHS Foundation trust

- Past appointments

*Aug 2017 – Jul 2018* ATP Hand surgery Fellowship

**Birmingham**

Mr Michael Waldram, Mr Dominic Power, Mr Michael Craigen, Mr Rajive Jose, Mr Mark Brewster, Mr Darren Chester, Mr Mark Foster, Mr Garth Titley, Mrs Jill Webb, Mr Manish Gupta, Mr Simon Tan, Mr Tahseen Choudhuary, and Mr Subodh Deshmukh.

*Aug 2016 – Aug 2017* ST8 Trauma & Orthopaedics

West Midlands Deanery  
University Hospitals Coventry & Warwickshire

**Hand surgery**

Mrs Helen Hedley, Mr Andrew Mahon and Mr Matthew Jones

**Trauma**

Mrs Anna Chapman, Mr Jonathan Young

**Hand surgery**

Mr Andrew Mahon and Mr Matthew Jones

*Aug 15 - Aug 16*

ST7 Trauma & Orthopaedics  
West Midlands Deanery  
University Hospitals Coventry & Warwickshire

**Arthroplasty, Pelvic & Acetabulum**

Mr Martin Blakemore

**Hand surgery**

Mrs Helen Hedley, Mr Andy Mahon and Mr Peter Wade

**Trauma**

Mr Mateen Arastu, and Miss Jayne Ward

*Aug 14 - Aug 15*

ST6 Trauma & Orthopaedics  
West Midlands Deanery  
University Hospitals Coventry & Warwickshire

**Trauma (Top slot SpR)**

Mr Jonathan Young

**Paediatric orthopaedics**

Mr Giles Pattison & Mr Steven Cooke

**Spines**

Mr Robert Sneath, Mr Nilam Shergill & Mr William Merriam

*Aug 13 - Aug 14*

ST5 Trauma & Orthopaedics  
West Midlands Deanery  
Warwick Hospital

Upper limb (Shoulders)

Mr Roger Sloan & Mr Ike Nwachukwu

Foot and ankle

Mr Peter Binfield & Mr Sameh El-Kawy

*Aug 12 - Aug 13*

ST4 Trauma & Orthopaedics  
West Midlands Deanery  
Heartlands Hospital

Foot & Ankle

Mr James Ramos

Upper limb (Hands)

Mr Kuntrapaka Srinivasan

*Aug 11 – Aug 12*

ST3 Trauma & Orthopaedics  
West Midlands Deanery  
University Hospitals Coventry & Warwickshire

Revision lower limb arthroplasty

Mr Pedro Foguet

Soft tissue hips and knees

Prof Damien Griffin & Mr Peter Thompson

Trauma

Prof Matt Costa, Mr Martin Blakemore, & Mr Nilam Shergill

*Aug 10 – Aug 11*

ST3 (LAS) Trauma & Orthopaedics  
University Hospitals Coventry & Warwickshire

Knees & revision lower limb surgery

Mr Gavin Pereira & Mr Mark Taylor

Paediatric orthopaedics

Mr Giles Pattison & Mr Mike Margetts

Trauma

Mr Mark Taylor, Mr Richard King, & Mr Peter Thompson

Senior House Officer job's

*Aug 08 – Aug 10*

Core Surgical Training  
MDHU Peterborough  
East of England School of Surgery  
Eastern Deanery

CT1 – Vascular surgery

Surg Cdr Peter Taylor

Upper Gastrointestinal surgery

Mr Alfred Choy  
Elective lower limb Orthopaedics  
Mr Richard Hartley

CT2 – Trauma Orthopaedics  
Mr James Hutchinson  
Trauma Orthopaedics and Hip fracture fellow  
Mr Martyn Parker

*Oct 07 – Aug 08*  
General Duties Medical Officer  
16 Close Support Medical Regiment  
(Two front line operational tours of Afghanistan)  
Lt Col Andrew Jose  
(Responsible for the medical education of the Battalion  
Combat Medical Technicians, and the medical cover of  
exercises and operations.)

*Jul 06 – Oct 07*  
Regimental Medical Officer  
2<sup>nd</sup> Battalion the Parachute Regiment  
Lt Col Joe O’Sullivan  
(Commanding the Regimental Aid Post, and responsible  
for all aspects of the medical and holistic care of the  
battalion, medical planning and cover of exercises and  
operations, and medical education of the battalion.)

*Feb 06 – Jul 06*  
Accident and Emergency SHO  
James Cook University Hospital,  
Middlesbrough  
Professor Ian Greaves

Pre-Registration House Officer job’s  
*Aug 05 – Feb 06*  
Post Graduate Medical Officers course  
Keogh Barracks  
Defence Postgraduate Medical Deanery, UK  
Col Jeremy Owen

*Aug 04 – Aug 05*  
PRHO  
James Cook University Hospital, Middlesbrough  
Surgery - Professor Rob Wilson, Mr Pete Davis  
Medicine - Dr David Broughton  
Anaesthetics - Dr Sean Williamson

- Summary of skills and experience

Orthopaedics:

Orthopaedic trauma is the mainstay of general orthopaedic training, and is a constant presence through our on-call shifts both at registrar and as a locum consultant over the last year. Over the 8 years of my orthopaedic training this has given me a wide exposure, over a prolonged period of time, to both high and low energy injuries, of wide ranging complexity and of wide ranging mechanisms of injury. As a result I feel able to independently assess and manage the vast majority of orthopaedic trauma, such as open and closed fractures, infections, nerve and tendon injuries. This is evidenced through my surgical logbook and portfolio, which includes multiple workplace-based assessments and by my success at the Trauma & Orthopaedic FRCS (Fellowship of the Royal College of Surgeons) examinations. Despite this, I am aware of my own limitations and never afraid to ask for help from colleagues with more experience than me, and I see each of these instances as an opportunity to progress my own experience rather than a failing or weakness. This has been evidenced verbally from my previous consultant supervisor who states that I am a “safe and reliable decision maker with excellent knowledge and surgical skills”, and also in my portfolio through my multi-source feedback from colleagues.

Hand surgery:

I spent a year working for upper limb surgeons in Heartlands hospital and Warwick hospital. They were general upper limb orthopaedic surgeons with a large proportion of the work involving the hand. This has given me excellent experience in the common pathologies affecting the hand and wrist, and the management options available.

Following these posts I have completed 3 placements with the hand surgeons at UHCW, who take both secondary and tertiary referrals from Coventry and Warwickshire. This has given me excellent exposure the more complex pathologies and treatment options available.

I attended a cadaveric hand dissection course in November 2015 that was organised by the Birmingham hand centre, and was an excellent opportunity to explore the anatomy around many of the approaches to the hand and wrist. I took the opportunity to explore the anatomy of the palm distal to a carpal tunnel incision to visualise the structures at risk.

I attended a wrist arthroscopy course in Oct 2016 to gain further experience in this skill, and have now put those skills to use while on fellowship and as a locum consultant performing diagnostic arthroscopies as well as therapeutic arthroscopies such as TFCC repairs.

I have attended four of the six BSSH instructional courses on hand fractures, soft tissues, nerves and tendons. These have all been very informative, with the benefit of interesting lectures from experienced hand surgeons, and discussing topics with many other trainees interested in hand surgery. I look forward to attending the remaining two instructional courses in the future.

ATP Hand surgery fellowship:

I completed my fellowship in the hand surgery units at the Queen Elizabeth and Royal Orthopaedic Hospitals as part of my Advance Training Post (ATP) in hand surgery. I was 1 of only 12 people to be accepted on this prestigious fellowship programme, which is run and inspected by the BSSH.



This involved working alongside eleven consultant hand surgeons, from both orthopaedic and plastic surgery backgrounds. This was a busy post that involved acute tertiary referral complex hand clinics, elective hand surgery clinics, as well as elective and trauma hand surgery operating lists. This post gave me excellent experience in hand surgery by working for experienced and dedicated ATP and hand diploma trained hand surgeons, in a large well developed tertiary referral hand surgery unit.

Working closely with plastic surgeons has given me exposure to a different specialty, which has given me a different perspective on hand surgery, as well as an increased knowledge and experience of soft tissue surgery which will be invaluable in any future consultant post.

#### Diploma in Hand Surgery:

I recently completed the Diploma in hand surgery, and was awarded the 'Vivian Lees' gold medal for the highest score in the diploma exam.

The Diploma in hand surgery is designed to cover the breadth of hand surgery, and to ensure that trainees from both Orthopaedic and Plastic surgery backgrounds have the skills and knowledge required of a modern hand surgeon. It involves over 30 tutorials with consultant hand surgeons, as well as a number of workplace based assessments and special tasks such as a systematic review, treatment algorithm and a video of the candidate operating to judge their surgical skills and practices.

This gave me a focused curriculum and structure to progress my hand surgery knowledge and experience, and ensured that I had the required level of knowledge and experience to start my current locum consultant hand surgery post.

- Teaching experience

I have undertaken both formal and informal teaching at undergraduate and postgraduate levels. I have given lecture based and practical teaching to medical students in groups of around 40 on the basics of elbow, wrist and hand anatomy, pathology and management as well as clinical examination sessions, and participating in the end of placement examinations as an examiner.

I was responsible for organising and, alongside the hand surgery consultants, teaching the hand surgery subjects on the Birmingham regional Orthopaedic training programme, to groups of around 20 orthopaedic registrars as part of my ATP hand surgery fellowship. I was responsible for writing MCQ's and giving some of the lectures and small group sessions. The subjects covered included mutilating hand injuries and soft tissues, brachial plexus and nerve injuries, wrist instability and congenital hand pathology.

I have also taught on a Royal College of Surgeons of Edinburgh course teaching basic Orthopaedics and simple orthopaedic procedures to General Practitioners.

I often use the cases that present during an on-call to give small group bedside teaching for 10-20mins to junior doctors on a specific subject. I have always found it easier to learn something when it is related to a real patient in front of you, and therefore this is one of my preferred teaching methods.

I attended a 3-day train the trainer course in October 2017 organised by Health Education England Yorkshire and Humber. This has increased my understanding of the strengths and weaknesses of various teaching methods and has helped me optimize subsequent teaching sessions.

I organised many teaching and training courses and sessions during my time in the Army, from a classroom setting to overseas operations. I organised Team Medic courses for over 200 Parachute Regiment soldiers, which involved producing the teaching material from a curriculum, and then organising practical moulages and field training exercises to test them, even going as far as having a real helicopter available when they got on the radio to ask for a casualty evacuation to come in and pick up their simulated casualties. Needless to say I didn't do this on my own but with the help of my Regimental Aid Post medics and staff. Those same medics however, also required training and I organised multiple training sessions including practical airway training to an ATLS standard, as well as exercise based training with 'Amputees in Action' to make it as real as possible.

- A selection of my teaching and training experience

Trauma skills course

Audience: Junior doctors and Cambridge medical students.

Methods: Lectures in Sep 2018 and Jan 2019.

Birmingham regional orthopaedic teaching

Audience: SpR's on Birmingham rotation.

Methods: Lectures and small group examination, discussion and practical sessions in Sep 2017, Nov 2017, Jan 2018, Mar 2018 and May 2018.

Basics of elbow, wrist and hand surgery

Audience: Birmingham University 4<sup>th</sup> Year Medical students.

Method: Lectures in Dec 2017, Jan 2018 and Mar 2018

Wrist instability

Audience: SpR's on Warwick rotation.

Methods: Lecture in May 2017

Examination of the upper limb

Audience: Warwick University Medical students.

Methods: Practical teaching session in April 2014.

Airway and Breathing practical skills

Audience: Army doctors and Army combat medical technicians

Methods: Using animal products and a lecture to teach and reinforce the use of cricothyroidotomies and chest drains.

Journal club – Cemented Vs Uncemented hemiarthroplasties for displaced intracapsular neck of femur fractures.

Audience: T&O dept, Solihull Hospital

Method: Lecture

Attachments at Broomfield Hospital Accident and Emergency department;

Audience: 'Regimental Combat Medical Technicians', of the 2<sup>nd</sup> battalion The Parachute Regiment.

Method: 1-2 week attachments. The aim of which was to give trained medics exposure to acutely unwell patients, and minor injuries.

Attachments to the Colchester Ambulance station;

Audience: 'Team Medics' of the 2<sup>nd</sup> battalion The Parachute Regiment.

Method: 1 week attachments. The aim of which was to give infantry soldier's exposure to trauma situations and experience in the initial management of trauma patients.

Exercise Blue Seas;

Audience: Soldiers of the 2<sup>nd</sup> battalion The Parachute Regiment, Regimental Aid Post, and other interested soldiers of other regiments.

Methods: Adventure training. The aims of which were to give soldiers a new experience and build team cohesion prior to deploying to Afghanistan.

Team Medic course, 2<sup>nd</sup> battalion The Parachute Regiment;

Audience: Infantrymen of the 2<sup>nd</sup> battalion The Parachute Regiment.

Method: One week courses. Aimed at training infantrymen to provide immediate life saving medical treatment and triage for their infantry section/ fire team.

- Managerial experience

I had formal training in leadership and management at the Royal Military Academy Sandhurst for 2 months as part of my professionally qualified officer's course when joining the Army. I have also attended a course organised by the Joint Committee on Surgical Training Interface Group on leadership, management, medico-legal & professional responsibilities and human factors. Despite this, I feel that the vast majority of my experience of leadership and management has come 'on the job' in my clinical and military career. I have found that the lessons learned in clinical practice are always more pertinent and informative as they are dependent on my own personality and reinforced by shared experiences. This was borne out in my Officer Joint Appraisal Reports, which complimented me on my quiet but controlled form of leadership.

I have had management and team working experience at various levels, and within various different teams, from commanding a medical post on operations in Afghanistan, to being part of a trauma team in resus undertaking ATLS on a critically injured patient. I have learnt that the collective experience within a team will always outweigh the individual, and therefore everyone's ideas and opinions should be listened to.

As I have progressed through my medical training, I have had increased responsibilities within the orthopaedic department. I have been the most senior orthopaedic registrar in charge of the trauma rotation at my hospital. This involved organising the rota for the other trauma registrars, managing the daily trauma caseload and supervising junior registrars and other trainees. This was a very successful role as demonstrated by no gaps on the rota and in my multi-source feedback and educational meetings.

Most recently I have been the consultant on-call managing the case-load from a busy DGH, as well as ensuring that my elective practice is well organized and efficient.

As I have become more senior, I have been responsible for supervising audit and research projects, such as a recent audit assessing the consenting process within the hand surgery department at the Queen Elizabeth hospital in Birmingham.

I recognise that service development is a vital part of any consultant's role, in order to improve the service that they can provide for their patients. I therefore carried out a service evaluation on the regional anaesthesia service in the hand surgery unit at UHCW as my professional project for my master's degree. This project has helped to develop the regional anaesthesia service in the UHCW by providing evidence that has been used in business cases. I have also written and revised patient information leaflets on topics such as scaphoid non-union and distal radius fractures at Heartlands hospital and UHCW, and more recently carpal tunnel syndrome, trigger finger and dupuytren's disease at Hinchingsbrooke hospital to improve the department's communication with patients which is essential to achieving the best clinical outcomes.

- Audits

- Audit of consent in hand trauma patients at University Hospital Birmingham.  
*Jan 2018*
  - Assessing the quality of consent looking at the patients understanding of the operations, risks, and post-operative rehabilitation required.
  - I was involved in the design, data collection, write-up and presentation.
  - Concluded that abbreviations unknown by patients and shouldn't be used. Patients have a poor detailed knowledge of the procedure and risks, and yet feel able to make a balanced decision.
- Audit of fracture clinics at UHCW NHS trust.  
*Jul 2017*
  - 2week retrospective case note review using BOAST 7 as the set standard, and also looking at case mix to help develop fracture clinic further.
  - I was lead clinician in the design, data collection, write-up and presentation.
  - Concluded that all clinic letters should be copied to patients, more information sheets are required, and fracture liaison nurse required to manage fragility fracture patients.
- Audit of pelvic binder placement in major trauma patients.  
*Jun 2015 & Jun 2016*
  - A completed audit cycle, assessing the position of the pelvic binders on patients admitted to UHCW over a 2month period, who underwent a trauma CT scan.
  - I was lead clinician in the design, data collection, write-up and presentation.
  - Nearly half were too high.
  - Presented to the orthopaedic department, hospital major trauma steering group, Central England Trauma Network committee, and pre-hospital emergency medicine conference to allow education of paramedics.
  - Re-audit completed showing improved binder positioning.
- Audit of VTE prophylaxis in Warwick Hospital  
*Dec 2013 & Apr 2014*
  - A completed audit cycle, assessing the VTE prophylaxis of patients that subsequently went on to have a DVT or PE.
  - I was lead clinician in the design, data collection, write-up and presentation.
  - Noted that many patients had a delay in their initial dose of chemical VTE prophylaxis.
  - Re-audit of VTE prophylaxis showed improved compliance.
- Audit of surgical site marking at Solihull hospital.  
*Jan 2013*
  - Investigating whether or not the surgical site marking within the trauma and orthopaedic department was following the WHO guidelines.
  - I was lead clinician in the design, data collection, write-up and presentation.
  - Audit concluded that although overall marking compliance was good, many of the marks washed off after prepping, and therefore a change in the pens used was recommended.

- Audit of the use of finger tourniquets following implementation of WHO guidelines  
Sep 2011
  - Auditing that the correct procedures for the use of digital tourniquets were being followed following a recent update the WHO guideline.
  - I was lead clinician in the data collection, write-up and presentation.
  - Good compliance with the new guideline was demonstrated.
  
- Audit of visco-supplementation used in knee osteoarthritis  
*Mar 2011*
  - Investigating whether these products were used appropriately in the correct patients, for the correct reasons and what benefit the patients received.
  - I was lead clinician in the design, data collection, write-up and presentation.
  - Concluded that many of the patients being treated with visco-supplementation were being treated inappropriately as their arthritis was too advanced.
  - Change in departmental protocols as a result with all referrals for visco-supplementation being screened by one of the 2 senior knee surgeons.
  
- Audit of the quality of SHO emergency admissions in Trauma & Orthopaedics  
Nov 2008 & Nov 2009
  - A completed audit cycle, which effected changes in practice within the Trauma and Orthopaedic department SHO's.
  - I was lead clinician in the design, data collection, write-up and presentation.
  - Carried out due to concerns raised internally by some SpR's about the quality of the SHO trauma clerking's leading to unsafe practices.
  - It led to teaching and training on what was expected of SHO trauma clerking being included in the department induction programme.
  
- Audit of blood glucose meter accuracy in theatres  
*Nov 2004*
  - Carried out after a near-miss involving an inaccurate blood glucose meter in theatre.
  - I was involved in design, and lead for data collection, write-up and presentation.
  - An audit, which effected change in the entire hospital with a 'critical clinical alert' initiated after results fed back to the department.

- Publications
  - Original Articles published

<b>Year</b>	<b>Title</b>	<b>Authors in order</b>	<b>Journal</b>
2017	Complications in Distal Radius Fracture Fixation: A Comparative Case Series.	James C Beazley, <b>Rory Norris</b> , Andrew Mahon.	Medical case reports ( <a href="#">citations - hyperlink</a> )
2015	Biomechanical study of different plate configurations for distal humerus osteosynthesis.	M. Bogataj, F. Kosel, <b>R. Norris</b> , M. Krkovic, M. Brojan.	Med Biol Eng Comput (9 <a href="#">citations - hyperlink</a> )
2014	Does intraoperative tissue sample enrichment help or hinder the identification of microorganisms in prosthetic joint infection?	Jordan RW, Saithna A, Smith N, <b>Norris R</b> , Sprowson A, Foguet P.	Eur J Orthop Surg Traumatol (1 <a href="#">citations - hyperlink</a> )
2014	A case series of 35 hip revisions for Adverse Reactions to Metal Debris following Cormet hip resurfacing.	<b>Norris RJ</b> , McArthur J, Parsons H, Smith NA, Sprowson AP, Foguet P.	Hip Int (2 <a href="#">citations - hyperlink</a> )
2013	A novel technique for the treatment of infected metalwork in orthopaedic patients using skin closure over irrigated negative pressure wound therapy dressings.	<b>Norris R</b> , Chapman AWP, Krikler S, Krkovic M.	Ann R Coll Surg Engl (5 <a href="#">citations</a> , 1 <a href="#">authors response published - hyperlink</a> )
2012	The effect of anterior cruciate ligament reconstruction on the progression of osteoarthritis.	<b>Norris R</b> , Thompson P, Getgood A.	Open Orthop J (11 <a href="#">citations - hyperlink</a> )
2012	Occurrence of secondary fracture around intramedullary nails used for trochanteric hip fractures: A systematic review of 13,568 patients.	<b>Norris R</b> , Bhattacharjee D, Parker MJ.	Injury (57 <a href="#">citations - hyperlink</a> )
2012	Early results of a variable-angle volar locking plate for distal radius fixation: A bi-centre study.	Jagodzinski NA, Singh T, <b>Norris R</b> , Jones J, Power D.	Journal of Bone and Joint Surgery (Br) (Conference proceedings) (2 <a href="#">citations - hyperlink</a> )
2011	Troponin T in hip fracture patients: prognostic significance for mortality at one year.	Spurrier E, Wordsworth D, Martin S, <b>Norris R</b> , Parker MJ.	Hip Int (3 <a href="#">citations - hyperlink</a> )
2011	Diabetes mellitus and hip fracture: a study of 5966 cases.	<b>Norris R</b> , Parker M.	Injury (45 <a href="#">citations - hyperlink</a> )
2008	Jejunal lymphangioma presenting as an ovarian mass.	<b>Norris JR</b> , Stacey M, Rampaul RS, Cheung KL.	JR Army Med Corps (2 <a href="#">citations - hyperlink</a> )

○ International Presentations

Year	Title	Authors in order	Meeting	Oral / Poster
2014	The effect of implementing regional trauma networks on trauma workload and training opportunities in the U.K setting.	<u>R Jordan</u> , <b>R Norris</b> , K Srinivas.	SICOT	Oral
2013	Measuring metal ions in patients with metal on metal hip resurfacing's is of little clinical value.	<b>R Norris</b> , J McArthur, N Smith, H Parsons, P Foguet.	AAOS	Poster
2012	VAC Irrigation - How I do it.	<u>M Krkovic</u> , AWP Chapman, <b>R Norris</b> .	ISWF	Oral
2012	Identifying the microorganism in infected hip and knee arthroplasties.	<u>N Smith</u> , R Jordan, <b>R Norris</b> , N Parsons, P Foguet.	AAHKS	Poster
2011	Early results of the APTUS variable-angle volar locking plate for distal radius fractures: A bi-centre study.	<u>N Jagodzinski</u> , T Singh, <b>R Norris</b> , J Jones, D Power.	SICOT	Oral
2011	Diabetes and hip fracture; a study of 5966 cases.	<b>R Norris</b> , M Parker.	EFFORT	Poster (Jacques Duparc award)
2011	Occurrence of secondary fracture around intramedullary nails used for trochanteric hip fractures; a systematic review of 13,568 patients.	<b>R Norris</b> , D Bhattacharjee, M Parker.	EFORT	Poster (Jacques Duparc award)
2010	Diabetes and hip fracture; a study of 5966 cases.	<b>R Norris</b> , M Parker.	EHS	Oral
2010	Early results of the APTUS variable-angle volar locking plate for distal radius fractures: A bi-centre study.	N Jagodzinski, <u>T Singh</u> , <b>R Norris</b> , J Jones, D Power.	FESSH	Poster

(\_\_\_\_\_ = presenter)



○ National Presentations

Year	Title	Authors in order	Meeting	Oral / Poster
2018	Comparative effectiveness of arm and forearm tourniquets in hand surgery: a systematic review of the literature	<u>R Norris</u>	BSSH	Poster
2017	Systematic review of regional anaesthetic vs general anaesthetic in hand surgery.	<u>R Norris.</u>	BSSH	Poster
2016	Complications in distal radius fracture fixation: A comparative case series of 472 distal radius fractures treated with either the Synthes 2 column plate or the DePuy Distal Volar Radius plate.	J Beazley, <b>R Norris</b> , A Mahon.	BSSH	Oral
2012	A novel technique for the treatment of infected metalwork in orthopaedic patients using skin closure over irrigated negative pressure wound therapy dressings.	<u>R Norris</u> , AWP Chapman, S Krikler, M Krkovic.	Oxford Bone Infection Conference	Poster
2011	Occurrence of secondary fracture around intramedullary nails used for trochanteric hip fractures; a systematic review of 13,568 patients.	<u>R Norris</u> , D Bhattacharjee, M Parker.	BTS	Oral
2011	Troponin T in hip fracture patients: Prognostic significance for mortality at one year.	<u>E Spurrier</u> , D Wordsworth, S Martin, <b>R Norris</b> , M Parker.	CSOS	Oral
2010	Early results of the APTUS variable-angle volar locking plate for distal radius fractures: A bi-centre study.	N Jagodzinski, <u>T Singh</u> , <b>R Norris</b> , J Jones, D Power.	BTS	Oral

(\_\_\_\_\_ = presenter)

○ Local Presentations

Year	Title	Authors in order	Meeting	Oral / Poster
2010	Early results of the APTUS variable-angle volar locking plate for distal radius fractures: A bi-centre study.	<u>N Jagodzinski</u> , T Singh, <b>R Norris</b> , J	Cambridge Orthopaedic Club	Oral

		Jones, D Power.		
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(\_\_\_\_\_ = presenter)

- Relevant courses

<b>Date</b>	<b>Course title</b>	<b>Organising institution</b>
Feb 2018	Instructional course 7.3 – Tendon injury, paralysis, and rehabilitation	BSSH
Oct 2017	Training the trainer course (3 day course)	Health Education England
Oct 2017	Basic microsurgery workshop	NPIMR (Northwick Park)
Jun 2017	Instructional course 7.2 – Nerve injury & compression and anaesthesia	BSSH
Mar 2017	Leadership, management, medico-legal & professional responsibilities and human factors	JCST TIG
Feb 2017	Instructional course 7.1 - Skin, soft tissue, infection and Dupuytren's,	BSSH
Oct 2016	Birmingham wrist arthroscopy course	Birmingham hand centre
Oct 2016	Birmingham wrist instability course	Birmingham hand centre
Nov 2015	Birmingham cadaveric hand dissection course	Birmingham hand centre
May 2015	Instructional course 6.4 – Hand fractures	BSSH
May 2015	ATLS	Peterborough City Hospital
Nov 2010	European Computer Driving License NVQ	ECDL Foundation
Mar 2010	AO principles in operative fracture management course	AO, The Royal College of Surgeons of Edinburgh
Jun 2009	Basic surgical skills course	Queen Elizabeth Hospital, London
Dec 2008	CCrISP	North Staffordshire Hospital
Nov 2007	Battlefield Advanced Trauma Life Support	RNH Haslar

- Military Activities

2001 – 2011 Medical Officer in the Royal Army Medical Corps

2008 Operation Herrick 8 - supporting The 2<sup>nd</sup> Battalion The Parachute Regiment in Forward Operating Base Kajaki, Afghanistan.

Working in an established Regimental Aid Post, responsible for general practice, medical planning for patrols, pre-hospital advanced trauma life support on patrols, medical aid to the local population, environmental health, occupational health, and career management of the soldiers under my command.

2007 Operation Herrick 7 - supporting The 2<sup>nd</sup> Battalion The Yorkshire Regiment in Forward Operating Base Musa Qala, Afghanistan.

Working in a new base to establish a Regimental Aid Post, responsible for general practice, medical planning for patrols, pre-hospital advanced trauma life support on patrols, medical aid to the local population, environmental health, medical logistics, and mentoring of the Afghanistan National Army medical team.

- Extra-curricular activities

2015 – *forever* Family man

2007 – 2008 16 Close Support Medical Regiment, Regimental Rugby Team

2002 – 2004 1<sup>st</sup> mate & renovator of a dive charter boat on the west coast of Scotland

2001 – 2004 Medical school rugby club captain and chairman

- References

The following consultants have kindly agreed to act as referees

**Mr Giles Pattison**

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