Working life (obstetrics and gynaecology)

This page provides useful information on the nature of the work, the common procedures/interventions, sub-specialties and other roles that may interest you.

"Obstetrics and gynaecology is particularly appealing because it allows you to maintain an interest in both medicine and surgery. It's a wonderful specialty, with something to offer almost everyone. You can develop expertise in the most sophisticated, technically demanding procedures if you choose. On the obstetric side, you spend a lot of time looking after women who are not ill, but going through a life event. In gynaecology, you can make a real difference to women with problems such as menorrhagia and urinary incontinence. A great many of the diseases we treat are now curable, including a large proportion of gynaecological cancers."

(Professor Allan Templeton, RCOG President 2004 - 2007)

There is no typical day in O&G, but this is what makes the specialty varied and interesting! Most trainees and an increasing number of consultants work on a shift system and will start by undertaking ward rounds, seeing inpatients, new admissions and arranging any required investigations. Being part of the multidisciplinary team on the labour ward is a major part of the job and this specialty is truly 24/7 in the service it provides. There's also lots of contact with the patient's family.

Your day might include an antenatal or gynaecology outpatient clinic, an operating theatre list or a scanning or specialist clinic. Trainees could attend to emergencies in the labour ward, or work in gynaecology without other commitments during the day or night. The consultant often manages the labour ward.

There are many opportunities to work closely with the community, both in obstetrics, gynaecology and sexual and reproductive health where there is a significant public health aspect to the work. User input in maternity services is very active. Some doctors in this specialty now work completely in the community.

In an average clinic, a doctor might see ten to 12 patients in one session. The number can be greater or fewer, especially if cases are particularly complex.

Teaching and training medical students and trainees is an important part of a consultant's working week. They may also undertake research.

The specialty is increasingly being delivered by consultants and specialists after completion of their training. The report Tomorrow's Specialist [1](RCOG 2012) explains this.

Most consultants work during the daytime and are on call out-of-hours on a regular basis. Most trainees work on a shift pattern.
The EU Working Time Directive limits the working week to 48 hours. It is also possible to work part-time once you are consultant, or to train on a less than full-time basis [2] (conditions apply).

- Who you will work with?

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Obstetricians and gynaecologists work as part of large multidisciplinary teams.

They work with:

- midwives
- neonatologists and paediatricians
- nurses
- anaesthetists
- oncologists
- urologists
- colorectal [3] surgeons
- physiotherapists
- radiographers
- renal physicians
- cardiologists
- medical secretaries and administrative staff

- Attractions and challenges of the role

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As with other specialties, emergency work can be unpredictable, but is certainly highly rewarding.

Specialists enjoy the variety of the working day, the vast range of opportunities that exist within the specialty and the support of co-workers in the multidisciplinary teams in which they work. The specialty offers career development across all aspects of medicine and surgery according to opportunity and aptitude.

The potential to be involved in ground-breaking areas of work and to make a huge difference to people’s quality of life is also very rewarding. Helping a new life safely into the world is hugely important and very enjoyable.

Obstetrics and gynaecology is seen as an acute specialty and like other such specialties it can be unpredictable and sometimes busy. Trainees will usually be working in a large team with a clear support structure which is important, especially in the early part of training.

As with many other specialties, patients sometimes have complex and challenging issues which can be difficult to resolve. There are times when the work can be very emotionally demanding. However, seeking guidance and support from peers and supervisors often helps in these situations.

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[3] https://www.healthcareers.nhs.uk/glossary#Colorectal