

"I find surgery, and the human interaction within it, absolutely fascinating."

Mr Vaibhav Modgil is a specialist trainee in urology based at Good Hope Hospital, in the Heart of England NHS Foundation Trust. Vaibhav is currently in his fourth year of higher specialist surgical training, known as ST7.

Mr Vaibhav Modgil

Specialist Trainee in Urology

Employer or university

Good Hope Hospital

Mr Vaibhav Modgil Portrait

How I got into the role

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By the age of 15 I had decided to become a doctor. Although both my parents are NHS doctors, they never pushed me into medicine or any other career for that matter.

I knew that urology was the specialty for me after undertaking a project during my fourth year of medical school. My interest in urology had already been sparked by a three-week placement during my third year, where I met some very encouraging and supportive urology consultants and registrars.

After graduation I proceeded to foundation training ^[1]. Foundation training ^[1] comprises of FY1 and FY2, which last one year each. I undertook urology placements in both years, as well as emergency medicine, cardiology, general and plastic surgery.

By now I'd started to make friends and contacts in urology and would often stay after routine working hours to observe urological operations. A pro-active and enthusiastic

approach will make a real difference to your future. Those in more senior positions will take note of your attitude over time.

During my foundation training [1] I also took two weeks' leave and worked at the Institute of Urology (UCLH) updating a urology cancer database. I also fortunate to have the opportunity to observe very specialised urological surgery whilst I was there.

After completing my foundation training [1] I successfully applied for the next stage of my training to become a urologist – core surgical training which lasts for two years. This part of the training includes undertaking Membership of the Royal College of Surgeons (MRCS) exams. This was my first taste of doing postgraduate exams which can be more challenging than the undergraduate experience.

During my core training I made contact with the regional programme director for urology specialist training and arranged meetings every six months to review and assess my CV. The aim was to enhance my application for higher specialist training.

Applications for higher specialist training in urology are competitive. However, candidates can always apply more than once if they are initially unsuccessful. Once you have been accepted for higher specialist training, your chances of becoming a consultant in the future are extremely good.

What I do

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In the first year of training (ST3), you learn some of the basic procedures, such as cystoscopy, which is the telescopic examination of the bladder or resection of small bladder tumours. A consultant always supervises you, but as you gain experience you do more independent operating of a more complex nature.

By the end of your specialist training you can assist with, or perform more complex and high-risk procedures, such as removal of the bladder and prostate gland for in patients with cancer.

My day usually starts at 7:40 am with an hour-long hospital ward round starting at 8, and I leave the hospital around 6:30pm. Foundation trainees, specialist trainees, core trainees, and nurses all participate in the ward round, which I often lead. I review existing patients and assess acute admissions. My responsibility on the ward round is to assess patients, order appropriate investigations, communicate effectively with team members, and teach junior colleagues.

I generally spend around one to two full days in theatre which might involve two longer operations or a series of shorter procedures. I also spend two half-days in outpatient clinics, where I see about 15 patients per clinic. Patients I see do not always require

surgery, and so it is equally important to decide who to operate on, or not. Much of my job involves explaining diagnosis and procedures to patients, along with careful assessment of risk and potential complications.

The rest of my week is spent in teaching, administration, and participation in national and local urological and medical groups.

The best bits and challenges

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I find surgery, and the human interaction within it, absolutely fascinating. The opportunity to interact with people from all walks of life is a privilege and I love the physical and technical challenges of operating on the human body. Although most urology operations are planned the work can sometimes be unpredictable. I enjoy dealing with such challenges.

Life outside work

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I'm now married with a baby daughter and I find that urology enables me to have time for a happy family life. I am on-call for a 24-hour period once every five days. After 5 pm I am non-resident, and am available over the phone, and ready to give advice to colleagues. I am occasionally called into the hospital for emergencies between 5pm – 8am the following day, whilst [on call](#) [2]. I still enjoy playing football once a week and going to the gym.

Career plans and top tips for others

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At the end of specialist training you are awarded the [Certificate of Completion of Training](#) [3], or [CCT](#) [4]. However before being accepted for a consultant post I would like to gain extra sub-speciality experience, ideally via a [post-CCT](#) [4] fellowship. My area of interest

is andrology and genito-urethral reconstruction.

Top tips

- there may be career set-backs, but don't be discouraged. Take criticism constructively but retain conviction in your ability and stay focussed
- you don't have to be the most academically gifted person in the world to succeed in surgery. I wasn't a genius at school, far from it! Resilience, hard work, good communication skills, empathy, drive, and humility will take you a long way
- consider taking a humanities subject as your third A level subject. This will give you transferable skills such as essay writing and the ability to analyse information that will help you in your medical career
- if someone takes the time out to help you develop, make sure you do the same for someone more junior when it's your turn

Source URL:<https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/surgery/urology/real-life-story-mr-vaibhav-modgil>

Links

[1] https://www.healthcareers.nhs.uk/glossary#Foundation_training [2]

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

https://www.healthcareers.nhs.uk/glossary#Certificate_of_completion_of_training [4]

<https://www.healthcareers.nhs.uk/glossary#CCT>