

## Real-life story - Miss Kathryn Evans

Miss Kathryn Evans is a consultant paediatric surgeon at St George's University Hospitals NHS Foundation Trust, specialising in paediatric urology.



Miss Kathryn Evans Consultant paediatric surgeon

**Employer or university** St George's University Hospitals NHS Foundation Trust

**Salary range** Unknown

### How I got into the role

I trained as a pharmacist after leaving school, but it was during my pharmacy pre-registration year that I decided to train as a doctor. I really enjoyed working with people and I knew that medicine, rather than pharmacy, was for me.

I returned to university to study as a mature student and worked as a locum pharmacist during the holidays and weekends to fund my medical degree. After graduating I had various house officer jobs (which are now known as foundation training [1]) which included different surgical and medical rotations.

An early rotation in general surgery provided me with the opportunity to help with operations. I loved the work and also enjoyed working alongside such dedicated and hard-working colleagues and decided to pursue a career in surgery.

It wasn't until the end of my two-year senior house officer job in surgery that I had a placement in paediatric surgery. I loved it from the beginning! I liked challenge of working with children and their parents, and the fact that most children bounce back quickly after their operation.

Before starting my six-year higher specialist training in paediatric surgery, I gained some experience in neonatal intensive care. This experience of looking after tiny premature babies who have often had surgery has proved invaluable in my career.

Higher specialist posts in surgery are extremely competitive ? the fact that I had already accrued a lot of surgery experience really helped. I'd also participated in audits and research and this also enhanced my CV and application.

At the end of my training I was awarded my Certificate of Completion of Training (CCT) and then completed a two-year paediatric urology fellowship at Great Ormond Street Hospital. This was a great experience and I gained more experience in treating children with complex urological problems.

## **What I do**

The main parts of my job are operating and working in outpatient clinics. I generally have two or three operating lists each week, which usually last half a day. Most of the operations in paediatric urology are elective [2] or planned and there is little emergency surgery.

The operations are varied and include surgery for abnormal genitalia, undescended testicles, circumcision for medical reasons, and kidney and bladder problems such as bladder outlet obstruction in boys. As a consultant, an important part of my work is to train junior surgeons and give them increasing responsibility during their training. This means I am often supervising operations as well as carrying out surgery myself.

I also lead ward rounds, where I see patients and their families before and after their operations. Ward rounds are another setting where I teach junior doctors and specialist trainees.

On average I also run three half-day outpatients' clinics each week, where I see between 12 and 15 patients for new and follow-up appointments pre and post-surgery. Some children with urological problems such as night and daytime wetting can be treated without surgery.

Children with complex conditions such as spina bifida have bladder and bowel problems and require long-term support up to the age of 19 years when they are transferred to an adult urologist. Strong bonds are formed with these children and their parents during this time.

Some paediatric urological conditions are diagnosed antenatally and I offer counselling sessions to pregnant mothers once a month. I can't always explain why their child has a dilated kidney for example, as there may be several causes. But I can explain the possible causes and offer reassurance about what might happen and when.

Each week has its share of meetings, including multidisciplinary team (MDT) meetings, and discussions with radiologists to look at ultrasound scan results. I work very closely with continence nurse specialists who carry out bladder assessments and provide bladder re-training advice.

About two or three times a year I also attend medical conferences in the UK or abroad, which provide an opportunity to meet colleagues and keep up-to-date with research.

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## The best bits and challenges

Surgery is very satisfying as you make a decision to perform an operation and you can see immediate results. Paediatric urology also involves technically challenging operations and most conditions can be successfully treated. Working with children and their parents is very enjoyable. I also appreciate the comradeship of a very supportive team of like-minded people.

One of the challenges of my work is working with children with disorders of sexual development, and helping parents to come to terms with their children's condition.

## Life outside work

Earlier in my career my job involved lots of out of hours work and on-call, but nowadays my on-call can often be managed over the phone. My working day usually starts at 8 am and finishes between 5.30 and 6.00 pm, leaving plenty of time for a good work life balance. I am a keen runner and regularly take part in marathons in the UK and abroad.

## Career plans and top tips for others

I am really happy in my current role as a consultant paediatric urologist. In the future I plan to develop my research interests and have a greater involvement in hospital management.

### Top tips

- try to gain some experience in neonatal [3] intensive care [4] ? this will give you invaluable experience of looking after tiny premature babies, many of whom will have had surgery
- experience in adult urology is also a big advantage ? you may be able to arrange this before or during your higher specialist training

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**Source URL:** <https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/surgery/paediatric-surgery/real-life-story-miss-kathryn-evans>

### Links

[1] [https://www.healthcareers.nhs.uk/glossary#Foundation\\_training](https://www.healthcareers.nhs.uk/glossary#Foundation_training)

[2] <https://www.healthcareers.nhs.uk/glossary#Elective>

[3] <https://www.healthcareers.nhs.uk/glossary#Neonatal>

[4] [https://www.healthcareers.nhs.uk/glossary#Intensive\\_care](https://www.healthcareers.nhs.uk/glossary#Intensive_care)