Working life (stroke medicine)

This page provides useful information on the working week as well as any on-call and other commitments, along with information on who you will work with. The attractions and challenges of the job are also in this section.

Although patients are often elderly, this is not always the case, with around 25% of patients aged under 65.

Consultants with training in stroke medicine contribute to and lead stroke services throughout the UK. Patients who have suffered a stroke often receive specialist care in acute and rehabilitation stroke units or via a neurovascular unit. Stroke physicians contribute to the provision of skilled acute and rehabilitation care as part of a multidisciplinary stroke service.

The specialist care and early interventions that stroke physicians provide result in better survival rates for patients with the aim of reducing disability. The knowledge and skills they provide are also vital in stroke prevention. They also provide a key role in developing hospital and community stroke services.

How your time is spent

Stroke physicians generally spend part of their working week working in stroke medicine, and the other part in the other speciality they are trained in. Some stroke physicians are employed full-time in stroke medicine.

The working day can be very varied, due in part to the frequent acute nature of the work. The more quickly someone with stroke or TIA is treated, the better their chances of survival and a full recovery. Stroke physicians are therefore often needed to respond to emergency life-threatening situations.

Stroke physicians often work in emergency outpatient clinics, such as emergency TIA clinics. They provide swift assessment of symptoms and fast access to the right care to limit neurological damage. Testing, diagnosis and medication management are all provided in one visit.

They may also work in other outpatient clinics, such as cerebrovascular disease clinics, seeing new referrals and patients needing follow-up.

Some of the work may take place in hyper-acute stroke units, where rapid assessment of stroke symptoms is provided. Patients generally stay there for up to 72 hours, before going
home or being referred to an acute stroke unit. Stroke physicians manage post-acute care in this setting.

Stroke physicians may also be called to the A&E department to provide assistance to emergency medicine colleagues for patients with stroke or suspected stroke.

Some stroke physicians also run stroke prevention clinics. These clinics help patients at risk of stroke, or who have already suffered a stroke to manage their risk factors and lessen the likelihood of stroke in the future.

Some stroke medicine physicians also spend part of their working week in rehabilitation wards, where they work alongside nursing and other medical colleagues to maximise patients’ functional recovery. This work includes regular ward rounds and training of junior doctors. Stroke physicians also contribute to post-discharge medical care and social and vocational integration.

Alongside clinical work, stroke physicians undertake administrative work such as discharge planning and management. They also attend meetings including multidisciplinary team meetings and are frequently involved in research and education.

Stroke physicians may attend conferences locally, nationally and internationally, and have a key role in teaching medical students, postgraduates and other health professionals. They are often involved in the management and organisation of stroke services.

**On call and working hours**

Working hours are 7 days a week, from around 8.30 am to 6 pm with frequent evening and some overnight on call work.

Stroke medicine physicians normally participate in an acute stroke on call rota, which will vary depending on the size of the unit, and whether the unit participates in a regional telemedicine rota.

- Who will you work with?

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Stroke physicians work closely as part of large multidisciplinary teams that may include:

- acute internal medicine doctors
- cardiologists
- dietitians
- emergency medicine doctors
- geriatric medicine doctors
- GPs
- neurologists
- neurosurgeons
- radiologists
- occupational therapists
- pharmacists
- physiotherapists
- psychologists
- rehabilitation doctors
- social workers
- specialist nurses
- speech and language therapists
- vascular surgeons

● Attractions and challenges of the role

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*Stroke* [1] medicine is a very rewarding area of medicine. The range of clinical presentations is very varied and *stroke* [1] physicians are often able to treat potentially disabling conditions successfully. Prompt assessments of patients with TIA means that some strokes are prevented.

The job involves working with a wide range of multidisciplinary colleagues in neuroradiology, neurosurgery, vascular surgery and other disciplines which adds to the interest of the job. There is also the opportunity to advise, develop and evaluate local *stroke* [1] services.

The work involves a combination of hyper-acute interventions and end of life palliative care, both of which can be emotionally draining. The work is often fast-paced and very demanding and you will also be helping to reassure patients’ families during difficult times. It’s not always easy to reach a definitive diagnosis.

Source URL: https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/medicine/stroke-medicine/working-life

Links
[1] https://www.healthcareers.nhs.uk/glossary#Stroke