

Published on *Health Careers* (https://www.healthcareers.nhs.uk)

Home > Explore roles > Doctors > Roles for doctors > General practitioner (GP) > Real-life story - Dr Chris Pearce

# "As a GP you see patients of all ages, from babies to those coming to the end of their lives."

Dr Chris Pearce is a salaried GP working in Balham Park Surgery in south west London. He was one of the GPs filmed for the Channel Five series GPs: Behind Closed Doors.

#### **Dr Chris Pearce**

**GP** 

Employer or university
Balham Park Surgery



How I got into the role

Expand / collapse

I'd always thought about being a doctor from a young age, but it was at secondary school that I gave it more consideration and formalised my ideas. It was the combination of science and working with people that appealed.

During the sixth form I worked as a volunteer for a local hospital radio station. I enjoyed talking to the patients and finding out what being in hospital was like for them.

After taking A levels that included sciences and history I went to the University of Bristol to study medicine. The course was an incredible experience and I loved every minute. I came from a non-medical background, and medicine was the most interesting thing I had ever done!

A two-week placement during the fourth year of my medical degree in a GP surgery was amazing. I was impressed by the enthusiasm of the doctors and the way the whole team worked together so well.

My two-year <u>foundation training</u> [1] took place in London. The first year was spent in four-month rotations in rheumatology, <u>colorectal</u> [2] surgery and acute medicine at University College Hospital. I found the way the doctors worked collaboratively as part of large multidisciplinary teams (MDTs) inspiring.

The second year included rotations in general practice, A&E and trauma and orthopaedic surgery, attached to the North Middlesex University Hospital in Tottenham. The GP placement was in a deprived area of London and this was my first real experience of having responsibility for patients in the <u>primary care [3]</u> setting. As a foundation doctor you see patients on your own, while working very closely with your clinical supervisor to discuss cases.

During my second year of <u>foundation training</u> [1] I applied for specialist training. General practice was my first choice and I started my three-year training at St George's Hospital in south west London.

GP training includes placements in hospital specialties as well as GP surgeries for the first two years. I gained experience in sexual health, A&E, care of the elderly and dermatology, as well as general practice.

The final year of my GP training was spent at Balham Park Surgery as an ST3 GP registrar. During this time I studied for and passed the exams leading to Membership of the Royal College of GPs (MRCGP). I have also passed the Diploma of the Faculty of Sexual and Reproductive Health and the Diploma in Geriatric Medicine. I had to fit study and revision for all these exams into my evenings and weekends.

What I do

## Expand / collapse

My typical day at Balham Park Surgery usually starts at about 8.15 am when I deal with letters and other paperwork until my first patient arrives at 8.40 am. I then see about 15 patients individually until 11.40 am. We then have a 20 minute meeting with everyone who works in the surgery, including the reception and nursing staff. We review difficult cases, allocate home visits and discuss patients who are coming in for a same day emergency appointment.

My day continues with more paperwork, such as writing referrals to hospital specialists and reviewing the results of blood and other tests we have sent to the pathology lab. Lunch is usually a sandwich while I carry on with admin. Once a week we try to have a team lunch with all the surgery staff.

After that I might do a home visit for patients who are too frail or elderly to come into the surgery. The afternoon continues with tackling my phone call list before my next clinic starts, which runs from 3.00 pm until 5.40 pm. I usually finish work at around 7 pm, after finishing off emails, phone calls and letters.

I enjoy working with elderly patients and have made care of the elderly my main special interest. Elderly patients often have genuine medical pathology and treatment involves making sensible and realistic decisions. Older bodies also work differently and this makes them even more interesting.

One morning a week I work at a local residential home for the elderly, where many of the patients have dementia. I work closely with an advanced nurse practitioner, particularly in the context of trying to provide very high quality end of life care.

GPs have a responsibility to keep learning throughout their careers, and in the surgery we share that learning with colleagues. I recently attended a conference about non-pharmacological treatments for dementia – where prescriptions for 30 minute sessions of crafts, games, reminiscing, music and massage were recommended.

One afternoon a week during term-time is spent teaching medical students from St Georges Hospital about <u>Primary Care [3]</u>. I also participate in the extended hours rota, which involves working on Saturday mornings about once every four months.

The best bits and challenges

## Expand / collapse

Each patient experiences conditions slightly differently which means that the work is never boring. I love working with people and, as a result, being a GP doesn't always feel like work! There is also a detective element that I enjoy - you may have to look beneath the presenting symptoms to find out what the patient is really saying.

As a GP you see patients of all ages, from babies to those coming to the end of their lives. To be able to reach a diagnosis and help people feel better is incredibly satisfying.

Managing your time can be difficult, with only ten minutes allocated per patient. This means I sometimes run late, which can be intensely frustrating for the patients waiting to see me. The workload in general practice is increasing and we also have the challenges presented by our increasingly aged population and changing patient expectations.

### Life outside work

# Expand / collapse

Full-time GPs work eight clinical sessions a week, which is concentrated into four days, leaving me Monday as a day off. I spend this looking after my young daughter. My other interests include keeping fit, hiking, travel and spending time with my family.

Career plans and top tips for others

## Expand / collapse

I will shortly be relocating to a new GP post in Dorset near where I grew up, so that we can be closer to our families. I've really enjoyed working in London and I'm looking forward to developing my career in the West Country.

#### Top tips

- o don't be put off by negative reporting about workload pressures in the media
- don't be afraid to follow a longer path into general practice to gain additional experience along the way
- do take advantage of opportunities to work collaboratively with a supportive network of colleagues

**Source URL:**https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/general-practice-gp/real-life-story-dr-chris-pearce

#### Links

- [1] https://www.healthcareers.nhs.uk/glossary#Foundation\_training
- [2] https://www.healthcareers.nhs.uk/glossary#Colorectal
- [3] https://www.healthcareers.nhs.uk/glossary#Primary\_care