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# "Making the move into diagnostic radiography and imaging is easily the best one I've made since signing up for the RAF."

Paul left the Royal Air Force (RAF) to seek a new career and was inspired to pursue radiography after seeing his daughter embark on her career in radiography.

# Paul Wicklen

#### **Diagnostic radiographer**

Employer or university Frimley Health NHS Foundation Trust Salary range £20k-£30k Diagnostic radiographer Paul Wicklen

### How I got into the role

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I was an aircraft airframes technician with the Royal Air Force (RAF) until 2006, when the toll of too much time away from my family became a driver in my decision to leave the forces and pursue a new career. I initially went into teaching after I left the RAF, but it wasn't the right job for me.

Seeing my daughter embark on her career in radiography reignited the spark of an idea I had about the profession back in the early 1990s; it wasn't the right time then, but it was now!

I decided that a full-time university course was the best path to take and found that the University of Hertfordshire would accept my maths qualification as a science, as I had no other science-based qualifications from school.

Half of the course was spent in the university learning the theory and half was on placement in hospitals; this was where we really learned how to do the practical aspects of the job. I found my placements really tiring at first, mentally exhausting as well as physically tiring, but I soon got used to it.

Making the move into diagnostic radiography and imaging is easily the best one I've made since signing up for the RAF all those years ago.

# What I do

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As a diagnostic radiographer I instantly make a difference to the outcome of someone's treatment. Besides taking 'plain film' X-rays, I also spend time in operating theatres imaging for urology, orthopaedic and spinal surgeries in my day-to-day role.

I have chosen to further specialise in interventional radiography, performing real-time fluoroscopic (moving) imaging of gastro-intestinal and vascular procedures. Examples include patients who come into the theatre jaundiced and have stones removed, or straight from an ambulance in the middle of having a heart attack and leave with a fully-functioning heart!

Our real-time X-ray imaging gives the surgeons a view of what is happening inside the body. Because the soft tissue of the gastro-intestinal and vascular systems does not readily show up on X-ray, a radiopaque contrast dye is injected which shows up well on the X-ray, giving the surgeon a really detailed view of the area being operated on.

For instance, a blocked or narrowed cardiac artery will be instantly identifiable by the omission of contrast dye, and when the artery has been reopened, this is confirmed by the completeness of the artery when further dye is injected. This imaging allows the surgeon to operate through a small incision, usually in the groin, rather than opening up the chest cavity, and the patient will be up and walking again within a few hours.

# The best bits and challenges

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The resourcefulness and adaptability that was part and parcel of my job in the RAF is essential to get good diagnostic quality images of patients. Patients present in all shapes and sizes; from dealing with deaf or cognitively impaired patients to A&E patients on immobilisation boards, thinking on your feet is a must. The camaraderie within a good department is also similar, and my Forces sense of humour fits in very well with this job too!

Covid-19 has been particularly challenging and we have had to adapt our practices and provision very quickly to deal with it effectively. When you've been in full personal protective equipment (PPE) and lead protection for four hours straight, without a break, taking mobile X-rays on a seemingly never ending stream of Covid / suspect Covid patients, it strikes home how much of an efficient team we all are. We work hand in hand with porters, nurses, doctors and consultants, and the whole team works together. It makes me feel proud of both my profession and the NHS.

Life outside work
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Since we don't take our X-ray machines and scanners home with us, life outside of work is just that. There is plenty of time for leisure activities, or if you prefer, there is usually overtime available to cover colleagues on leave, etc. It is good to find the right balance, to help you save up for that next holiday and also to get your relaxation time.

I am a keen bowler and pre-Covid I was usually able to bowl three or four evenings a week in local and county league games. Hopefully we'll get back to that soon, but for the moment the bowls greens are all closed unfortunately. I have my motorbike, though, which is also a great de-stresser on a nice [1] summer evening!

# Career plans and top tips for others

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Continuing professional development is a must in this profession and there are plenty of varied opportunities for advancing your practice too. My ambition is to advance into surgical procedures as a consultant radiographer, which I hope to achieve in the next few years.

If you're considering a career in an allied health profession, as well as researching on the internet, why not visit your local hospital and see what professions are available? There's a lot more than you would think.

You can arrange for some work experience in the areas you're considering to help you decide. Work experience is not just for school children and it may also be a prerequisite to starting your university course.

There's such a diverse range of areas you can go into. Opportunities for advancement and further training are very good and your qualification is valid almost everywhere in the world. And with a national shortage of diagnostic radiographers, you're pretty much guaranteed to find a job when you qualify.

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