

# on the front line

CMF caught up with some people who have 'been there, done that and got the T-shirt'

## CONSULTANT

Idris Baker

*which area of medicine are you in?*

Palliative medicine.

*why did you choose this area?*

I think it chose me. We had a one-off therapeutics lecture where the Prof took two themes – opioid pharmacology and the art of prescribing as a matter of human engagement, not just signing a piece of paper. He brought these together in the context of the care of the dying. It was like a beam of light and I was hooked.

*what motivates you in your work?*

Did you know that about a third of hospital inpatients, for example, are in the last year of life – although you often don't know which ones? They have physical symptoms, psychological problems, social dysfunction and spiritual distress. Making a difference to these things in someone's last days and months is one of the biggest things you can do for someone. I am also driven to find ways to improve areas of unmet need, as we know that not everyone who needs this care gets it.

*what does a typical day look like?*

There's no such thing! I often start the day hearing about patients or helping manage the department. That's usually followed by a mix of seeing patients, taking phone calls, an outpatient clinic and holding meetings. I enjoy spending a lot of my time seeing patients at home. Supporting families is so vital – family members are the ones who will be left with the memories of how someone was cared for as they were dying.

*what are the challenges in your workplace?*

The top one is probably the same anywhere: there are more things to do than time available. I try to focus on what's most important and not to lose too much sleep over the things that won't help anyone. I also get frustrated by the way people sometimes treat each other and themselves badly and the way that contributes to ill health. I can feel powerless to do much about it, so instead I focus on what difference I can make.

*what are the blessings in your workplace?*

The people I work with, and above all the patients and their families. A very wise Christian once told me, 'It's not for no reason that we're called human beings and not human doings'. My patients are a constant reminder of that because they are often able to do very little. Yet, however great the loss imposed by their illness, they display the glory of God in his creation.

*do you have any advice for students going through medical school?*

Enjoy every minute and make the most of it. You'll never have quite the same opportunities or be surrounded by so many people wanting to teach you without the pressures of a day job interfering. Whatever your plans, learn everything you can about every part of medicine now because nothing will be wasted. Finally, if you believe that God has called you into medicine, remember that calling as you study and keep your eyes fixed on Christ. Sustaining and recognising the reason for your studies will set the tone for your career and more.

GP

Emma Hayward

***which area of medicine are you in?***

I am a GP and clinical educator, so I see patients two days per week and teach undergraduates the rest of the time.

***why did you choose this area?***

I love the variety in general practice – who else gets to do a newborn check directly followed by visiting a 92-year-old in their home? I also love to teach and general practice is flexible enough to allow me to do both.

***what motivates you in your work?***

Being able to get alongside people when they are facing difficulty or distress; using clinical skills to make diagnoses; and watching medical students having 'light-bulb moments' when they understand a new concept.

***what does a typical day look like?***

A day at the surgery begins with a nice drive across the Leicestershire countryside ready to start with a cup of tea and paperwork at 7.45am. I start seeing patients at 8.30am, then do visits at lunchtime. After that I check blood results, sign prescriptions, write referral letters and file incoming post until I see my afternoon patients. I usually leave at about 6.30pm and get home in time to read my children bedtime stories. When I'm at the university, I usually start at 8am, but there is no typical day because I teach on such a wide variety of courses. Every term is different.

***what are the challenges in your workplace?***

Keeping up-to-date with everything, running on time, and balancing patients' needs with practice targets.

***what are the blessings in your workplace?***

An amazing team who really work well together and recognise that everybody has a vital part to play. Our patients are generally very grateful for our help and it's good to get their positive feedback when we've done a good job.

***do you have any advice for students going through medical school?***

Medicine can fill 24/7 if you let it. I took every Sunday off at medical school (even the day before finals) and never failed an exam. I really felt the benefit of observing a Sabbath rest and would recommend that you try it. That said, I do not advise telling your tutor that the reason you failed your exams is that Dr Hayward told you to take Sundays off – you will have to work the other six days of the week!

## JUNIOR DOCTOR

Grace Petkovic

### *which area of medicine are you in?*

I'm an F1 so I'm rotating around lots of areas...  
I am now in colorectal.

### *why did you choose this area?*

Well, part of F1 is you don't really have a choice! I selected the tracks that felt most suitable for making me a good doctor and heading towards a speciality I might be interested in.

### *what motivates you in your work?*

On the difficult days of F1, I remember that this is exactly where I asked God to place me if it was his will. I remember why I asked for that.

A patient recently turned to me and asked, 'You guys do a great job, but I don't understand why you waste your time on an old man who can't do anything, like me? Why do you do that?' I answered, 'We don't view it as a waste. We think you are valuable because of who you are, not what you can do. And medicine is our way of getting to practicably live that out. That's why'.

It reminded me – 'that's why'. We get to partake in God's great restoration project, loving people back to God.

### *what does a typical day look like?*

At the moment I'm on colorectal surgery, so preparing the list in the morning, doing a mini ward round with the SpR or SHO, followed by a reg ward round and finishing jobs in the afternoon. It's the most sociable job I've had – you spend a lot of time with the FIs! On call days end with covering different surgical wards in the evening. They are normally the most diverse and interesting parts of the day.

### *what are the challenges in your workplace?*

A lot of F1 is administrative. It helps make you grateful for the on calls where you have more of a clinical than administrative workload. As an F1, I've found I can often feel bored or as though what I'm doing doesn't matter. I think it is helpful then to remember God is still watching, and I get to practise working hard for the Lord rather than for human eyes. I also remind myself that the health system has developed things like discharge letters, because they do make a difference when done well. I need to be humble to accept this.

### *what are the blessings in your workplace?*

Talking to patients. This is normally the highlight of my day – if you really get to know somebody and they share with you, then you remember how amazing God's created beings really are.

### *do you have any advice for students currently going through medical school?*

Relish it! Medical school is an amazing chance to study and learn with more time than you'll have later. Enjoy going where that medical student badge can take you! And don't forget to study theologically too – read your Bible and read books from leaders in the Church. You're going to encounter ethical dilemmas, where you're the acting moral agent as a doctor, so prepare for these decisions as a student.

# NURSE

Georgie Coster

## ***which area of nursing are you in?***

I'm a staff nurse working on an emergency surgery ward. We look after patients admitted through A&E with acute surgical problems.

## ***why did you choose this area?***

I started my career in medical assessment, but when I ventured on to surgical wards for bank shifts, I realised how interesting I found the surgical patient journey. On our ward, patients are with us until they go to theatre and then return to us afterwards, so we get to nurse them through the whole perioperative period, which can bring a great deal of satisfaction. Half of the ward is a high monitoring area for surgical patients who are becoming particularly unwell and the other half is for patients from intensive care who are improving, but not yet well enough for a 'normal' ward.

## ***what motivates you in your work?***

Colossians 3:22-24. Read it! I cling to those verses with the promise that God sees and is pleased by everything we do for him at work. When nobody else thanks us, that's OK, because we're only looking for the approval of our all-seeing, faithful God.

## ***what does a typical day look like?***

I take handover at seven am and then (my least favourite part of the day) we turn all the lights on and get the patients up! All our patients are seen by a consultant surgeon during the morning ward round and from then on, we're either prepping them for theatre, nursing them through their post-operative period, or getting them ready for discharge. The days are busy – managing pain, personal care, wound care, post-op infections and

complications, updating relatives and liaising with doctors, pharmacists, physios, dieticians, social workers and bed managers.

## ***what are the challenges in your workplace?***

Like every Christian working in our busy NHS, the main challenge for me is to maintain Christlike character under pressure. Though, when it comes to being a good surgical nurse, I think the big challenge is spotting the deteriorating patient. It's easy to overreact and under-react to subtle changes in patients, knowing when to escalate is an art in itself.

## ***what are the blessings in your workplace?***

I love looking after such a wide variety of patients – fit young men with perforated appendicitis all the way to elderly patients with palliative cancer diagnoses. No day is the same and I'm always learning something new which 'keeps me on my toes'. The team I work with is fantastic and genuinely want to give the best care possible. We also have a wonderfully supportive and 'hands on' ward manager which makes a huge difference to staff morale.

## ***do you have any advice for students going through medical school?***

Don't think that what you do in church is worship and what you do at work is not. Practising medicine can be worship to God. There is so much blessing in knowing that.

When you graduate, learn the nurses' names. Asking for the fifth time, because you've forgotten it again, will still mean more than calling her 'nurse' – trust me!