



WHY I CHOSE A CAREER IN CLINICAL ONCOLOGY

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Consultant

Having trained LTFT and taking a couple of years out for maternity leave I have finally achieved consultant grade, completing a process I set my heart on twenty years ago, when I first headed off to Medical School.

The day to day job is much the same as a senior registrar with an increase in paper work and almost overwhelming numbers of e-mails! Patients generally have the same problems and worries that you have been dealing with for the past few years but, after initial introductions, I no longer hear the phrase– *‘oh, I thought I was seeing Dr. X’*. Most patients instantly see you as the expert that they have been waiting to see, with *all* the answers. Diversity of people and presentations is what keeps the job interesting. It is important to remember there are still people around with more experience for those difficult cases and it doesn’t take long before you realise that those people are also asking you for your opinions.

I think radiotherapy has changed. I now get consulted much more on how I want to change a plan if tolerances can’t be met, what to do if there are geographical misses on treatment. We are often not involved in these decisions during our training - the plans just appear with the compromises on them. It makes you realise the importance of those things which were learnt for the part 2 exam!

I remember my first MDT. I was the lone oncology voice in a room full of surgeons in a trust I had never worked in before. As a registrar, oncology decisions are often reported back to the consultant – but I was now that person. The MDT went well, my opinion was listened to and appropriate decisions made. I think the most rewarding thing is the ability to build relationships with your colleagues in other specialities and hospitals. This also helps when their expertise is needed as you can just pick up the phone and talk to them. This is *always* better than email.

Along with responsibility, control also comes with the job. I run my own clinics and therefore have a say in how they operate. I am also closer to how the hospital works and am better placed to change things which I don't feel work so well and have more of a voice in keeping things that do. This control influences my personal life. I no longer need to move around the country with either long commutes or to spend extensive time away from family. Roots can be permanent and only lifted if *you* chose to do so.

On balance then, almost eighteen months in to the life of a consultant, yes there is more responsibility and pressure but there is also greater control and influence. For me the latter outweigh the former, I'm very happy in my role and looking forward to my ongoing career and the further opportunities it can bring.