A GP registrar is a fully qualified Doctor who has chosen to specialize in General Practice. For all Doctors that train in the UK the first 7 years of their training will be very similar, they will spend 5 years at University to obtain a degree in medicine, followed by 2 years working as a Doctor in a variety of specialties, usually within a hospital – these two years are known as ‘foundation training’. It is after these 7 years that Doctors then choose which specialty they would like to work in, this involves several years of further training on their chosen ‘training scheme’ and at the end of this time they will usually become either a consultant or a GP.

When it came to the point of choosing which specialty to pursue, I found that I had enjoyed aspects of all the specialties I had been exposed to and didn’t feel that I would be happy being restricted to one specialty for the rest of my career. I decided that a career in general practice would allow me to not only get to see a wide range of patient groups and medical conditions but also to get to know my patients and their families.

The GP training scheme lasts for three years, the first two years have seen me work in several departments such as ENT (Ear, Nose and Throat), Obstetrics and Gynecology, Psychiatry and Palliative Care. All of which have given me vital skills and experience to be a well-rounded GP. I am now in my third and final year of my GP training and am based at Owlsmeor Surgery as a ‘GP registrar’. It is usual for GP trainees to get two years of varied hospital experience followed by one year consolidating that experience within a GP practice. Each GP registrar is supervised by an experienced GP at their practice who acts as their trainer, they oversee the three years of training and offer day to day supervision during the final year.

My usual day starts with morning clinic, which runs from 08.30 – 11.00, throughout the registrar year the number of patients I see in a clinic will increase and the length of each appointment will decrease. By the end of my registrar year I will have gone from 20-minute slots to 10-minute slots to reflect what qualified GPs are required to do. At 11.00 I see patients booked into the emergency clinic, the number of patients booked in varies from day to day and all the Doctors at the practice that day will pitch in until all of the patients have been seen. There is then a break in the day before afternoon clinic starts 2.30, during this time I will do any referrals or paper work, discuss any complex patients with my trainer, do home visits if required, do some reading for the exam that I have to sit at the end of the year and have something to eat. Throughout the training year I will take on additional responsibilities, including reviewing results, letters from hospital consultants, reviewing requests for repeat prescriptions, responding to urgent requests from patients or hospital doctors all of which GPs are expected to do around seeing patients. At the moment I can’t quite work out where the extra hours required to complete this paper work are going to come from and am glad this additional work is being introduced gradually.

In addition to seeing patients, I also attend regular teaching once a week with the other registrars in the area and have weekly tutorials with my trainer who ensures that I am on track to progress towards the end of my training.

I have to take a clinical skills assessment examination in London during my final year which involves doing 13 simulated consultations with actors being marked by qualified examiners. Once all my exams and work-based assessments are completed I am given the qualification of MRCGP (member of the Royal college of GPs) and can start my ongoing career as an independent practitioner.