

VOX POPS OF PATHOLOGY TRAINEES



Sophie Otto

4th year trainee, anatomical pathology
Institute of Medical and Veterinary Science, SA

Starting training in Anatomical Pathology felt like beginning my medical degree all over again. The training program has proven to be challenging and incredibly interesting. Nothing in clinical medicine properly prepares you for this career path. I'd been a GP for 16 years and, with a colleague, also operated a surgical assisting service so becoming a pathologist was a real "sea change" for me. I wanted to do something new and was fascinated by the problem-solving demands of this course. I particularly enjoy using autopsy technique, as well as macroscopy and microscopy, in order to make a diagnosis. I had the good fortune to pass my Part 1 exam last year, and this year, having completed three and half years of training, hope to sit the Postmortem Exam, and also complete my Case Book, both required assessment elements in Anatomical Pathology.



Subject areas overlap within the various disciplines. Each strand also shares three major hurdles. The first is the Basic Pathological Science exam that every trainee must pass or gain exemption from. This may be taken by a final-year medical student or before commencement of training.

Then, for each of the eight training streams there is a part one examination taken after about three years and a part two exam taken in the final year. The part two exam is a combination of a written exam (essay questions, short answer questions and some multiple choice), practical and oral components.

These exams are designed to ensure that people who pass and become Fellows of the College are able to demonstrate their knowledge of pathology in spoken and written form to their colleagues.

While five years is the minimum time taken, many trainees choose to spend longer in this process, and not everyone passes on the first attempt. However, completion rates are high in comparison with other disciplines.

Pathology offers lifestyle advantages in that it may allow for work/life balance. It is fascinating as a discipline and as a study. And it marries well in a number of areas with clinical training and practice.

Dr Pryor suggests that once people get a taste for pathology, "they want more. Essentially, once trainees are accepted, we don't have many dropouts." Last year, 85.7 per cent of trainees who undertook their part two examination passed.

The discipline, rather than the place of study, determines the content of the course (so those keen to pursue infectious diseases do not necessarily need to head for tropical areas). Most training is undertaken in major city centres rather than remote parts of Australia, and pathologists working in smaller centres tend to be general pathologists able to accommodate the broader needs of the community.

Joint qualifications are also available with the Royal Australasian College of Physicians, ie clinical haematology, clinical immunology, microbiology with infectious

diseases or chemical pathology with endocrinology.

Some high-profile pathologists work at an international level on public health and preventative policies. While this is not a common path for pathologists, as a discipline pathology does accommodate those with an interest in management systems.

Pathology also offers lifestyle advantages in that it may allow for work/life balance. But most importantly, as Dr Boswell notes: "It is fascinating as a discipline and as a study. And it marries well in a number of areas with clinical training and practice."

High completion rates from initial trainee to RCPA Fellow are testimony to its inherent satisfactions. 🔥



Desmond Chih

**3rd year trainee, infectious diseases and microbiology
Royal Darwin Hospital**

I'm originally from Perth and came to Darwin to start my microbiology training.

I couldn't resist the opportunity to be exposed to the usual and unusual pathogens up in the Top End and had heard many good reports in starting laboratory training here. In many ways, the training in Infectious Diseases and Microbiology complement each other and I have decided to pursue Pathology (Microbiology) training as well. The combination of both clinical and laboratory work suits me and I believe will create more opportunities down the track.

Daman Languth

**Completed training December 2005, immunology
Royal Brisbane Hospital**

I actually started rheumatology/physicians training, then changed to clinical immunology before beginning immunopathology. I had had limited exposure to the field in Brisbane and it was only after I moved to Royal Perth Hospital (after my first two years of advanced training) that I decided upon immunopathology. I spent two years in Perth and was lucky enough to train with some wonderful pathologists there and in Brisbane; Richard Wong, Dom Mallon and Peter Hollingsworth. Immunology is one of the smaller Disciplines so you need to seek out the people who can help you. It's a good idea to move around hospitals and cities to get a broad spectrum of training and experience. In Perth I worked in HIV research and I'm now focussed on auto-immune testing.



Fiona MacLean

**Completed training July 2006, anatomical pathology
Douglass Hanly Moir, Sydney**

I trained to be a physiotherapist because although I was interested in medicine I thought a medical degree would take too long. After a few years as a physio I decided I did really want to become a doctor after all. Once I finished medical school I was thinking about my options and pathology was one of the areas I was interested in. Pathology was not the easy option, it has been much more work than I anticipated and I was surprised at how much there was to learn. It really showed me what my limitations were. After being a competent resident in a hospital, starting pathology training was like going back to school – I didn't know how to do anything! Pathology is very mentally stimulating. There are so many variations, no problem is exactly the same and you are challenged every single day. I have had quite a mixed training experience including spending time in a number of public hospitals as well as in a private lab. This allowed me to compare my experiences working in different settings, which has been important recently as I considered where I wanted to commence working as a newly qualified pathologist. I chose to work at the private lab where I had spent some time training as I found the experience quite positive, including plenty of opportunity to learn how to report cases, a wide variety of material to access and staff who were easy to approach and enthusiastic to teach me. As a result I am looking forward to starting my career in that setting.

