

RCPATH/BDIAP Foundation and Undergraduate Taster Event - pathology through a COVID lens - Q&A Session

21 July 2020

Recruitment

What sort of “white space” questions are used in the application form on Oriel for Histopathology?

They tend to be very similar each year. You can ask any current ST1s just to make sure that there haven't been any changes. My application form can be found on the BDIAP website but you may have to join as a foundation member to have access to it. The questions from my application are below:

1. Why are you motivated to pursue a career in Histopathology? In what way are you able to demonstrate your own skills and attributes are suitable for a career in this speciality? [250]
2. What plan have you followed to develop your understanding of Histopathology? How have your actions developed your insight into Histopathology? [250]
3. Provide evidence of activities/achievements/attendance at courses over and above your regular scheduled daily activities that demonstrate your personal commitment to Histopathology (or development of relevant skills.) Where appropriate indicate date and location relating to the evidence. [250].
4. Describe your understanding of the basic principles of medical research and why an understanding of medical research is important to a trainee doctor. You may use examples to illustrate your answer, wither from your own experience or from publications if you have not had the opportunity to be involved in research. [250].
5. Please list any prizes or other academic distinctions [250].
6. Please list any publications (shortlisted candidates will be asked to bring copies of all publications to the interview). Please list your best 5 publications with full citation and PubMed number. Please asterisk those for which you are first author. [250].
7. Please list and detail any presentations/ posters at conferences [250].
8. What teaching experience do you have [250].
9. Histopathologists have to be effective communicators; can you describe a situation where you have demonstrated effective communication skills [150]
10. Describe a time when you have had a particularly difficult day at work. What strategies did you use to cope with this situation both during this and after this time and how effective were they? [150]
11. Describe a recent example of when you have worked as part of a multi-disciplinary team. What approach did you take and how did your behaviour contribute to the effectiveness of the team? [150]
12. You notice that a piece of work you have undertaken on your own appears in your



colleague's portfolio as if it was his/her work. How do you approach this situation?

[150]

13. From your own experience, describe the next steps after a patient in your care has died [250].

14. From your experience describe a patient in whom the pathology report had an important influence on management [250].

Dr Matt Clarke

Are there any courses and online resources to prepare for interviews?

I don't know of any courses specific to pathology. If you are applying for histopathology, my application and the interview stations are available on the BDIAP website if you join as a foundation member. Also speak to the current ST1s for advice. There is also a good book "Medical Interviews" by Olivier Picard which I found useful so may be worth looking at.

Dr Matt Clarke

Could you explain a little about the structure of the interviews for pathology?

There have previously been seven stations in the interview, and it can last 2-3 hours in total. The interview does change in terms of structure, and has done since I applied. Information about the interview structure is sent out with the invitation, and there are other sources online to find out about the content. The seven stations are: portfolio – your opportunity to show your CV and commitment to specialty, teamwork – knowledge of concepts and your own experiences, clinical knowledge – your diagnostic approach live and pathophysiology of a common clinical scenario, quality and risk – ethics and audits etc, presentation – given some time to prepare a presentation on e.g. the role of a histopathologist in a particular scenario to a layperson, this was previously on acetate, picture description, written station – cause of death and pathophysiology from a pm report. The interview is run by HEE London and South East, so it is best to check all their information about the interview when you are approaching it as obviously it is subject to change.

Dr Katie Allen

Do the publications/research portfolio for specialty application have to be within histopathology specifically, or could they be within broader areas of Medicine or Biomedical Science?

No, they do not need to be pathology specific at all. Any publications or research projects are great experience and can all be linked back to pathology in some way as pathology is so broad and all medical and surgical specialties can be linked back to it. Biomedical science is very integral to pathology anyway too will be very helpful experience!

Dr Matt Clarke

If you have a special interest in a particular subspecialty (for example paediatric and perinatal histopathology) and have specific experience related to it, would you recommend mentioning it during the application/interview process or is it preferable to keep everything broad like with medical applications where its less advisable to specify a specialty?

I don't think there could be any harm in mentioning during an interview that you have an interest in a subspecialty, especially as in histopathology you have to reapply for these at ST3 level.

Interviewers know they will be recruiting people at ST1 level who will go on to branch off the main programme. If you have experience related to it then I would definitely mention it as it shows a good commitment to the specialty, and gain you extra points at application/interview. Important to make show that you are interested in all

other aspects of the programme as well of course, but you can't be penalized for being

enthusiastic about a particular area.

Dr Katie Allen

What foundation post is best to prepare for histopathology training?

There are several foundation posts that offer histopathology as one of the rotations. If you want to get more of a taster for the specialty, look out for one of these. However, it is not a necessity for an application. Any amount of clinical experience will help you in pathology – so having a good solid clinical medicine and surgical background will be very helpful to you too. All specialties of medicine and surgery can be linked back to pathology in some way so all experience is useful!

Dr Matt Clarke

I am interested in pathology but not sure which of the specialties I would like to apply to. Is there a pathology version of IMT/CST where you can rotate round SHO jobs in different specialties? E.g. 4 months histopath, 4 months microbiology, 4 months haematology and so on...

At present I am not aware of any such rotations. There are a handful of Foundation posts with a 4 month 'laboratory medicine' or 'general pathology' component where you can experience different disciplines during the 4 months. An RCPATH survey in 2018 identified three such posts in the East of England

Foundation school, and one each in the North West and West Midlands Central. However you would need to check with these schools whether this remains the case.

Dr Angharad Davies

Have you got any advice for the non-portfolio aspect of the interview? I didn't get a training number in histopath when I applied this year so am trying again for 2021 and really, really want it.

I am so sorry that you weren't successful the first time around – but don't worry, I am sure you will get in! They are looking for people who have an appreciation for what a pathologist does, and how a department works and for people who are clearly enthusiastic and interested in the job. Nerves can always get the better of us on the day and that is completely normal. Might be worth doing some practice interview questions with some of the ST1s in your local department – they can help you to work on your answers to some of the key components of the interview and help you to get a bit more confidence for the next one. Having been through the process already, knowing what to expect will also be useful.

Dr Matt Clarke

How many histopathology trainee positions tend to be available every year and how variable is it by location? What are the chances you'd have to relocate to take up a position?

For the last few years, there have been 75 posts available in England in the first round of applications. I think for the last two years, they have all been filled in the first round. There are a few posts available in most locations, and I think it is highly unlikely you will have to move significant distances to take up your post; most people end up where they want to be which is good and you can state which are your preferred training posts as well.

Dr Matt Clarke

Which branch of Pathology is the least competitive?

HEE publishes competition ratios for specialty training in all specialties here: <https://specialtytraining.hee.nhs.uk/Competition->



The Royal College of Pathologists

Pathology: the science behind the cure

[Ratios](#)

Dr Angharad Davies

If you have a training number already for a ST1 in a different specialty, how easy is it to apply to get into histopathology?

It shouldn't be a problem at all! I was a core surgical trainee and successfully applied and transitioned. In fact, nearly a third of the intake each year come from trainees who are already in existing training programmes so you are not on your own! Any extra clinical experience you have and bring to the role will be of great benefit to you and you should show this in your interview.

Dr Matt Clarke

Moving to pathology from another specialty

I'm actually post CCT planning on retraining in histo (because it's amazing!) Are there any RCPATH competitions aimed at non-trainees who are not UG/foundation doctors? I'm really keen to get involved in essays but it doesn't look like I fit in any of those categories.

Thanks!

If you look at the RCPATH web site, in addition to the Undergraduate and Foundation essay prizes there are essay prizes in Patient Safety, one in Science Communications and one in Art in Pathology.

Professor Shelley Heard

As someone who has completed core training in another discipline (psychiatry) and is considering histopathology as a career change, is there any special advice or hurdles that I should be aware of?

You would need to look to see if you would need to redo any foundation competencies before applying, depending on your current specialty. Otherwise, my advice would just be to be sure about making the leap from something you have dedicated yourself to for a long time. Spend as much time as you can in local departments getting to know what the specialty is like so you're sure it's right for you. Try to get histopathology specific projects/audits/publications etc for your portfolio/CV if you can before the interview. It's never too late to change specialty!

Dr Katie Allen

Medical undergraduates

Any upcoming online/virtual events aimed at medical students?

There has been a [webinar series on COVID19](#) which has been recorded and is on the RCPATH website which would be suitable for medical students.

Professor Shelley Heard

What would be a good elective project for pathology as a medical student?

Contact a department where research is being undertaken to see if you can join in or create a project. Explore the Pathological Society's or other learned societies' (such as the Microbiology Society for example) grant schemes which are suitable for student projects; suggest to a potential supervisor that you apply for one of these. Even if your department of choice is not research-active they may have pieces of work which they could suggest for you, such as audits or reviews, while you experience the department.

The US NIH runs an elective scheme in specialities including infectious diseases. One of my students did this and had an excellent experience.

Dr Angharad Davies

Are medical students able to view post-mortems

Yes, you are – I was responsible for organising a rota so that medical students could view a post-mortem in a previous job. It will depend on local departments though but I would strongly urge you to explore this.

They are a FANTASTIC learning opportunity for you!

Dr Matt Clarke

Foundation trainees

I have already done a rotation in histopathology in FY1. I am now approaching the end of FY1 and I have no more pathology rotations in FY2. Am I still eligible to apply for the RCPATH Foundation Fellowship?

Yes, if your FY1 post contained a pathology discipline and you are still in the same programme, you are eligible.

Dr Angharad Davies

I have a histopathology job in FY2 next year. What tips do you have for making the most of this? Fantastic news! Congratulations! My advice would be to get stuck in wherever you can!

Hopefully you will be able to get some experience with specimen cut-up and even have a go at reporting some cases with the consultant or registrar supervision. May also be a good opportunity to see if you can view some autopsies, and also look at some cytology specimens. The ultimate aim is to get a good idea about what a pathologist does and to see whether this is something that would suit you. Just show your interest and enthusiasm and I am sure the team will be very happy to show you everything!

Dr Matt Clarke

How to apply for taster weeks in histopathology.

Identify the department you'd like to attend. The RCPATH team can provide you with a formal letter which you can then send to the Head of Department asking to be hosted there for a few days. You don't have to use this letter of course but you may find it helpful.

Dr Angharad Davies

How do we get sponsors for the foundation membership on the BDIAP website?

You could approach your local histopathology department and ask the consultants there – most will be BDIAP members so I am sure would be very happy to do this for you. Alternatively, you can look at the BDIAP Council list on the website and email any of the consultants on the list. They are all aware of this and will be very happy to do it for you. Unfortunately, trainees are not able to sponsor applications otherwise we would have done this for you ourselves. Any problems get in touch though!

Dr Matt Clarke

International Medical Graduates

Being an IMG what is the next best step after I clear the PLABs to get into Histopathology training. Thanks Firstly, you will need to make sure that you have an appropriate visa.

Histopathology recruitment is run centrally (there is a separate recruitment process for Scotland) with one or two rounds per year, depending on whether or not all posts are filled in the first round.

The person specification will be key to your preparation and it is recommended that you seek advice from a UK Histopathologist consultant or trainee about the way in which histopathology is practiced in the UK, including starting to obtain an understanding of the NHS structure and delivery of healthcare in the UK. If you can obtain it, an informal placement in a UK laboratory would also be helpful but these can be challenging to find.

Professor Shelley Heard

What are the chances of getting histopathology residency as an international medical graduate? Please see the advice for the question above. Health Education England publishes the competition ratios for specialty training posts in England. Their most recent data is from 2019 and although it is not an indicator of future ratios, it is useful for potential applicants.

Professor Shelley Heard

Can audits and projects done overseas (for an IMG) be considered when applying for any of the Pathology specialties

These should certainly be included in your applications for specialty training in pathology so that recruitment panels can take these into account.

Professor Shelley Heard

If you are abroad and can't shadow or have a taster day, is this a disadvantage?

As long as you can show knowledge of what the speciality and training entails, and plenty of enthusiasm, this will not be held against you. You can also refer to having attended this event and watched the relevant video presentations.

Dr Angharad Davies

Research and medical education in pathology

For ID micro/virol training - are there opportunities to do lots of research even if you don't go through the ACF/clinical lectureship pathway?

Yes! Research is part of the curriculum and all trainees need to be research aware. There are lots of opportunities to publish case reports and small research projects you have led on alongside your normal clinical job, and get involved in clinical trials as an investigator. In the North East we offer a Specialty Research module to some trainees to be paired with a clinical research PI for 12 months and focus on clinical trials more intensively. If you're really interested you might choose to take time out of programme (OOPR) and do an additional degree. There are lots of options.

Dr Ali Robb & Dr Ian Blythe

How suitable is histopathology to get involved in genomic medicine/bioinformatics research? Or are other specialties more suited for it? Thinking about doing mostly research and some clinical practice. Very suitable! I can speak from personal experience! I am a histopathology trainee and I am doing a PhD which is centred on genomics and bioinformatics. The advent of molecular pathology has meant that bioinformatics is going to be very much a part of histopathology and there are numerous research opportunities available in relation to these subjects. I would strongly urge you to get involved! It can be quite difficult at times and challenging but is great fun and has so many learning opportunities.

Dr Matt Clarke

Are there any particular master's courses that you found helpful with your careers?

I did a part-time master's course in Medical Microbiology at the Queen Mary University of London,



whilst undertaking my specialist training. The course was geared towards clinical microbiologists working towards the RCPATH examinations and it was excellent preparation. It was also a great way to get to know trainees from other training schemes. If you can find a master's course relevant to your discipline, and the time to attend, then it can be a very helpful way of focusing your learning. On the down-side, it involved a lot of assessments and exams over the two years, which were additional to my RCPATH preparations, so it did add to my workload during that period. You would also need to explore funding options.

Dr Angharad Davies

I would really like a role in medical education but was wondering whether you think it's important to get involved in research if you want to make education a big part of your career?

This is not needed if you want to be involved in medical education. There are huge teaching opportunities available outside of research in pathology. You can teach medical students, science students, junior doctors, school/college students and the general public etc. If you do get involved in research, there will be lots of teaching opportunities here too. I did a huge amount of teaching before I even entered academic pathology.

Dr Matt Clarke

I'm starting ST1 post in Histopathology but I am worried about keeping up with my interest in Medical education, in particular undergraduate side, mainly due to similar working times. Any tips how to get involved with Med Ed as Histopathology trainee?

I would definitely encourage you to carry on with this, and I think most medical schools would be very keen on having you involved with the pathology education of their undergraduates. Locally in Yorkshire all trainees are involved with the pathology modules at University of Leeds and trainees have also got involved with some of the other universities here too. Obviously getting involved in things like this can take time

outside your usual day to prepare etc, but it sounds like you're happy to do this. In terms of the clash of

working times this would mean negotiating locally, but I don't anticipate that anyone would discourage you if it's not taking too much time out of the programme. It is a question for your local supervisors when you start.

Dr Katie Allen

Does a career in pathology work well with a career in medical education?

Absolutely! There are opportunities for developing your career in medical education in most specialties, but through the Royal College of Pathologists and Deaneries, there are many opportunities to do curricula development work, assessment, strategic educational development for pathology, etc. Some trainees are also able to undertake a postgraduate qualification in medical education during their training.

Professor Shelley Heard

Regional

I am hoping to return to Wales for Histopathology training - what is the deanery like for histo training and which hospitals would you be based at during training?

I have never worked in Wales before so it is difficult to answer this for you. All deaneries will be well equipped for training histopathology. Some hospitals may not have exposure to certain sub-specialties so you may have to move around to a different hospital for this experience but the training programme director will be able to inform you of this and they will provision for this in your

training. The progression to digital pathology will also prevent trainees having to move around as much too. If you want some specific advice about Wales, I would recommend getting in touch with Dr Esther Youd, Assistant-Registrar of RCPATH. She is based in Wales and will be more than happy to advise you further. Her contact details can be found on the RCPATH website.

Dr Matt Clarke

Specialty – cellular pathology

What are the roles and responsibilities of Histopathologist?

I definitely can't answer this any better than the great RCPATH page on this subject. The link is here and it summarises it perfectly. <https://www.rcpath.org/discover-pathology/news/fact-sheets/histopathology.html>

Dr Katie Allen

Do you have any opportunities to get involved in dermatology related pathology?

Lots of opportunity! A massive proportion of specimens that come into the histopathology lab are from dermatology. If you have a particular interest then it's a good idea to get in touch with a local dermatopathologist, and also see if there are any teaching sessions locally for dermatology trainees in pathology as they have to learn some histopathology as part of their training. As a foundation trainee, coming along to such a teaching session would be a great introduction to dermatopathology and also to see clinicopathological correlation in action. I am aware that some dermatopathologist consultants have spent time out of programme during their training to do some clinical dermatology, so this is also a possibility.

Dr Katie Allen

With regards to histopathology, how do you see the profession changing in the future with developments in artificial intelligence and new technologies for reading slides? Will artificial intelligence allow a shift in histopathologists from working at the microscope to more research oriented work? What impacts would new technologies have on the profession for those thinking to go into training now?

Thanks for your time.

I was involved in the publication of a 'Future of pathology' report which you might be interested to read as a lot of your questions were addressed as part of this: <https://www.rcpath.org/discover-pathology/news/the-future-of-pathology-report.html>

The use of AI will be extremely useful in helping research progression and will hopefully allow a more objective way of interpreting investigations such as immunohistochemistry. It will also feature in clinical practice too, not just research.

What are the responsibilities of the Histopathologist in patient care?

Although histopathologists don't see patients face to face very much, they have huge responsibilities in patient care. It is the histopathologist who actually makes the diagnosis for the patient; the surgeon or physician may communicate the result back to the patient but it is the pathologist who makes the decision about what the diagnosis is and the subsequent management. The decisions can be quite challenging – benign versus malignant – and may require a lot of other investigations to be made before a diagnosis can be made. Pathologists also feature in the MDT discussions and so are a crucial part of the team in helping to make a decision regarding the next steps for the patient.

Dr Matt Clarke

For someone entering the profession at this time, it is an extremely exciting time! Many worry that AI etc. will replace pathologists

Far from it! It will only enhance what we do! AI combined with the advances in molecular pathology make it a very exciting time to be a trainee. It is a constantly changing and progressing specialty which is great to be a part of.

Dr Matt Clarke

Why should histopathologist be doctors? and what are the roles of biomedical scientists in histopathology?

Histopathologists are doctors because the clinical experience is so important for a pathologist. We have to make decisions and diagnoses based on a lot of clinical knowledge, not just based on what is on the microscope slide. Our medical experience also helps us to appreciate when a sample is urgent and even when we might need to phone the consultant surgeon or medic to personally tell them what we have found. Also, sometimes we need to look at radiology, blood results etc. which can all be useful in helping to make a diagnosis so the background in medicine is hugely valuable.

However, we couldn't do what we do without biomedical scientists! They are SO important! They help with specimen preparation in the lab and some even undertake the specimen cut-up themselves. They also prepare the slides, and do the special stains that are requested, and even undertake molecular investigations. Training programmes also exist to teach them how to histologically report particular specialty cases such as cervical cytology, gastrointestinal or gynaecological pathology so there are opportunities for them to report cases independently if they pass all the exams and training. This will help the workforce issues that pathology faces in the future.

Dr Matt Clarke

How to prioritise tasks in a busy in day in histopathology?

As in any specialty in medicine/surgery etc the best way to prioritise tasks is by patient need. To a certain extent your day will be structured anyway, for example a scheduled cut up time in the lab, MDT, time in the mortuary etc. In terms of cases then anything coming in as a frozen section from theatre would be an urgent priority. Then any results that are urgently needed by clinicians to change management plans are the priority, many of these specimens are marked urgent anyway, and you can be sure that if a clinician is after a result urgently then they will chase you with a phone call. Any cases needed for an upcoming MDT will also need to be prioritized. As a trainee you are an additional step in the chain of getting a specimen from reception to a report, and it is important that you take into account when you can get your reports checked by a consultant in good time before the result is needed. Some centres will allocate cases to trainees, and some will work with a case pool system, and some with both. A pool system can allow you to control your workload to what you can manage, for example taking a few cases for the morning, getting through them and then collecting more for the afternoon when you know you have the time to look at them. If you're allocated cases then you can always ask supervisors to adjust the workload if you need more or less cases.

Dr Katie Allen

What is the impact of histopathology errors on patient and staff?

Errors and mistakes in pathology can be significant across all pathology specialties – it could be the wrong diagnosis or some other aspect; cancer when in fact there isn't cancer, or the other way around/incorrect blood culture results/patient samples mislabelled or swapped. As you can imagine, any one of these could have a significant impact on a patient. Therefore, departments use protocols and procedures and training to minimise the chances of these happening. However, we are all human and mistakes do happen and that is normal. We shouldn't penalise anyone when this does, but we should make sure the whole department learns from them to prevent them from happening again. I did some work on this earlier this year which might be of interest; I was involved with some videos with some TAC colleagues which talk about some of these examples: <https://www.rcpath.org/profession/patient-safety-and-quality-improvement/patient-safety.html>

Dr Matt Clarke

How important is teamwork in histopathology?

Really important. We work together with scientists, lab assistants, secretaries, our own specialty colleagues and colleagues in other specialties within the multidisciplinary team. Having a good team working ethic with all of these team members is best for the patient as it gets them the best outcome, it also makes for a really pleasant working environment, and I am lucky to have worked with some really great colleagues.

Dr Katie Allen

Specialty – forensic pathology

I have interest in forensic pathology, how common is this sub-speciality?

A lot of histopathology trainees have come into the specialty as they are interested in doing forensic pathology. Although it is the specialty which is probably the most publicly known, it is actually one of the smallest. There are very few training posts across the UK (perhaps only 8?) and you have to wait for one trainee to finish before you can apply to enter one. You have to do two years of general histopathology training first, and pass the FRCPath part 1 exam before you can apply and enter a forensic pathology post. Most trainees enjoy histopathology and decide to stick with it. There is a large amount of autopsy training in histopathology with some quite complex cases which suits a lot of interest.

Dr Matt Clarke

Specialty – immunology

Q for Shuayb RE immunology training - because it's a smaller specialty (as far as I'm aware), how can you show interest other than taster weeks (based on the assumption these are harder to find?)

Thanks for the question. Immunology taster weeks/days are not hard to find at all; most of the immunology centres would be more than happy to accommodate junior doctors; however, all arrangements might have been changed now during COVID-19.

Other ways to show interest and commitment to specialty would include:

- Mini-projects: such as audits and quality improvement projects – there are plenty of opportunities to set up an audit in the immunology lab and/or clinical immunology and allergy activities

- Case reports/presentations: there are few national and international immunology and allergy conferences that you can attend (with sponsorship if you have a poster) so you can present case reports etc.
- Publications: many immunology centres would have work need writing up to get it published; however, require time investment

Useful websites to visit for more
info: BSACI <http://www.bsaci.org/>
BSI <https://www.immunology.org/>

RCPATH <http://www.rcpath.org/>
UKPIN <http://www.ukpin.org.uk/home/>
JRCPTB <http://www.jrcptb.org.uk/Pages/homepage.aspx>

Happy to discuss further if required – please drop me an email on: Shuayb.elkhalifa@srft.nhs.uk
Dr Shuayb Elkhalifa

Specialty – infection

Aside from the increase in workload, how will the infectious disease speciality be altered in the future as a result of the COVID pandemic?

I think the pandemic will affect all of medicine for a long time to come and we will need to rethink how we do many things. The role of infection prevention and control, and in testing (and understanding what the tests mean) will be pivotal to that work. We have learnt a great deal about emerging infections this year which will be invaluable in the future as the potential for new emerging infections will always remain.

Dr Ali Robb & Dr Ian Blythe

What opportunities are there to develop your CV and gain experience (particularly for MM) abroad, working or doing aid work, in developing countries?

There are lots of opportunities to do this and several of our trainees have taken time out of programme (OOPE) to gain experience in other countries. All OOP requests need to be discussed with your TPD but it is likely they will be looked on favourably if they are of educational benefit to your training.

Dr Ali Robb & Dr Ian Blythe

Specialty – Molecular Pathology

What are the requirements for applying for molecular pathology?

There is not a specific specialty training programme in molecular pathology but you can undertake molecular pathology training as part of a histopathology training programme.

Dr Matt Clarke

General

Did you always want to be a pathologist in medical school and what made you choose it for a career?

As I think I (unfortunately) alluded to in the live Q&A I always wanted to be a pathologist. It stemmed from wanting to be a forensic pathologist as a teenager. I did my research about careers, and then did work experience both in GP and hospital medicine pre-medschool. During

medschool I did an elective in forensic pathology, which I loved. I went on to do taster weeks in FY1 as I didn't get the FY1 job of my choice that would have contained a histopathology rotation. I went off-piste completely in my FY2, after enjoying couple of surgical rotations, and ended up gaining a CT job in surgery. I almost immediately regretted my decision, and made contact with the local histopathology department who let me do another taster, and set me up with an audit project. This meant by the time I got to interview I had older and more recent evidence of commitment to specialty.

I chose it as a career because I find it fascinating. I love the problem-solving, and really enjoy putting all the aspects of a puzzle (macro, micro, molecular testing etc) together to come up with an answer for the patient that then informs their future management. I find it very rewarding, for example in autopsy work, being able to give an answer and closure to a family about why their loved one died so suddenly/unexpectedly. I like having the opportunity to spend time doing extra projects and research, which fits in well with histopathology as a career. As a bonus, I have had a family during training, and training fits well with my family life.

Dr Katie Allen

Do you miss being directly in contact with patients and talking to them?

I didn't enter pathology because I don't enjoy speaking and interacting with patients (this is a common myth). So yes, I do miss it. Some pathologists take their own fine needle aspiration samples for cytology themselves. However, there is a lot of desire for pathologists to have more contact with patients and I foresee pathologists potentially holding clinics alongside surgeons to show patients their slides and help them to understand their pathology in the future. Also, if you undertake the medical examiner training (which is being led by the RCPATH) then you will be in regular contact with patient families talking to them about the care their relative received and reviewing the patient notes.

Dr Matt Clarke

I frequently have people saying "but you're good at talking to/managing patients" or "but you're a good FY1" on finding out my career intentions. How do you/how did you tend to respond to people reinforcing these stereotypes but also how do you approach the question of "won't you miss patient contact?"

Many pathology specialties require patient contact as well as a presence in the laboratory; chemical pathology, medical microbiology, virology, haematology and immunology for example. Even for cellular pathologists, who traditionally have much less patient contact, communication is a key skill as they will often lead Multidisciplinary meetings (MDTs) to discuss the diagnosis and treatment of patients as part of a wider clinical team.

Professor Shelley Heard

What are the main causes of errors and what is the approach to managing errors?

There are laboratory errors and clinical errors. The labs have clear protocols to be followed and which are designed to limit potential errors. Clinical errors need to be recognised as soon as possible. The most important thing is to identify both lab and clinical errors as soon as possible and to report and discuss these with seniors.

Professor Shelley Heard

Is digital pathology now widely used throughout the NHS?

A lot of departments are now moving to digital formats for reporting. Some (such as Leeds) are now almost entirely reporting digitally. All departments will eventually move to this but, as expected, it will take some

time for all the logistics to be sorted out. Digital reporting will make the process so much quicker and may allow some working from home!

Dr Matt Clarke

How to deal with colleague's absence and high workload in the department?

Good teamwork is always going to be key in a situation where workload has significantly increased. If you feel as a trainee that you are struggling with your workload the first step would be to raise it with your clinical supervisor and they can help out and advise you. Asking for help when you feel you need it is very important and is actively encouraged in pathology – looking after your well-being as both a trainee and consultant is essential for the effective running of a department. And this applies to all issues that may be affecting you in your training or working life – which will likely happen to everyone at some point.

Communicating any concerns you have to your supervisor is a good starting point. Help is always available if you need it.

Dr Katie Allen & Dr Matt Clarke

What's your most and least favourite thing about being a pathologist?

Diagnostic work is very analytical in nature and I love that. I also find that my colleagues are usually very pleasant and considerate. Something to be aware of about pathology disciplines as a consultant, if you work outside a teaching hospital, is that you may not have any juniors or trainees, making being first on-call the norm.

Dr Angharad Davies

Teams and team work are important, how does teams fiction to achieve their target?

As immunology trainee; you can feel lonely sometimes; because you might be the only immunology trainee in the region; however, we have various national/regional networks for immunology trainees; they get together virtually for many activities.

All our activities/ decisions etc get achieved via multidisciplinary team. Immunology and allergy services are very small departments; hence we all work as a team to achieve all our targets – e.g. accreditations for clinical activities (QPIDS & IQAS) for the lab (UKAS) etc.

We have also very complex patients; so lots of decisions can't be achieved without multidisciplinary approach. Happy to discuss further if required – please drop me an email on:

Shuayb.elkhalifa@srft.nhs.uk **Dr Shuayb Elkhalfifa**

What is the pathway to becoming a medical coroner?

This was always something I was interested in too! However, unfortunately you can no longer become a coroner through the medical route. You have to have a law degree and law experience to do this now. However, there has been the recent development of the medical examiner system which is very similar and you work very closely with the coroner and officers to review cases. The training for this is being led by the RCPATH so I would urge you to have a look at this and maybe do it when you are approaching the end of your training.

Dr Matt Clarke

How transferrable is the pathology training when moving abroad, e.g. to Canada?

You will need to find this out by investigating the requirements of the country to which you are considering re-locating.

Professor Shelley Heard