

Interview with Our New Editorial Board Member

Dr Kelvin Goh Tze Chien

Interviewed by Dr Wilson Eu, Editor

CM: Tell us something about yourself. What was your journey as a doctor? What influenced you to become a Family Physician?

Dr Goh: As a student my favourite postings were the medical postings as i enjoyed the intellectual challenge of internal medicine, back then i was my clinical group's resident "mugger". After my first MO posting in emergency medicine, I was inspired had wanted to pursue Emergency medicine as a career . So I took the MRCS part 1 exams during my first posting, followed by the Part 2 six months later. After that out of sheer fun I took the MRCP part 1 as I was not eligible to take the FRCS(AnE) then. During my surgical postings i became interested in surgery, this culminated in myself taking the MRCS(edin) membership exams 3 years back. After I passed the exams I was confused. There was a period of soul searching after that. This included the thought to complete both the MCRP and FRCS(A&E) That was when i realised that I thoroughly enjoyed everything that medicine had to offer from surgery to psychiatry, that my true calling was probably family medicine.

CM: Are there any significant role models that have made an impacted on your life as a doctor?

Dr Goh: Prof Ng Han Seong was our tutor his superb clinical acumen and encyclopedic knowledge still sets the gold standard of what a great clinician is. A/Prof Low Cheng

Hock's advice that the best way to spent your free time is to contribute and help others in whatever little way we can.

CM: Which aspect of your current FM practice do you cherish most?

Dr Goh: The unique bond that we share with our patient. To walk the path of life together with them. Last Christmas it really warms my heart when a patient came down to the clinic to give us a log cake. One of the more memorable was a patient whom I met when I had just started practice, he has seen relocated overseas. He sent me a personal email with pictures of his newborn child. The birth of this child meant a lot to him for personal reasons which I shall not elaborate. Moments like these make me feel alive as a doctor.



Dr Kelvin Goh and son

CM: If there is one thing you want to change in family medicine, what would it be?

Dr Goh: Our image. Some members of the public still view us as cough and cold physicians or as administrators to write memo to see specialists so as to qualify for insurance benefits or government subsidies. There are patients that still ask us questions such as, "Do you vaccinate children? Do you see children below 2years? You mean you can do T & S in the clinic? My son got flexural eczema please refer him to the specialist? Some patients would pay thousands to salons

for treatment of androgenic alopecia but cringe at a \$15 consult to the family physician for androgenic alopecia.

CM: What are your views towards continuing professional development in FM?

Dr Goh: I am very junior so I don't feel qualified to answer this. While I feel that it is crucial for us to have continuing professional development to lift the profession to the next level and improve patient outcomes. There are some very good doctors that I know who do not have many post graduate qualifications to their name. A doctor who continues to develop himself professionally without having a paper trail (i.e. non-CME certified articles or books) is disadvantaged if we place too much emphasis on approved online assessments, courses and exams. Unfortunately there is currently no consensus on a better way to perform or assess CMEs.

There are also many very successful and popular senior GPs with a wealth of experience. I am sure that there are a lot we can learn from them. However many of them are too busy to come forward to share their experiences with us. It would be interesting to have CMEs chaired by them.

CM: What is your view of the current General Practice landscape?

Dr Goh: I can only give my view as a private practitioner. One word - challenging. HDB has stopped selling shop houses. Currently most shop units are for rent. In the new estates many shop units in

satellite malls are easily 5 figures per month rental. Cost of drugs and labour are ever increasing. The changes in regulatory landscape, increasing patient expectations, electronic medical records and the increasing number of forms to fill serve to compound the problem.

However we are at an inflexion point. A shift in focus to SLOW medicine and primary care by the government may herald a golden age for family physicians. Whereby patient satisfactions are high and doctor's are appropriately rewarded for their skills and knowledge.

Depending on how we as a profession respond and engage the government, the golden age may very well be descending upon us. Well as they always say the devil is in the details.

CM: What needs to be done to keep the College Mirror relevant to its readers?

Dr Goh: The College Mirror needs to mirror the views of both the private and public family physicians on the ground to remain relevant. This includes many family practitioners who are not college members. Only by engaging its members effectively can the Mirror be better able to serve their needs.

CM: Thank you, Dr Goh.

Dr Kelvin Goh Tze Chien, MBBS (Singapore), MRCS (Edinburgh), is a practicing Family Physician and Director of NorthEast Medical Group at 30 Simei Street.

■ CM

Invitation to Contribute to "DOCTORS IN PRACTICE"

Dear Colleagues,

DOCTORS IN PRACTICE is a regular feature of The College Mirror. Each issue showcases the personal experiences of a Family Physician/ General Practitioner at work which are inspiring and instructive. If you do have such a story to share, please send your submission in less than 1000 words to the College at the given address. You will receive a token of appreciation from the College if your story is published. Thank you. ■ CM

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(All submissions will be the property of The College Mirror.)