

The Journey Towards the MMed(FM) & Fellowship

The College Mirror had the privilege to speak to recent graduands of MMed(FM) and Fellowship. We hear the ups and downs they had to face while these graduands juggled their time among work, studies and family - and hopefully inspire current trainees through their journeys!

College Mirror (CM):

What have you all learnt or benefited from completing the [MMed(FM)] training?

SingHealth FM Resident, Dr Navpreet Kaur (NK):

Family Medicine Residency in summary was an exhausting yet exhilarating roller coaster. Steep learning curves and changing rotations just as soon as you had gotten used to the environment became a norm for us residents. By going through such a wide variety of rotations that would have taken us years to cover independently, Residency has equipped us with sufficient knowledge and grasp of common problems that we encounter in our daily lives to assist with managing and counselling our patients for the next step of treatment.

NUP FM Resident, Dr Joanne Khor (JK):

The Family Medicine residency provided 3 solid years of at least 17 major rotations. While the adjustment to each new posting was often challenging, the frequent 1- to 3-monthly changes forced us to be adaptable and versatile - a important trait of a good family physician. Having gone through many postings also meant working with and getting to know many people across disciplines. Even after residency is over, I still text the friends

I've made (who are now at least registrars in their fields) when I need help. Conversely, they also text me if they need to ask about things in primary care.

MMed(FM) College Programme Graduand, Dr Natasha Leng (NL):

Throughout my learning journey, I've learnt not to give up and to persevere. I'm glad to have stuck through with it as it has improved my knowledge and skills so I am better equipped to treat patients holistically.

MMed(FM) College Programme Graduand, Dr Chua Lee Lea Im (CLLI):

Having left hospital practice since 2009, enrolling in the College Programme availed me the chance to extend my hospital exposure. It also introduced me to the new fields of adolescent and sports medicine, as well as provided a chance to obtain the latest local updates from infectious disease, emergency medicine and various other specialties. Not only did the course widen my horizon when I am faced with a patient with multiple problems, it also taught me communication skills to delve deeper into each of them.

CM:

What were the challenges faced in the examination preparations? How did you overcome them?

NK:

Preparing for examinations involved a lot of determination and resilience as all the residents were working full time. Whilst we tried our best to use whatever sufficient time we had after work hours to revise or go to the hospitals to examine patients, the feeling of not having done enough never seemed to disappear due to the vast breadth of knowledge required in Family Medicine. Having a supportive study group was one of the best parts of the whole process as we were able to push each other along through the different phases.

JK:

Family Medicine is comprehensive, hence the examinable topics are very comprehensive as well. The study masterplan I drew up was 13 daunting pages long! The sheer amount of content to cover was the biggest challenge in itself.

Exam preparation also required good time and energy management. Closer the exams, my batchmates and I spent at least 3 evenings a week sparring with each other and being brutal with our mutual feedback. The rest of the evenings were spent consolidating our knowledge and mugging guidelines. It was both physically and mentally tiring but it helped that we knew we weren't going through it alone.

NL:

Life definitely had some challenges for me. I got pregnant during the College Programme

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training, which was a nice surprise. The pregnancy was an extra ball to juggle amidst the coursework, full-time job and family. And it was manageable, even after giving birth to my second child, and I was on course towards the first part of examinations, the MCQ.

Then two weeks before the MCQ, my 3-week-old son was admitted for viral meningitis. It was a terrifying experience, and I was filled with constant fear for my son. So, my first shot at the MCQ did not pan out.

I was determined to give it another go. As my 2nd attempt at MCQ approached, several challenges presented themselves. First and worst was that my father was diagnosed with cancer. I had to make the necessary arrangements for his care and treatment in Malaysia. Secondly, my mother who had been helping me to look after my kids decided to return home, so there was a bit of a scramble to find a helper. During this time we had bought a new home to renovate and move into. My 2nd attempt at the MCQ was not to be.

The second failure made a serious dent in my confidence, far more than the first. Should I really commit to another attempt, potentially waste another year of my life in pursuit of this goal? More time spent away from the children? After much introspection and encouragement from family, friends, colleagues, previous batch mates and support from the institution I decided to go for it.

With the Programme C training, practice sessions in

clinic arranged by my boss and additional daily practice with colleagues plus 110% support from my dearest husband and family, I finally made it.

CLLI:

The scope of family medicine is extremely broad, therefore the task of preparing for an examination with such an extensive scope was daunting. I also had difficulties obtaining time off from my small set-up practice due to the relatively small manpower pool and having to attend urgent administrative matters which tends to crop up at the most inconvenient times. Not only was revising on the job tough, I could not attend some of the courses. Thankfully, I managed to get some of my specialist friends' help after work hours.

CM:

What do you think has been done well and which areas of the programme could be enhanced?

NK:

Singhealth Family Medicine Residency organized sessions to help to target areas that graduating residents had given feedback about. Sessions ranging from lectures to a small group examination session to mock VIVA sessions helped us to prepare for the big day. Constructive feedback from seniors pushed us past our boundaries and encouraged us to think differently. Our individual Polyclinics, Marine Parade Polyclinic for myself, gave us endless support during this time. Our colleagues and seniors at work not just supported us by providing extra sessions out of office hours to equip us with



Dr Navpreet Kaur with her fellow coursemates

the appropriate examination techniques but also managed the load of patients in our absence. We have a lot to thank for the amazing Family and Resident Physicians at Marine Parade Polyclinic. The only way to further enhance the programme would be to organize even more teaching sessions to continuously pull us out of our comfort zones.

CLLI:

The camaraderie between senior tutors and current year entrants, was palpable throughout the course. I am deeply grateful for the dedication they showed to helping us. Hopefully this tradition will stand the test of time.

As for suggested enhancement, an official online depository of

course materials, such as video demonstrations will be helpful.

CM:

Could you share some advice for the next batch of trainees?

NK:

Residency and preparation for the examination is a challenging experience that will stress you emotionally and physically. It is important to have a good support group within residency itself as well as outside to help motivate you during this journey. Throughout this period always remember that all these sacrifices are worth it when you are able to apply the knowledge gained to help your patients through their tough times. Cherish every moment- good and bad as it has gotten you to where you are today!

confident you will appear to be in your history taking, physical exam and patient education, even under exam stress.

Exams are important, but not everything. As you study how to better care for patients, remember to take care of yourself. Remember your calling, make time for friends and family, and don't lose sight of the bigger picture.

NL:

Practice and perseverance is the key. Putting in the time and effort will be what gets you through. If life knocks you down, pick yourself up and get back into the thick of it. Convert your negativity from past failures into a positive drive to succeed.

CLLI:

The breadth of the examinable material makes it nigh impossible to cover on your own. Thus, it is of paramount importance to form study groups. Preferably, this should be done with people from different institutions. I would also recommend simulating examination conditions in your daily practice. For example, practicing full physical examinations and consultations within the stipulated examination time limit on at least one of your patients each day so as to develop good habits. Habits prevail over stratagems!



Dr Natasha Leng Third Time's the Charm

Dr Chua Lee Lea I'm with friends and colleagues

NL:

The support from the previous batch mates, additional training, tutorials and practice sessions definitely helped.

Dr Joanne Khor with NUHS Residents and Faculty



JK:

Use your daily work as practice for the exams. During my RCC sessions in residency and daily polyclinic work after residency, I would choose 1-2 cases a day to simulate an exam case, complete with a stopwatch discreetly hidden behind the computer monitor. I would then review the cases after the day's work and reflect on how I could have done better.

Start early. As mentioned, there is a lot to cover. The more times you practise the approach to a condition, the more second-nature it becomes, and the more

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Dr Tan Wei Beng:
A general practitioner in UK to a
family physician in Singapore



Through a series of domestic events, it is interesting to see how I, once a general practitioner (GP) in UK, would become a family physician (FP) in Singapore complete with an MMed in Family Medicine.

Professional development is an ever evolving, a process which is vital to meet the changing patient needs from cradle to grave. In the UK, the qualification of MRCGP (Membership of Royal College of General Practitioner) has transformed quite extensively since I completed it a few years ago. MRCGP was once acquired on an adhoc basis reflecting any individual GP's interest to pursue further in General Practice; it has now become a compulsory qualifying exit examination in order to become a registered GP in UK. In Singapore, though not strictly required for practice in family medicine, it has also evolved to its current state, where MMed in Family medicine or GDFM are required to become a registered FP. Both the Royal College of General Practitioners (RCGP) and College of Family Physicians Singapore (CFPS) require continuous pedagogic summative and formative assessments, whereby the candidates, all

adult learners, are supervised with guidance by the programme directors and tutors. On a personal level, from being a GP registrar trainer before, I had become a MMed trainee again! In many ways, the course has enhanced and sharpened my clinical knowledge and skills, very relevant in my day-to-day clinical practice. Especially having worked in UK, the course has provided me an in-depth study, specialised in Family Medicine in Singapore.

Truly, adult learning is a lifelong journey.

“Every great dream begins with a dreamer. Always remember, you have within you the strength, the patience, and the passion to reach for the stars to change the world.” – Harriet Tubman

“Only those who will risk going too far can possibly find out how far one can go.” – T. S. Eliot

MMed in Family Medicine is not an easy course to pursue, especially for those who have many other commitments, however it is achievable if the candidates maintain the commitment and perseverance in learning, as well as building up that fundamental inner passion for Family Medicine.

Be encouraged, you can do it! “

Dr Patricia Chia:

In 2015, I was PGY13 and it was my 6th year working in the polyclinic. My son was just 1-year-old then. I wanted to progress further in my career as a family physician and provide more for my family, so I enrolled in the Family Medicine Masters Programme (College Programme). Little did I know that I would be facing multiple challenges before I was finally able to achieve my goal.

Two months after the course began, my 1st hurdle presented itself. I found myself pregnant, with twins!

Morning sickness, full time work, attending tutorials and clinical teachings in various hospitals, preparing the course work, whilst still having to look after a toddler took its toll on me. It was all too overwhelming. I wanted to stop pursuing this goal but life would just get tougher after delivery, hence I continued.



Things improved by mid-2nd trimester. Second hurdle came after delivery. I had a large bleed which required transfusions. It was very exhausting and painful with the sub-rectus sheath bleeding; it was very depressing and I so wanted to throw in the towel. Thankfully, my husband, parents and in-laws rallied around and helped me through this tough period. After 2 months, the dust settled, my mood improved, and studying resumed during my maternity leave. I managed to clear the MCQ in my first attempt. However, I only managed to clear the clinicals 2 years later.

Preparation needed for the clinicals were very different from the MCQ. Lots of practice using sample of clinical cases during the pockets of time that I had every day were very important, with studying done after the children had gone to bed. Being focused and organised with good time management (especially when life was chaotic!), and

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being able to multitask was the way to success. Constant encouragement and support from peers and family were invaluable when having so many stresses in life, and with having experienced failure twice. The programme by CFPS is a guideline, but for candidates who has multiple stresses in

life, help from colleagues with similar experiences would be useful. I have reached my goal and the journey has not only improved my medical knowledge but also taught me crucial coping and management skills in stressful situations.

Dr Xu Bangyu:
The Fellowship Journey -
Blossoming to become the
"Iron Flower"

College Mirror (CM):

Congratulations on your examination success. What have you learnt or benefitted from completing the Fellowship training?

Dr Xu Bangyu (XBY):

The completion of the Fellowship programme has broadened my roles as a Family Physician. The programme is designed to prepare the trainee to embrace the following essential roles of a Family Physician: Family Medicine Expert, Communicator, Collaborator, Manager, Health advocate, Scholar and Professional. Indeed as one progresses through the programme, the dormant seeds of these roles slowly start to germinate and eventually blossom to become the "Iron Flower".

CM:

What were the challenges you faced in the examination preparations? How did you overcome them?

XBY:

Notice that I used the term "Iron Flower" to describe the outcome. The Fellowship programme is definitely not a walk-in-park experience, in contrary to what many would think. This journey has many on-going parallel routes that one has



to endeavor. In addition to one's own sphere of clinical experience and practice, there are various platforms of learning one has to undergo as well. These includes didactic lectures, small group discussions, workshops and seminars.

Doing a systematic review and conducting a research project is one of the most alien experience for myself due to my lack of experience in this field and not forgetting the alien language of statistical analysis!

Yet somehow I managed to pull through this arduous journey. I would not have achieved this without the support of many people: my wife and daughter, my fellowship comrades, my workplace bosses especially Dr Luke Low, my various supervisors and many more. Most importantly, the resilience inside me never faltered: once a goal is set, keep moving forward and never stop until you reach the goal, no matter how tough the journey will be.

CM:

Can you share some advice for the new trainees?

XBY:

The need to build resilience for this journey. This journey will be tough with many obstacles to overcome, self-sacrifices and moments where one would feel like throwing in the towel. One who keeps moving forward and never stop until one reaches the goal will be the one to blossom into the "Iron Flower".

■ CM

Use of codeine-containing cough medications in children

by Adj Asst Prof Tan Tze Lee, President, 26th Council, College of Family Physicians Singapore
A/Prof Ng Kee Chong, College of Paediatrics and Child Health, Singapore

Over the years, we have had instances of young children being prescribed codeine-containing cough mixtures. One case hit the news in 2017, when a 14-month-old child was alleged dispensed Fedac syrup, with instructions to take 10ml of the medicine three times a day.

In general, cough and cold preparations have not been shown to be efficacious for its intended use and side effects have occurred, especially for the very young. In October 2007, the Singapore Health Sciences Authority (HSA) in its letter to healthcare professionals made interim recommendations to restrict the use of these products in those below 2 years of age.