

# *Postgraduate Education*

## THE CONTINUING EDUCATION OF GENERAL PRACTITIONERS

### An Analysis of Replies to a Questionary from the Postgraduate Education Committee of Council

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#### GENERAL-PRACTITIONER HOSPITAL SERVICE (Section IX)

##### *Use of hospital beds*

Of 1,638 members, 449 (27.5 per cent) had the use of general-practitioner beds in hospital, and of those who had not, 73 per cent wished for such beds. It was not possible to form an idea of the number of beds available to each doctor, as some gave the total number of beds in the hospital, others the number each was able to use during a year, and so on, so that the figures were not comparable.

##### *Type of hospital available to general practitioners*

Most of the beds were in cottage hospitals (179 doctors) and general-practitioner hospitals (98). 75 members had the use of beds in maternity hospitals, and another 23 in "cottage-obstetric" and "general-practitioner maternity" hospitals. Fifty-one had beds in general hospitals, and nine in geriatric ones. A few members had beds in private, local subsidiary, acute surgical, fever, "incurables," and regional board adopted hospitals.

1,119 members said that they had access to nursing homes.

#### HOSPITAL SESSIONAL WORK (Section X)

378 members (22 per cent of those replying to the questionnaire) said that they did this kind of work.

163 worked at general hospitals  
43 worked at cottage hospitals  
30 worked at general-practitioner hospitals  
23 worked at chronic sick hospitals  
18 worked at maternity hospitals  
16 worked at geriatric hospitals

Smaller numbers worked at hospitals specializing in many different branches of medicine.

##### *Number of sessions per week—*

$\frac{1}{2}$ —1 session	137	$4\frac{1}{2}$ —5 sessions	16
$1\frac{1}{2}$ —2 sessions	107	$5\frac{1}{2}$ —6 sessions	11
$2\frac{1}{2}$ —3 sessions	47	$6\frac{1}{2}$ —10 sessions	10
$3\frac{1}{2}$ —4 sessions	21		

In addition, 31 members had less frequent sessions, or worked irregularly as required, or were on call for emergencies.

**Duties—**

105 (27%)	did anaesthetics	
77 (20%)	did surgery—general, operative and outpatients	24
	casualty, general	15
	casualty, emergency rota	15
	orthopaedics, fracture clinic	12
	minor surgery, accidents, emergencies	10
	neurosurgery	1
59 (18%)	did general duties such as medical superintendence	
28 (7%)	did obstetrics and gynaecology—general care	13
	ante-natal clinics	7
	emergencies	4
	gynaecology	4
21 (5.5%)	did ear, nose and throat surgery, outpatient and ward care	13
	outpatients only	7
	emergencies	1
19 (5%)	did general medicine working as physician	
12 (3.2%)	did dermatology	
11 (2.9%)	did geriatrics	
44 (12%)	did miscellaneous work and clinics, including venereal disease, physical medicine, pediatrics, rheumatism, psychiatry, pathology, diabetes, convalescence, radiology, ophthalmology, records and research, neurology, migraine, allergy, tuberculosis, electrocardiology, and family planning.	

In addition, 28 members took out-patients (unspecified) and 8 did "consultative work," while five worked in hospital as relief or locum from time to time.

**Grading**

The replies to this question were rather confusing, as many titles were given for what was probably the same grading, and some gave no reply or did not know, but an approximation has been made.

137 (36%)	Clinical assistant, some unpaid	
81 (21%)	General practitioner—anaesthetist	24
	medical officer	22
	obstetrician	9
	physician	4
	surgeon	2
	unspecified	20
77 (20%)	S.H.M.O. of various kinds	
22 (5%)	Consultant or specialist	

**Desire for hospital sessional work**

Of the 1,254 members who did not do hospital sessional work, 700 (56 per cent) said that their practice would allow time for this work if it were available; and of these 86 per cent would be willing to undertake it.

**Comment**

It was not possible to draw any definite conclusion about the number of hospital beds available to the general practitioners answering the questionnaire, except that those who would have liked

the use of such beds were greatly in excess of those who had it. Most of the beds were in general-practitioner hospitals of various kinds, but quite a number of members had access to beds in general and other hospitals.

Roughly one in five of the members replying to the Questionary did some kind of work in hospital, which shows that the general practitioner is by no means excluded from this work. Much of the work was done at general hospitals, and although the majority of the doctors did between one-half and two sessions a week, many spent much more time in hospital.

The work done by general practitioners in hospital covered a wide field, and showed that at least some members were able to exercise their particular skill in many specialities. The most popular work was anaesthetics, followed by surgery. It is perhaps surprising that so many general practitioners still do surgical work in hospital—nearly three times as many as those who do obstetrics. Many more, of course, would like to be able to practise obstetrics in hospital, as has been noted before, in other sections of the questionnaire.

The replies to this section show that, while a considerable number of members are able to work in hospital at a wide variety of subjects, very many more would like to be able to follow their example.

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Previous reports on the continuing education of general practitioners based on an analysis of replies to a questionnaire from the Postgraduate Education Committee of Council have appeared in *Research Newsletter*, 1957, 4, p. 151 (No. 1); p. 242 (No. 2); p. 329 (No. 5); and *The Journal of the College of General Practitioners*, 1958, 1, 36 (No. 3); p. 171 (No. 4).

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## THE MEDICAL RECORDING SERVICE

### Listening Circuits

Listeners are divided into "circuits," groups of up to ten members each. Recordings will be sent to the first member of each circuit, who will listen and then send on to the second, and so on, the last man on the circuit returning the recording to Writtle. Each listener will thus only pay for the postage to the next man on his list.

We hope to issue recordings at approximately two-monthly intervals.

### Long-play Disc Listeners

Discs have as yet only been sent to two circuits, as we have been held up by a delay in production of suitable containers, but by the time this note is published, discs should have been dispatched to all circuits. (It will, of course, take several weeks for a recording