POSTGRADUATE TRAINING

A PROTOTYPE TRAINING COURSE FOR GENERAL PRACTICE

The Kent Postgraduate Medical Centre at Canterbury started a twoyear course of vocational training for general practitioners on 14 October 1964.

This course is a new effort to fill a very important gap. No one believes any longer that the undergraduate medical course trains a man to be a general practitioner. Specialists receive 5–15 years further in-service training. General practitioners have only the compulsory pre-registration year, such other house appointments as they may themselves add, and the possibility of one year as a trainee assistant. It has been assumed hitherto that they can pick up the skills of their special role by trial and error. The Nuffield Wessex scheme (two years) is the only other recent attempt to fill the gap.

The Canterbury course is intended for young doctors who have just settled as principals in East Kent (it is not intended for trainee assistants, as they do not usually stay in the same neighbourhood for two years). Ninety-five doctors were circulated with information about the course, all of whom were in their first ten years after qualification. Fourteen doctors started it, but the number has since increased to 15. The attendance at the first six meetings has been 98 per cent.

The course takes place for $2\frac{1}{2}$ hours every Wednesday afternoon—two sessions, divided by tea. Usually, each session starts with an introduction by an invited speaker (sometimes a specialist, sometimes a general practitioner), but the main business is discussion.

The syllabus is designed to offer predominantly those subjects which the young doctor is unlikely to have learnt at his teaching hospital or during house appointments.

The main heads are:

Practice organization	10 per cent (tota	1 12 1	hours)
Social medicine	20 per cent	,,	24	,,
Ethical and medico-legal matters	10 per cent	,,	12	,,
Clinical:				
(a) Psychological and psychosomatic				
medicine	20 per cent	,,	24	,,
(b) General clinical subjects	40 per cent	,,	48	,,
The programme for the first 10 sessions was	s:			

1st Hour		2nd Hour	
14 October	ETHICAL Doctor-Patient Relationships: What are they? Dr Donald Beaugie, general practitioner	SOCIAL The Role of the Family Physician in the Community Dr Ann Cartwright, Research director, the Institute of Community Studies	

1st	Hour

2nd Hour

21 October	CLINICAL (Psychological and psychosomatic) Psychiatric Situations in General Practice Discussion opened by Dr G. P. Hartigan, psychiatrist	CLINICAL (Psychological and psychosomatic) G.P.'s Problems in Dealing with Neurosis and Psychosis Dr John Hambling, psychiatrist, accompanied by members of his seminar
28 October	ORGANIZATION Planning of Premises Dr G. S. Adams, general practitioner	ORGANIZATION Practice Administration Stationery, card indexing, secretary, receptionist, Appointments systems Dr J. D. Wright and Dr Kenneth Lown, general practitioners
4 November	CLINICAL Deformities of the Lower Limbs and Walking Problems in Children Mr F. G. St Clair Strange, orthopaedic surgeon	CLINICAL The Management of the Chronic Neurological Invalid Dr Richard Barter, consult- ant in physical medicine
11 November	CLINICAL The Electrocardiogram Theory and Practice Drs M. H. K. Haggie and J. M. Lipscomb, physicians	CLINICAL The Electrocardiogram Theory and Practice Drs M. H. K. Haggie and J. M. Lipscomb, physicians
18 November	CLINICAL Immunization Dr David Cannon, medical adviser, Wellcome Research Laboratories	CLINICAL Common Infections and Contagious Diseases The G.P.'s Special Respon- sibility Dr P. A. Crowley, M.O.H. for Tunbridge Wells
25 November	CLINICAL (Psychological and Psychosomatic) Psychosomatic Illness from the General Surgeon's Standpoint Mr M. R. Williams, surgeon	CLINICAL The Acute Abdomen at Hospital and at Home (Tape Recording by Mr V. J. Downie, surgeon) Dr R. I. McIntosh, general practitioner, opened the discussion
2 December	SOCIAL MEDICINE The Problem Family Dr K. M. Fraser, psychiatrist	SOCIAL MEDICINE The Old Person in the Family Dr D. O. Davies, general practitioner

2nd Hour

1st Hour

9 December	CLINICAL Low Back Pain Dr Basil Christie, consultant in physical medicine	CLINICAL Back Strain in Miners Dr W. B. Rowntree, Divisional Medical Officer, National Coal Board
16 December	CLINICAL Hypertension Early Diagnosis and Assessment Dr John Glover, physician	CLINICAL The Management of Hypertension in General Practice Dr Leslie Gimson, general practitioner

The course is supported by the British Postgraduate Medical Federation, the College of General Practitioners and the Ministry of Health.

Publications

Copies of the following College publications may be obtained from the Journal Office, Prospect House, Dartmouth.

rom the Journal Office, Prospect House, Dartmout	h.
The Complications of Measles	2s.
Memorandum for the Guidance of Trainers	1s.
Accident Management	6s.
Emotional Disorders in General Practice	3s.
Training for General Practice	2s. 6d.
Nutrition in General Practice	7s. 6d.
Arthritis in General Practice	5s.
Migraine in General Practice	5s.
Mental Health and the Family Doctor	5s.
Rehabilitation	5s.
The Aetiology of Congenital Anomalies	7s. 6d.
Epidemic Winter Vomiting	1s.
Problems of Stress in General Practice	3s. 6d.
Family Doctor and the Care of the Aged	4 s.
An Obstetric Survey	6s.
The First Year of Life	3s.
On Undergraduate Education and the	
General Practitioner	2s.
Forensic Medicine	3s. 6d.
Problems of Sex in General Practice	6s.
The Art and the Science of General Practice	7s. 6d.