INTRODUCTION:
- Sport & Exercise Medicine (SEM) was formally recognised as a medical specialty in the United Kingdom (UK) in 2005. SEM Specialty training rotations were developed soon after and recruitment began in 2007.
- SEM Specialty Registrars (StRs) undergoing higher specialty training complete a 4-year ‘run-through’ training rotation.
- The inaugural batch of ‘run-through’ SEM StRs complete the first training cycle and exit in August 2011.
- Objectives of this study were to determine the long-term career aspirations of SEM trainees in the UK and to evaluate whether current specialty training schemes could be improved upon.

HYPOTHESIS:
- SEM StRs would wish to work in NHS or government-equivalent SEM clinics upon completing training.

METHODS:
- A cross-sectional observational survey of all SEM StRs in training was undertaken in June 2010. Completed surveys were anonymised and data collated by a single researcher.

RESULTS:
- 29 SEM StRs in the UK were surveyed, with a 52% response rate (n=15).
- As their 1st choice, 47% wanted to work in a National Health Service (NHS) sports medicine and injury clinic; 27% wished to work as a national governing body medical officer; 6% as an elite team physician looking after the 1st and reserve team; 6% within the Armed Forces medical units; 6% wanted to work within an exercise medicine clinic (comprising physiological testing and exercise prescription) and 6% as private SEM practitioners. Most StRs saw themselves working in more than one setting.
- 47% thought the current duration of specialty training (4 years) was ideal, 40% thought it should be 5 years and 7% thought it should be 6 years.
- 67% of registrars wanted to work within the tertiary care setting of a teaching hospital affiliated to a university and medical school as their top choice; 13% within the secondary care setting of a district general hospital. 23% wanted to work at the ‘intermediate care’ interphase of a large polyclinic, with access to basic radiological and haematological investigations. None expressed a wish to work in primary care (within a general practice setting) as their first choice.
- 53% of SEM registrars wished to work full-time within the specialty, 47% part-time. Of those who wanted to work part-time, 50% wished to work 3 days in SEM, 38% wished to work 4 days in SEM. None of those expressing a wish to work part-time wished to work anything less than 3 days per week in SEM.

DISCUSSION:
- Most StRs saw themselves working in more than one setting. Contrary to popular public perception, working as an elite team physician did not feature in the top three choices of job settings for most SEM registrars who responded to the survey.
- The current length of SEM ‘run-through’ training (ST3-ST6) is 4 years. Of this, 3 years are typically within a hospital setting, 1 year within a community setting (general practice and public health departments). Most felt that the duration should be at least 4 years or longer, only 7% felt it should be less than the current duration.
- Suggested components that could be included to the current SEM training rotations included chronic musculoskeletal pain management techniques (including spinal injection techniques), occupational medicine and a greater amount of practical hands-on experience within elite sport, with an emphasis on acquiring in-depth MSK examination skills early on in the training scheme.
- Public health medicine training was recognised as being useful but emphasis should be placed on doing SEM-related public health projects.
- Exercise medicine training (a triad of exercise physiology, testing and prescription), opportunities for SEM research and a final year of specialist training to be completed as a specialist registrar/consultant in the government-run National Health Service (NHS) or equivalent was a desirable exit strategy for many UK SEM StRs, although many felt they would end up working in multiple work settings which include the armed forces/elite sport/private medical settings.
- There was considerable variation in what current SEM registrars thought the ideal training duration should be.
- Fine-tuning of UK specialty training will continue as SEM matures from a fledgling to an established medical specialty.

REFERENCES:

CONCLUSION:
- Working as an SEM specialist/consultant in the government-run National Health Service (NHS) or equivalent is a desirable exit strategy for many UK SEM StRs, although many felt they would end up working in multiple work settings which include the armed forces/elite sport/private medical settings.
- There was considerable variation in what current SEM registrars thought the ideal training duration should be.
- Fine-tuning of UK specialty training will continue as SEM matures from a fledgling to an established medical specialty.

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