

Feasibility of Academics Including Practice Following Postgraduation

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ABSTRACT

Following postgraduation, continuing to engage in gaining academic knowledge often posits a challenge for medical professionals, especially those in private practice. Nevertheless, keeping up-to-date with ongoing research, new findings, and perspectives regarding psychopathology and medical management often widens the horizon in which one is operating. Private practitioners in every medical field have opportunities to continue refreshing their academic knowledge in the least time-consuming manner while balancing their clinician roles. Being an academician and clinician does not have to be exclusive to each other and furthering knowledge will only lead to better evidence along with experiential-based clinical care and satisfying patient outcomes.

Keywords: Academic, Continuing medical education, Private practice.

Indian Journal of Private Psychiatry (2023); 10.5005/jp-journals-10067-0134

Following postgraduation, continuing to engage in gaining academic knowledge often posits a challenge for medical professionals, especially those in private practice. A lack of time to put the clinical practice on hold while academics are revisited could be one of the reasons. It is also a matter of question if being a good academician translates into being a successful clinician. In actual practice, following protocols as dictated in textbooks best helps and is possible in some scenarios. When postgraduate life is over and clinical practice is to be initiated, there is a need to relearn how to practice one's field according to local cultures and trends. This pressure also takes up much time from a clinician's schedule. Nevertheless, keeping up to date with ongoing research, new findings, and perspectives regarding psychopathology and medical management often widens the horizon in which one is operating. Moreover, a good academician does not necessarily have to be one who has passed out from an apex institute or is a gold medalist, or is a faculty at a medical college. Anyone can continue being an academician throughout their practice provided that they continue having the attitude of a postgraduate throughout life.

When academics are spoken of, research often comes to mind. Academic involvement need not necessarily be limited to research. Continuing medical education (CME) is a concept that helps develop better competence and learn new and emerging areas of the field. Attending CMEs and talks organized by associations or in association with other medical professionals is a convenient way to gain knowledge and perspective in minimal time from the experience of others. The National Medical Council (NMC) has also made it mandatory to have 30 credit hours every 5 years for the renewal of registration.¹ Being knowledgeable about recent updates is also necessary while being called in a court of law and it is prudent to have credentials available to show that one is updated and capable of providing expert opinion. Writing for and reading articles, periodical columns and journals keep one engaged in the developing areas of the field worldwide. Zonal meetings and state and national conferences provide a platform to convene and share knowledge regarding crucial aspects. Many of these are now conducted in a hybrid mode which makes them accessible.

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How to cite this article: Maheshwari P, Srinivas P. Feasibility of Academics Including Practice Following Postgraduation. *Ind J Priv Psychiatry* 2023;17(1):51–52.

Source of support: Nil

Conflict of interest: None

One can always choose to enhance their qualifications by gaining fellowships and certifications. Liaising with other colleagues for difficult cases and getting second opinions can practically help in better patient outcomes. Selecting a particular area to keep oneself updated in and announcing it to colleagues would help get more referrals. This would increase knowledge and expertise in the selected aspect.

Imparting knowledge can also be fulfilling as an academician. It can also include teaching undergraduate and postgraduate students. This can be done by being invited as a guest lecturer or as a guest speaker at conferences. Nurses, psychologists, and social workers can be trained by psychiatrists. One can also join as a part-time consultant in a Diplomate of National Board (DNB) training Institute or be a part of associations that are actively engaged in postgraduate training. The National Education Policy 2020 is also offering part-time academic roles in institutes through a new category of positions called "Professor of Practice."² This position would allow experts from the industry to directly be involved in developing courses to meet industry needs and mentor future clinicians. Those who have proven expertise in their specific profession or role with at least 15 years of service or experience, preferably at a senior level, will be eligible for Professor of Practice. The tenure will be for 3 years, extendable by 1 year. They will be able to introduce new courses and deliver lectures as per institutional

policies. This will help encourage students in innovation and entrepreneurship projects and provide the necessary guidance for these activities. There will be a collaboration with regular faculty members of the institutions to conduct workshops, seminars, and deliver special lectures and training programs. These experts will also be exempted from the requirement of publications and other eligibility criteria stipulated for the recruitment of faculty members at the Professor level. The introduction of this position is a breath of fresh air as it will allow for more industry and academia collaboration which can help medical students meet the societal needs and requirements within their respective fields. This will also help students in understanding the standard of care of the available treating doctors at that particular time, which is important not only for patient care but also for medicolegal purposes in view of medical negligence.³ According to the Bolam Test⁴ and Bolitho Test,⁵ a doctor is not found to be negligent if they act in accordance with a responsible body of medical opinion at that time, provided that the court finds the said opinion to be logical. This deems that for understanding what can be termed as negligence, we should know and consider the professional knowledge, skill, and act of another doctor with the same educational background in similar circumstances and facilities.⁶

If one is interested in research, data can be collected during consults and analyzed to provide inferences from an evolved perspective and with clinical experience. Interesting cases that provide a challenge can be documented and published which will help others who encounter a similar situation learn from the experiences and clinical acumen of another. One can also become a peer reviewer for journals or a medical expert associated with pharmaceutical companies and put knowledge to practice by discerning through submitted research.

It is beneficial to continue to be curious and inquisitive in a field as dynamic as psychiatry. This, however, is not limited to psychiatry but applies to the medical field in general. Private

practitioners in every field have opportunities to continue refreshing their academic knowledge in the least time-consuming manner while balancing their clinician roles. Being an academician and clinician does not have to be exclusive to each other and furthering knowledge will only lead to better evidence along with experiential-based clinical care and satisfying patient outcomes. In the future, it can be taken on by the NMC to further expand and implement the opportunities available for medical professionals to keep themselves updated. It is also necessary to upgrade the education provided to the manpower in psychiatric postgraduate institutes to equip them to face the challenges experienced in real life and meet the wants and needs of the population as independent practitioners.

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