

Response to the Letter on Pakistani Postgraduate Medical Education by Shaikh AJ and Burney I

Sir,

We are writing in response to the letter by Shaikh and Burney, published in this esteemed journal, which addresses critical issues related to Pakistani postgraduate medical education.¹ We would like to express our gratitude to the authors for bringing these important matters to light and for their valuable recommendations.

We fully agree with the suggestions provided by the authors and appreciate their efforts in highlighting the need for improvements in our medical education system. However, in the interest of gaining further insights from the authors, we respectfully request them to elaborate on the following points, which were briefly mentioned in their manuscript:

International Collaboration with CPSP: We would appreciate further elaboration on how the College of Physicians and Surgeons Pakistan (CPSP) can effectively reach out to postgraduate training bodies in countries where there is a need for enhanced quality processes and systems such as those offered by our college.² Understanding the specific strategies and frameworks that can facilitate such collaborations would be highly beneficial.

Enhancing Global Recognition of CPSP Qualifications: We seek guidance on the practical steps that can be taken to improve and enhance the global recognition of our degrees and training programmes. We believe that establishing clear and actionable plans is crucial for advancing the standing of our qualifications internationally.

We humbly request the authors to provide us with a detailed plan, outlining short-term, intermediate, and long-term goals, as referenced in their suggestions.³ Such guidance would not only benefit our institution but also provide the readers of JCPSP with a clearer understanding of this significant issue.

We are confident that the insights shared by Shaikh and Burney will contribute to the ongoing development and improvement of our postgraduate medical education system. We look forward to their further elaboration on these important matters.

Thank you for your attention to this matter.

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Received: September 02, 2024; Revised: September 23, 2024;
Accepted: September 24, 2024

DOI: <https://doi.org/10.29271/jcpsp.2024.12.1551>

AUTHOR'S REPLY

Sir,

We thank colleagues for raising important and pertinent questions in their response to our letter to the Editor of JCPSP regarding the need and suggestions for scaling up the recognition of Pakistani postgraduate qualifications.¹ We submit that, having worked in a Middle Eastern country for more than 20 years, we have observed many brilliant and aspiring doctors from Pakistan not receiving the recognition they deserve, either in Pakistan or in some other countries. This is a matter of concern for us. Doctors with the fellowship of the College of Physicians and Surgeons of Pakistan are reliable, hard-working mid-level doctors, but are seldom promoted to the level of consultant, and usually must either move on laterally to further their careers, or in some cases retire as specialists / registrars. Despite being recognised as a formidable workforce, factors which prevent progression in their career in the workplace, or appointment at a senior position, remain elusive. We had multiple discussions not only with young Pakistani mid-level doctors, but also with local consultants and supervisors, and in some cases, the employers. Through the letter, we hoped to convey our suggestion to the stakeholders in Pakistan, and we feel excited that colleagues read our suggestions and want to pursue the argument further.

As stated previously,¹ we observe that postgraduate fellows from Pakistan excel in knowledge and skills; however, when it comes to critical thinking, communication, collaboration, and especially leadership skills, a lot is desired. Also, some fellows are well-versed in electronic health records (EHRs) and hospital information systems (HIS), others are not. To this end, we

believe that the very important technical, and the so-called 'soft' skills, need to be enhanced in the CPSP curricula. Equally importantly, hospitals in Pakistan accredited for CPSP training need to be equipped with HIS, and the trainers and faculty need to be well-versed with the technology, to impart the skills. This environment will be conducive to allowing fellows to acquire these skills before embarking on foreign soil so that they blend imperceptibly in the new environment, which already poses challenges, such as different cultures and languages.

At the same time, as we see the need to try and plug-in the gaps in training, we also suggest levelling the playing field in the countries of destination of these young doctors. There is a misconception about the level of training and the rigours of examination in Pakistan. We believe that obtaining FCPS is not merely passing an exit-level examination, but the culmination of a structured programme, measurable outcomes, and very hard work on part of the examinees, as is evident from the required training, both hands-on and theoretical knowledge. However, this aspect of the training process needs to be conveyed to the employers and decision-makers in the countries where our graduates seek employment. We believe strongly that postgraduate doctors from Pakistan provide high-quality services, and this is acknowledged by fellow colleagues as well as the public at large; however, due to the perceptions about the process of obtaining a fellowship, they remain at a certain disadvantage. We propose several confidence-building measures in our published letter to the editor,² including short and intermediate-term suggestions.

Amongst other measures are the accreditation of training programmes.² Demonstrating that trainers and trainees meet the stringent criteria set by the international accrediting bodies, may help to convince the decision-makers, and through this process, the fellows may be able to achieve what they deserve.

Once again, we thank our colleagues for their interest in the subject.

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