



The Faculty of Sport and Exercise Medicine (UK)

The Intercollegiate Faculty of Sport and Exercise Medicine
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The Royal College of Surgeons of Edinburgh

The Royal College of Physicians of Edinburgh

The Royal College of Physicians & Surgeons of Glasgow

The Royal College of Surgeons of England

The Royal College of Physicians of London

The Royal College of Surgeons in Ireland

The Royal College of Physicians of Ireland

The Royal College of General Practitioners

The Royal College of Pathologists

The Royal College of Radiologists

The Royal College of Paediatrics and Child Health

The Royal College of Ophthalmologists

The College of Emergency Medicine

The Faculty of Dental Surgery at the Royal College of Surgeons Of England

The Faculty of Occupational Medicine

The Faculty of Public Health

The Defence Medical Services of the Armed Forces

Society of Apothecaries of London

The Role of the Specialist Doctor (Consultant) in Sport and Exercise Medicine

Sport and Exercise Medicine specialists currently **work in a variety of settings** across primary and secondary care, including:

- Primary Care Trusts (England)
- NHS Hospitals: teaching and district general
- Health Boards (Scotland)
- Military
- Private practice
- Corporate settings: employee health and wellness
- Sport: professional and amateur, as National Governing body, Team or Event physicians

SEM also has the potential to contribute beyond these existing parameters and, in particular, may have a key role in developing new approaches to healthcare and promoting population health. Such roles could include roles and responsibilities at the level of the Strategic Health Authorities in England, the Health Boards in Scotland, the devolved national administrations and the Department of Health.

SEM is a specialty founded on the disease and wellness models of medicine. It is through the latter, in particular, that SEM physicians in the future can play a leading and vital role in helping determine the Health of the Nation.

The role of the specialist doctor (Consultant) in Sport and Exercise medicine reflects the 'broad church' of the specialty training curriculum and spans primary, secondary and tertiary care. It includes:

- a) The use of physical activity and exercise as a health tool for primary and secondary disease prevention in:
 - The general population.
 - At risk populations.
 - Moderately disabled/sick population.
 - Very disabled/sick population.
- b) Physical activity in special groups such as pregnancy, diabetes, cardio-vascular disease, the overweight and obese, children and older adults (many of whom will have complex co-morbidities).
- c) Physical activity in all groups where such activity is limited by co-existing musculoskeletal morbidities. Appropriately prescribed exercise and other treatments to help both the illness and musculoskeletal problems using expertise in physiotherapy, nutrition, psychology, musculoskeletal and general medicine, as part of multidisciplinary teams.

"Raising Standards in Sport and Exercise Medicine"

- d) To lead or support multi disciplinary teams to deliver exercise programmes for health and wellness, including to those who are currently sedentary.
- e) Population health working with colleagues in Public Health and other disciplines, with the NHS and in the broader arena for Health and Wellness.
- f) Musculoskeletal medicine: Management of soft tissue injuries with specific focus on exercise and sport related injuries. This will involve working with musculoskeletal radiologists, biomechanists, physiotherapists, osteopathy and (trauma and) orthopaedic colleagues in order to minimise the time off work and sport caused by musculoskeletal injuries and thus reduce morbidity and the number of patients progressing to surgery or unnecessary prolonged disability. It will also enhance rehabilitation and recovery after surgery.
- g) Working with elite sportsmen and women to assist them in maximising performance (within international rules), reducing injury time and minimising the co-morbidity associated with elite sporting participation through research, engagement with sporting bodies and appropriate talent identification.
- h) Contribute to accident and emergency services involving sport and musculoskeletal injuries by establishing and keeping close links with colleagues in Emergency Medicine and maintaining skills in the management of medical and trauma emergencies.
- i) Psycho-social aspects of sport and exercise medicine. Psychology of exercise and health promotion. Work with psychiatric and psychology colleagues, and other professionals working in mental health services to use exercise in the management of mental illness and the promotion of mental health.
- j) Rehabilitation of both able and disabled sportsmen and women of all standards to expedite return to physical activity, work and increase participation in sport.
- k) Sport and Exercise medicine audit and research across the whole range of the speciality from the use of exercise in the treatment of disease, to rehabilitation after surgery, to treatment of soft tissue injuries and the promotion of population health.
- l) Working with Public Health colleagues, the Department of Health and the NHS in the delivery of national and local policies aimed at enhancing health and wellness.