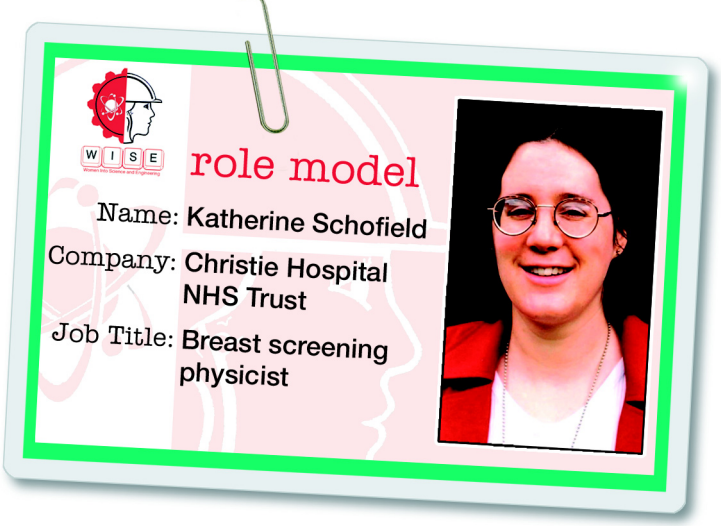

Katherine's current position:

As a medical physicist in the northwest, Katherine provides scientific and training support for the breast screening programme across the region.

Katherine's work:

'One of the things I love about my job is working with a wide range of professionals. For instance, I work closely with radiographers designing checks for their equipment, with engineers on the setting up and testing of this equipment, and with doctors and clinicians on research trials.

'Teaching and training is a vital part of my role, focusing in particular on the way X-ray machines are used to screen women. We are trying to push the technology to its limits, and for that you need a thorough grasp of the physics behind it all. My job also involves analytical problem solving, and using computer simulated models of the human body to estimate doses of radiation in a range of situations.

'I get a huge amount of job satisfaction, seeing technology used to detect cancers more rapidly. I like the fact that we can make a difference to the accuracy of diagnosis and so are able to offer patients earlier and more effective treatment.'

Her route to success:

'I wanted to do something with physics. After A levels I talked to a medical physicist and what he told me about translating technology into health care use and working in a hospital environment appealed to me. I spent three days visiting two hospitals on a special programme, seeing the work different people did. As a result, after I had completed my first degree in physics, I decided to do a postgraduate qualification in medical physics.'

More about Katherine:

'I play the sax and the flute and was honoured to be part of a Gospel choir singing at the opening ceremony of the Commonwealth Games held in Manchester. I also play in a local prison.'

What next?

Katherine has just accepted a similar job as a mammography physicist in Edinburgh which involves travelling throughout Scotland to work with various breast screening units.

She says: 'Over the next few years, we will see digital imaging being introduced, which will bring about big changes for the professionals and benefits to the patients. In Scotland I could be working with mobile screening vans where an image that is captured digitally could be viewed by a consultant in the hospital minutes later. When you add to this technology's increasing ability to target beams and doses ever more precisely, the future is full of new challenges and hope. I look forward to being part of that.'