What it's like to be in adolescent medicine: Shadowing Dr. Barangan

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Staff News Writer

As a medical student, do you ever wonder what it’s like to specialize in adolescent medicine? Here’s your chance to find out.

Meet Caroline Barangan, MD, a 12-year veteran of adolescent medicine and featured physician in AMA Wire’s® “Shadow Me” Specialty Series, which offers advice directly from physicians about life in their specialties.

Read Dr. Barangan's insights to help determine whether a career in adolescent medicine might be a good fit for you.
“Shadowing” Dr. Barangan

**Specialty:** Adolescent medicine

**Employment type:** Hospital

**Practice type:** Hospital-based health center

**Year in practice:** 12

**A typical week in my practice:** I get to my office around 8:30 a.m. I do paperwork and return emails and phone calls until clinic starts at 8:45 a.m. If I’m scheduled to work with medical students, residents and fellows, I see patients with them, supervise their decision-making and provide in-the-moment teaching.

If I am scheduled to see patients, I provide care to six to eight adolescent patients per half-day session. My day usually ends at about 6 p.m. I either go back to my office to finish up any administrative work or go home. I work Monday to Friday with several Saturday clinic sessions throughout the year.

I have three half-day sessions dedicated to doing administrative work for the fellowship training program as its director. This includes scheduling educational experiences, evaluations and reviewing applications for the program.

Eleven weeks out of the year, I take care of adolescent patients that are admitted to the hospital. I supervise the fellows and residents who are making decisions regarding their care.

**The most challenging and rewarding aspects of caring for patients in adolescent medicine:** Teens and young adults are in a phase when biological development outpaces psychosocial maturity. Plus, most of our patients are kids of color from low-income families. So the most challenging aspect is that they often experience very difficult lives. For many reasons, they may not be able to make the best decisions for themselves regarding their health or their futures.

Part of my job is to educate and guide patients, but I cannot make the decisions for them, nor should I. Part of becoming a well-adjusted adult is to be able to make positive and healthy decisions. For me, what’s most rewarding is when I see them learn how to make those decisions, and they are successful and happy as a result.

**Three adjectives that describe the typical physician in adolescent medicine:** Giving. Empathetic. Fun.

**Research shows that gender may impact specialty choice or life in certain specialties. Based on my own experiences:**

URL: https://www.ama-assn.org/residents-students/specialty-profiles/what-its-be-adolescent-medicine-shadowing-dr-barangan

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I do feel that gender impacts the culture of my specialty. Adolescent medicine is a predominately female specialty, most likely because the majority of specialists in this area come from pediatric backgrounds. Our specialty is also not full of procedures or high-adrenaline situations, and I believe that in part makes our field less attractive to male physicians.

To be successful in adolescent medicine, you have to love working with teens and young adults. This requires patience, perseverance and a positive attitude. At the center, we know from experience that physicians who don’t feel this way don’t last. The necessary skill set includes the ability to engage adolescents through talking and empathy. We tap into our own experiences as adolescents, so we empathize with the struggle to handle the often adult physical and social situations teens encounter while they are still emotionally maturing.

We [also] know that kids are more likely to seek medical care when they are appreciated and cared for, so we are nurturing and respectful. That’s one of the reasons why confidentiality is at the heart of our practice at the center.

I would love for there to be more males in pediatrics and adolescent medicine.

**What my lifestyle is like in adolescent medicine:** My lifestyle is exactly what I imagined [as a medical student]. In medical school, I knew that I wanted to engage deeply with my patients every day, help them lead happy and productive lives, and have fun too. So I chose a field that isn’t all about medical procedures and crises. Because of this, I knew that my salary would support a comfortable lifestyle but not an extravagant one.

My adolescent patients make my day-to-day practice interesting and different. No two days are ever alike. I think the one thing I didn’t expect was that I would become involved in medical education and academics. I never saw myself as a teacher or a leader because I tend to be quiet and introverted. That all changed in residency.

**The main skills every physician in training should have for adolescent medicine but won’t be tested for on the board exam:** [The use of] common sense and instinct when problem-solving. [You need to be able] to understand body language and facial expressions, communicate in such a way that adolescents respond and understand, and provide knowledge that an adolescent can apply to his or her life.

**One question every physician in training should ask themselves before pursuing this specialty:** “Can I see myself doing what I need to do in this specialty every day for the rest of my career and be happy?”

**Three books every medical student interested in adolescent medicine should read:**

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One online resource students interested in my specialty should follow:

The Society for Adolescent Health and Medicine

Additional advice for students considering adolescent medicine: Adolescents are awesome to work with. Often they are portrayed in the media as incomprehensible and difficult, or as scary and not so smart. The reality is that they are genuine and caring, want a happy and healthy life, and have so much potential. Practicing in adolescent medicine allows you the opportunity to make a difference in their lives today, and to help shape their futures, too.

If my life in adolescent medicine were a song, it’d be: “Unwritten” by Natasha Bedingfield because I would love every adolescent to read the lyrics of this song and follow the advice that’s in it.

Want to learn more about your specialty options?

Follow the "Shadow Me" series, and read additional insights from physicians in pediatrics, physical medicine and rehabilitation, radiology and orthopedic surgery.
Find out what these residents say about gender in their specialties.
Check out the AMA’s Choosing a Medical Specialty resource guide, and be sure to avoid these 5 common mistakes students make when choosing a specialty.