What it's like to be in sleep medicine: Shadowing Dr. Chervin

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Staff News Writer

As a medical student, do you ever wonder what it’s like to be a sleep specialist? Here’s your chance to find out.

Meet Ron Chervin, MD, a sleep specialist and featured physician in AMA Wire’s® “Shadow Me” Specialty Series, which offers advice directly from physicians about life in their specialties.

Read his insights to help determine whether a career in sleep medicine might be a good fit for you.

“Shadowing” Dr. Chervin

**Specialty:** Sleep medicine

**Practice setting:** Academic medical center

**Years in practice:** 22

**A typical day in my practice:**
I usually arrive at my office by about 8:20 a.m., after I drop my kids off at school, and I typically leave my office between 6:00 and 8:00 p.m. Sometimes there is then an hour or two of email to catch up on from home in the evening.

On weekends, I often work one additional short day, for about six hours. During my time at work, I have a varied portfolio that includes seeing my own patients with sleep disorders, assisting sleep medicine fellows in seeing their patients and reviewing sleep studies with fellows to teach them how to interpret the data and provide optimal patient care.

I spend a substantial portion of my time—typically one-third or more of my work hours over the past two decades—on clinical sleep research, which means managing teams of staff members and collaborators, as well as analyzing and reporting data or writing new grant applications. I also spend many hours on administrative issues for a large academic sleep center, on mentorship of junior
faculty and fellows and on national service, primarily through the American Academy of Sleep Medicine (AASM). This academic year, I am serving as President for the AASM.

**The most challenging and rewarding aspects of caring for patients in sleep medicine:**
Sleep-wake disorders often have a serious, pervasive impact on health, productivity, quality of life and enjoyment of waking hours. When we are not able to figure out a diagnosis, or provide effective treatment, we can face desperate patients and family members, not to mention frustrated physicians.

On the other hand, the most rewarding aspect of sleep medicine is that for the vast majority of patients, we do arrive at a logical diagnosis and, more importantly, highly effective treatment. For the patient, this can be life-changing. When this is my patient, I have the pleasure and satisfaction of knowing I’ve contributed something with enormous benefit.

**Three adjectives to describe the typical physician in sleep medicine:** Creative. Happy. Passionate.

**How my lifestyle matches or differs from what I envisioned in med school:** My lifestyle involves more hours at work than I would have predicted in medical school. However, I believe this is a consequence of my choice to pursue an academic career with a traditional tripartite focus—patient care, research and education—rather than an embedded feature of sleep medicine.

Many clinicians in sleep medicine do manage to create an excellent work-life balance and juggle sleep medicine with raising a family. Physicians who are on call in this field can receive questions from a sleep laboratory at times but almost never have to leave home because of night call. Patients wait to discuss their sleep problems during daytime office hours, and there are only very rare medical emergencies in sleep medicine.

Despite ongoing changes in types of studies for sleep disorders and in insurance coverage, sleep medicine continues to offer reasonable payment, a highly rewarding multidisciplinary practice and bright promise for the future. This is because:

- Healthy sleep is increasingly seen as vital to almost every other aspect of good health
- Sleep medicine still has far too few physician specialists to address sleep disorders that are highly prevalent
- The essential contributions that sleep physicians make to health systems will be highly valued as medicine increasingly adopts alternative care organization (ACO) models for health care

**The main skills every physician in training should have for sleep medicine but won’t be tested for on the board exam:**

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

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The wisdom to value a good medical history and put testing results into perspective
The patience to dissect the complicated health and psychological backgrounds that present together for many people with insomnia
The ability to communicate and teach well, even in non-academic settings, as every sleep physician is involved with education of colleagues as well as patients about sleep disorders and their impact

One question every physician in training should ask themselves before pursuing sleep medicine:

Do you find obstructive sleep apnea fascinating? Although dozens of sleep disorders exist, this one condition is to sleep medicine as diabetes is to endocrinology. Sleep apnea affects a wide range of other health conditions, and as a neurologist I have been fascinated for many years by profound effects of sleep apnea on neurologic conditions, the brain, cognition and behavior, especially in children. Others can be fascinated by its intimate relationships with pulmonary disease, metabolism, endocrine function or immune function. However, it may be hard to be a sleep physician if you find obstructive sleep apnea boring.

Three books every medical student in sleep medicine should be reading:


One online resource they should follow: www.twitter.com/aasmorg

A quick insight I’d give students who are considering sleep medicine: Sleep medicine is a field defined by fellowship rather than residency training. You can enter sleep medicine from a background in internal medicine, pulmonary medicine, family medicine, neurology, psychiatry, pediatrics, otolaryngology or anesthesiology. Choose a pathway that you find most fascinating and most rewarding.

However, keep in mind that a sleep medicine fellowship after training in one of the eligible traditional fields can lead to a highly rewarding full-time or part-time focus on helping people with the one-third of their lives spent asleep, and the other two-thirds that depend heavily on healthy function during that one-third.
If I had a mantra or song to describe my life in this specialty, it’d be:
Achieving optimal health through better sleep (the vision of the American Academy of Sleep Medicine)

Want to learn more about your specialty options?

- Read more profiles in AMA Wire’s "Shadow Me" Specialty Series to learn additional insights from physicians in such specialties as endocrine surgery, obesity medicine, neurology, nephrology, otolaryngology, vascular surgery and infectious disease, among others.
- Check out the AMA’s Choosing a Medical Specialty resource guide (member log in required).
- Be sure to avoid these 5 common mistakes students make when choosing a specialty.