

What it's like to specialize in urology: Shadowing Dr. McNeil

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As a medical student, do you ever wonder what it's like to specialize in urology? Meet Brian Keith McNeil, MD, a urologist and a featured physician in the *AMA Wire*® “Shadow Me” Specialty Series, which offers advice directly from physicians about life in their specialties. Check out his insights to help determine whether a career in urology might be a good fit for you.

“Shadowing” Dr. McNeil

Specialty: Urology.

Practice setting: Academic medical center.

Employment type: Hospital.

Years in practice: Six.

A typical day and week in my practice: My days vary based upon whether or not I am scheduled to be in the operating room, seeing patients in clinic, or on call. On surgery days, I typically arrive at the hospital one hour before my scheduled operating start time (7:30 or 8:30) to round on patients on the floor and evaluate my first patient before entering the operating room. I will perform anywhere from two to six surgeries per day depending upon the complexity of the scheduled cases.

Surgery days typically last 10 to 12 hours. Clinic days usually start at 9 a.m., and I round prior to seeing patients in our outpatient clinic. I usually wrap up in clinic around 5 p.m. When I am on call, I cover urologic emergencies at both the Kings County Hospital Center and SUNY Downstate Medical Center University Hospital of Brooklyn.

Luckily, they are located across the street from each other. Consults range from patients with voiding difficulties to treating victims of gun and knife violence who have injuries to the genitourinary organs. These experiences provide excellent learning opportunities for residents, forcing me to be flexible and think on my toes. I typically work about 60 hours per week, not including outside reading and

academic conferences. I cover both general urology and urologic oncology clinics.

The most challenging and rewarding aspects of urology: There are several challenging aspects of caring for those with urologic malignancies, especially those from medically and economically underserved environments. I have found that patients from these segments of society typically present with more aggressive and later stage disease. This can limit their treatment options.

I absolutely love operating, but there are times when the disease is so severe that surgery will only make things worse. Discernment is a valuable virtue. However, telling someone there is little I can do to help them is incredibly humbling and saddens me. I say this as someone who lost a father to a fight with advanced prostate cancer.

The most rewarding aspect of caring for patients in my specialty is the ability to make an intervention that improves a patient's quality of life. Whether it's a man who can't sleep at night because of a constant urge to use the bathroom, a woman frightened by sneezing or laughing for fear of leaking urine or a patient with a symptomatic malignancy, there is nothing more rewarding than improving someone's life.

Three adjectives to describe the typical urologist: One of my former mentors described the three A's that every urologist should possess. They are affability, availability and ability.

Urologists are typically affable, which is useful in breaking down barriers with patients to discuss sensitive, sometimes embarrassing topics. We must always be available to assist our patients and colleagues who may encounter unforeseen circumstances involving genitourinary organs. We all must be able to provide excellent, standard-of-care therapy to guarantee the best possible outcomes for our patients.

How my lifestyle matches, or differs from, what I had envisioned: The lifestyle of a urologist that I envisioned while I was in medical school differs somewhat from my reality. My impression of urologists during medical school was that they are people who go out of their way for the sake of patient care. They often enjoyed time away from the specialty with their family and retired after long careers serving their communities.

The health care landscape has changed a great deal since I graduated from medical school. I find that urologists are more involved in their local and surrounding communities than I expected. More physicians in my specialty are lobbying their local and state elected officials on their patients' behalf.

Other innovations, like robot-assisted minimally invasive surgery, have extended the career of pelvic surgeons who would sometimes develop cervical disc disease from constantly bending over to better view the pelvic anatomy. Work-life balance remains challenging, and more urologists have reported signs of burnout from increased demands. That having been said, various urologic societies have

focused more on improving the lifestyle of practicing urologists.

Skills every physician in training should have for urology but won't be tested for on the board exam: Board examinations test basic principles necessary to practice urology, but there is an incredible amount of empathy required to treat patients with urologic disorders. The subject matter is embarrassing for some and we must learn cultural mores associated with our diverse populace. Cultural sensitivity is not necessarily tested but remains a critical factor in treating patients with genitourinary maladies.

One question physicians in training should ask themselves before pursuing urology: Are you prepared to not only treat your patient's physical body, but also consider the importance of their mind and beliefs related to urological diseases?

Books every medical student interested in urology should be reading:

- *Campbell-Walsh Urology*: This is widely considered to be the bible of urology and the preeminent textbook in our field.
- *Smith and Tanagho's General Urology*: Now in its 18th edition, this textbook is one of the most widely used by medical students.
- *Pocket Guide to Urology*: This is a portable text used by medical students and urology house officers. It provides concise explanations of, and advice for, managing common urological illnesses.

The online resource students interested in urology should follow: The American Urological Association website is an excellent resource for practicing urologists, residents and students interested in the field. Medical student membership is free and comes with full access to AUA University, which includes a plethora of learning resources such as the medical student and resident curricula.

Quick insights I would give students who are considering urology: Mentorship is one of the most important aspects of succeeding in any endeavor. I often encourage students to seek out a mentor early on in their medical student careers. There are several points where mentorship could make a difference including the summer between a student's first and second year and how to map out one's fourth year.

Mantra or song to describe life in urology: The one song that I would pick is "Closer," by the rhythm and blues artist Goapele. I started listening to this song during residency and it has carried me through multiple fellowships, an academic exchange program working with other urologists in a favela in Brazil and numerous challenging cases.

I feel incredibly fortunate to pursue my dreams and make a difference in the lives of those I encounter. If my father had encountered a capable urologist earlier on in his course with prostate cancer, I sometimes wonder if I would not have lost him when I was 15 years old. Each day I get closer to accomplishing my dream of helping families with members afflicted with urologic malignancies enjoy life a bit more than untreated disease would allow.

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 infectious disease medicine, adolescent medicine, physical medicine and rehabilitation, radiology and orthopedic surgery, among others.
- Check out more information from the AMA on choosing a medical specialty.
- Be sure to avoid these five common mistakes students make when choosing a specialty.