6 top doctors reveal what you need to know during your residency

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As you warm up to life as a medical resident, you are learning that practicing medicine is only part science. Some lessons cannot be gleaned from a textbook or lecture.

To offer new medical residents insight on the intangible aspects of practice, AMA Wire® spoke with some of the nation’s top physicians about the lessons they wish they had known as new residents. Here is their top medical residency advice.

**Take advantage of your opportunities**

“I didn’t know what I was looking for in a residency or a fellowship because I didn’t understand how the world worked,” said Barbara L. McAneny, MD, a board-certified medical oncologist/hematologist from Albuquerque, New Mexico, who became the 173rd president of the AMA in June.

“I knew nothing about how health care was structured or where I would fit in it,” she said. “I just chose the specialty that appealed to me both for the science and the heart, and I really lucked out that oncology turned out to be such a great career.

“I wish I had done an MBA or a law degree and studied health policy,” Dr. McAneny said. “How I would have fit that in, I have no idea, but it would have been very useful. That said, if you decide to go this route, don’t let an advanced degree program mold you away from creative thinking about health systems.”

**You succeed with support**

“‘You don’t know what you don’t know’ is something I’ve learned over the years, and that insight would have been helpful as a resident,” said Ronald Vender, MD, professor of medicine and chief medical officer at Yale Medicine.

“That’s one important reason to develop close working relationships with nursing colleagues,” Dr. Vender added. “An experienced nurse often knows far more than a junior resident, and often has better developed clinical instincts. It also would have allowed me to ask more questions rather than think I had to find all of the answers myself.”

**Voice your concerns**

“A focus of our work is building and sustaining a culture of safety in health care where
people—including all levels of staff as well as patients and their loved ones—feel comfortable raising concerns and asking questions,” said Tejal Gandhi, MD, chief clinical and safety officer at the Institute for Healthcare Improvement in Boston.

“During my residency, the times were different,” she noted. “We weren’t necessarily encouraged to speak up when something seemed unsafe. I wish I had known from day one the importance of our voice, and how critical it is for anyone on the care team with a safety concern to speak up about it, regardless of rank.”

**Embrace uncertainty**

“When I started my residency in internal medicine and pediatrics, I was unaware of what I ultimately wanted to do in medicine,” said Fatima Cody Stanford, MD, MPH, MPA, an obesity medicine physician scientist at Massachusetts General Hospital and Harvard Medical School.

“I did not feel as though I had anyone’s footsteps in which I wanted to follow,” she said. “This created a certain level of angst, but I would recommend residents take it a day at a time. Soon after this initial angst, I decided to navigate a new path in obesity medicine. As one of the first fellowship-trained physicians in the field, I am glad that I followed the parts of medicine that brought me joy.”

**Practice self-care**

“I wish someone would have given me a talk or lecture on how to manage my time and life—how to get more sleep and rest, and how to learn to be happy,” said Bennet Omalu, MD, MPH, a forensic pathologist who discovered chronic traumatic encephalopathy.

“I did not know any better, so I defined my life by my work and professional attainments,” he said. “That was a total disaster for me, eventually—my depression got worse. At some point, I actually began to exhibit self-destructive behavior.

“It was only after my residency that I realized I had to redefine and reorient my life and begin to learn how to be happy outside my work.”

**Grow your knowledge every day**

“The habits of mind one creates and nurtures during residency will pay dividends through a lifetime of
practice,” said Robert Wachter, MD, chair of the Department of Medicine at the University of California, San Francisco School of Medicine.

“The key one, which is particularly challenging during internship, when one is trying to survive each day, is to strive to learn one new thing related to one of the patients on the team, each and every day,” he said. “This can be by looking up an article or a summary paper or by talking to a consultant. This habit will lead to tremendous growth in fund of knowledge and clinical sophistication, and also pave the way to continue learning throughout your professional lifetime.”