As a medical student, do you ever wonder what it’s like to specialize in preventive medicine? Meet Brandi Ring, MD, a gynecologist and a featured physician in the AMA’s “Shadow Me” Specialty Series, which offers advice directly from physicians about life in their specialties. Check out her insights to help determine whether a career in obstetrics and gynecology might be a good fit for you.

“Shadowing” Dr. Ring

**Specialty:** Obstetrics and gynecology.

**Practice setting:** Private practice.

**Employment type:** Employed by a large physician owned group.

**Years in practice:** 4.

**A typical day and week in my practice:** There is no typical day in obstetrics and gynecology—that’s why I love it! Every day is different and the variety keeps you busy! When we are in the office I see
patients from 9 a.m. to 5 p.m. and we take a lunch, which is most often my time to call and give
patients lab results and catch up on morning notes. I usually stay until about 6 p.m. or so finishing
notes after the day. Many nights I often have a medical organization meeting to attend. These are
great opportunities to network with my colleagues and learn about what is changing in the medical
world and how we can have an impact on those changes.

A typical week for me is three or four days in the office and one 24-hour call day. I do a traditional 24-
hour call day which means I see patients in the office during the day, but I am also on call for everyone
delivering in the hospital. Some days I get to see all my office patients and other days I spend all day
in labor hall waiting and delivering babies.

The most challenging and rewarding aspects of obstetrics and gynecology: The most
challenging part of obstetrics is the dichotomy of emotion you see in any given day. You have a lot of
happy medicine, but you also have a lot of very tragic medicine and that may occur in back-to-back
patients. You need to be there emotionally to support your patients where they are and that
sometimes means your own emotions take a back seat to patient care. It can be very emotionally
draining.

You get to be a part of patients' lives. They come in to see you and the trust you build is
incredible. They trust you to deliver their new baby or to operate on them, or sometimes both. As you
see patients for longer periods of time, the relationship gets even better and you get to follow their
lives and know you had a part in it. It's truly amazing.

Three adjectives to describe the typical gynecologist: Passionate, driven and patient advocate.

How my lifestyle matches, or differs from, what I had envisioned: You have the ability to make your life
balance what it needs to be by picking the right practice environment and group to join. But that choice
is not set in stone and there will be times you need to adjust your work schedule or change jobs to get
the balance you need. Having the flexibility to do that is helpful. Being an attending is way harder than
you imagined, but better too.

Skills every physician in training should have for obstetrics and gynecology but won’t be
tested for on the board exam: The ability to be calm and collected in high stress environments,
make decisions and change decisions with new information. Have difficult conversations with patients
about their goals and their needs. Develop good teaching skills to pass on your knowledge to the next
generation of trainees. None of that is covered on the boards but without it you will flounder.

One question physicians in training should ask themselves before pursuing obstetrics and
gynecology: Do you love the everyday “bread and butter” of the specialty? Everyone loves the
surgeries and the deliveries, but it’s not what you do all the time. Do you also love seeing well women
and problem visits for infections and STD testing and contraception counseling? If you only love the
big stuff, it's a very hard day-to-day struggle.

Books every medical student interested in obstetrics and gynecology should be reading:

- Obstetrics and Gynecology (8th edition) by Charles Beckmann and Frank Ling. If you have to pick one textbook, this gives you the info for the shelf and the basics for the rotation you need to know—easier to understand than most and succinct.
- Harry Potter (Books 1-7) by JK Rowling. You should always have an interest OUTSIDE of medicine and these for me are an uplifting escape from the real world and a chance to use your imagination.
- "It-Factor Leadership" by Claudia Fernandez and Ruben Fernandez. A great intro into simple ways you can become a leader in your group, hospital or organization complete with handy forms to utilize.

The online resource students interested in obstetrics and gynecology should follow: There is a free online atlas of pelvic surgery that is a little outdated, but has great images of the steps of each procedure and surgeries you might encounter.

Quick insights I would give students who are considering obstetrics and gynecology: Make sure you get a diverse experience during your rotations—both inpatient OB/GYN and outpatient OB/GYN, and both attending experience and resident experience. You need to see if you are going to survive residency and you need to know how hard it is before you sign up. You also want to make sure you like what life looks like after residency so you don’t get buyer’s remorse when you get there.

Mantra or song to describe life in obstetrics and gynecology: In a world where YOU can be anything…be yourself!!

More about choosing a specialty

The AMA’s Specialty Guide simplifies medical students’ specialty selection process, highlight major specialties, detail training information, and provide access to related association information. It is produced by FREIDA™, the AMA Residency & Fellowship Database®.