What it’s like in obstetrics and gynecology: Shadowing Dr. Warner

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Staff News Writer

As a medical student, do you ever wonder what it's like to specialize in obstetrics and gynecology? Meet AMA member Kimberly D. Warner, MD, an obstetrics and gynecology specialist 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.

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

Learn more with the AMA about the medical specialty of obstetrics and gynecology.

Kimberly D. Warner, MD

URL: https://www.ama-assn.org/residents-students/specialty-profiles/what-it-s-obstetrics-and-gynecology-shadowing-dr-warner

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"Shadowing" Dr. Warner

Specialty: Obstetrics and gynecology.

Practice setting: Hospital.

Employment type: Employed by a medical group in Denver, Colorado.

Years in practice: 22.

A typical day and week in my practice: I work about two 24-hour shifts per week, so around 50 hours total, generally in the hospital, plus whatever meetings I have. I also do government relations for Colorado Permanente Medical Group—a member of the AMA Health System Program. When the state legislature is in session, I go to the Capitol every Wednesday with our government relations health plan lead. Those weeks come to about 60 hours.

The most challenging and rewarding aspects of obstetrics and gynecology: The most challenging part is having two patients at a time. We always have the mom and the baby, and that's a very emotionally charged time. It's important to connect quickly, build trust and acknowledge that this is a life-changing event. You want to make it incredibly meaningful, special and safe.

The most rewarding part is seeing healthy moms and babies, or a great surgical outcome.

I feel like I was put on this Earth to take care of moms and babies and women of all ages. So having good outcomes is pretty special.

How life in obstetrics and gynecology has been affected by the global pandemic: Women still had babies, so my work didn't change from that standpoint—I still went into the hospital. It was mostly the amount of personal protective equipment that changed. Obviously elective surgeries got postponed, but I didn't get affected by that as a hospitalist. So my clinical job didn't change much. But the government relations piece did. Our legislature adjourned early in March of 2020, then was back in Jan. 2021 with all the legislators vaccinated prior to entry into the state capitol.

The long-term impact the pandemic will have on obstetrics and gynecology: We’ll be wearing masks in the hospital for the foreseeable future. Also, I used to sit on the side of the patient’s bed, shake hands with them, hug them after delivery. Of course, I do less of that now, so there’s less physical touch, and then you have the effects of masks too. Wearing PPE for extended periods of time was very frustrating. Not only is it physically exhausting, but you are also unable to use the
majority of your facial expressions to communicate with patients. Those nonverbal cues are such an important part of connecting with patients and building trust. I ended up gesticulating much more.

Long term, there might also be fewer support people in labor and delivery. Traditionally, women could have as many people in the delivery room as they desired, but at the very beginning of the pandemic, no support people were allowed in the hospital. That quickly changed to one person (the same person) only throughout the entire labor, delivery and postpartum. We now allow a maximum of two support people, but I think we will limit the number of people allowed in the hospital going forward.

Three adjectives to describe the typical obstetrics and gynecology specialist: Resilient, collaborative and empathic.

How my lifestyle matches, or differs from, what I had envisioned: I knew there would be long hours and late nights —obviously, babies come at all times of day, and surgeries come in the middle of the night too. What I didn't know—no pun intended—is how labor intensive my job is. I run from room to room and then to the OR. And I often get sweaty during surgeries and deliveries. Sometimes I’m pushing with patients for hours and I wake up sore. I didn’t anticipate that.

Skills every physician in training should have for obstetrics and gynecology but won’t be tested for on the board exam: I don’t think empathy comes across very well in a testing situation. You have to have an open heart and connect quickly and deeply with patients. Communication is imperative, whether it’s with your team or with patients.

And you have to have a certain amount of resilience, some pretty decent self-confidence, where you’re confident in the decisions you're making, and you can portray your confidence to patients.

One question physicians in training should ask themselves before pursuing obstetrics and gynecology: How important is sleep to you? I had been an eight-hour-a-night person for most of my life, but this specialty doesn’t often allow that.

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

- *Cutting for Stone*, by Abraham Verghese, MD. It’s about delivering twins to a mom who dies soon after and one of the twins going on to become a doctor.
- *The Red Tent*, by Anita Diamant. It has important insights into how women support each other.
- *Girls & Sex*, by Peggy Orenstein. It features eye-opening research on how girls from their teens through college are experiencing sex, and it’s disturbing.

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The online resource students interested in obstetrics and gynecology should follow: The American College of Obstetricians and Gynecologists. It has all kinds of recent research and data on ob-gyn.

Quick insights I would give students who are considering obstetrics and gynecology: You have to have a passion for what you do, and you really need to love it. Otherwise, it could damage your soul. Really investigate that. Listen to yourself.

Mantra or song to describe life in obstetrics and gynecology: "Hit Me with Your Best Shot," by Pat Benatar.