As a medical student, do you ever wonder what it’s like to specialize in obstetrics and gynecology? Meet Nariman Heshmati, MD, an obstetrician-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 his 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, highlight major specialties, detail training information, and provide 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.

Nariman Heshmati, MD

“Shadowing” Dr. Heshmati
Specialty: Obstetrics and gynecology.

Practice setting: Multispecialty group practice.

Employment type: Employed.

Years in practice: 13.

A typical day and week in my practice: My schedule is a bit different than many ob-gyns because I’ve moved into a role where I also oversee all the other surgeons and specialists in my group. Prior to this, each week was very different. Some days I was in clinic seeing patients—and the variety of patients is immense since it could be a pregnancy, a surgical consult or a procedure. Other days I would operate and do hysterectomies, tubal ligations, or endometrial ablations.

There were also days when I took obstetrics call. For me, that was 24 hours in the hospital managing the laboring patients. It sounds like a long time to be in the hospital—and it is—but it’s also very rewarding. You start to know the nurses really well and they become close friends. Day shift and night shift have distinct cultures that you get to witness. You also get to eat lots of food from the different potlucks.

The most challenging and rewarding aspects of obstetrics and gynecology: The most challenging aspect is when there is an adverse event like a miscarriage. In obstetrics and gynecology, you really get to know your patients well. You care for them through multiple pregnancies and see children who you have delivered grow up. When a difficult event like a miscarriage occurs, you share in that pain with your patient.

The most rewarding aspect is helping a woman through a successful pregnancy. I’ve had patients who have struggled with infertility because of endometriosis or polycystic ovary syndrome, and we work together to develop a plan to help them achieve a pregnancy. The look on a woman’s face when she holds her newborn for the first time is something impossible to describe and immensely rewarding to witness.

How life in obstetrics and gynecology has been affected by the global pandemic: A great deal of what we do is in the hospital, so the early shortages of personal protective equipment were very challenging. On top of that, there have been so many things we had to learn about the impact of COVID-19 in pregnancy and so much misinformation we had to combat. We’ve seen adverse outcomes in pregnancy go up as a result of COVID-19, and that’s stressed our patients and us during an already stressful time.

URL: https://www.ama-assn.org/residents-students/specialty-profiles/what-it-s-obstetrics-and-gynecology-shadowing-dr-heshmati
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The workforce challenges and shortages have also had a major impact because we often work in large teams with nurses and anesthesiologists, and each person serves a critical role in providing care.

We’ve been gathering more and more data on how to care for women during COVID-19 and the amount of studies published guiding management during times like pregnancy has been immensely helpful. On top of that, many female ob-gyns were able to combat misinformation about COVID-19 vaccine in pregnancy by posting their own pictures showing them receiving a COVID-19 vaccine during pregnancy on social media.

Ultimately though, the pandemic has been difficult for society, health care workers, and the systems we work in. We’ve had to lean on each other for support and that’s how we deal with this challenge or the next.

**The long-term impact the pandemic will have on obstetrics and gynecology:** The pandemic may actually help make access to care easier. We now have better options for telemedicine to make it more convenient for patients to get care on their terms. The pandemic forced us to rethink our traditional way of providing care and there will be some large benefits there.

**Three adjectives to describe the typical obstetrics and gynecology specialist:** Caring, hardworking and adaptable.

**How my lifestyle matches, or differs from, what I had envisioned:** I always knew that obstetrics and gynecology was a hardworking specialty. I saw this as a medical student and later in my residency, so I was prepared to not have much of a work-life balance. However, the specialty has changed to be much more family-friendly—as has much of medicine.

We now have laborists who reduce our call burden and there is a strong push to improve work-life balance and reduce burnout. Today, two different ob-gyns may work completely different schedules based on their wishes and priorities and alter that as life circumstances change. For example, I have several colleagues who work part-time in order to have more time with their children and the system accommodates those needs well.

**Skills every physician in training should have for obstetrics and gynecology but won’t be tested for on the board exam:** You’ll be tested on your medical fund of knowledge, and, in residency, they will test your surgical skill. Both of these are important. However, there are other skills that are critically important for succeeding as an ob-gyn. You have to have empathy and truly listen to your patients. You need to work well in teams—you can’t do this alone. You have to know when to ask for help—whether that’s managing a labor or in a complex surgery. Sometimes you need to
One question physicians in training should ask themselves before pursuing obstetrics and gynecology: Do you want to truly bond with your patients? Some aspects of medicine are problem-oriented where someone comes in for an acute issue that needs to be addressed. Much of ob-gyn is about developing bonds with your patients and caring for them through different phases of life. You may provide contraception and STD counseling early in life and then help manage a pregnancy later and then operate on that same patient or discuss menopause.

I’ve cared for patients who then brought their daughters or mothers to me for care later. It’s really one of the amazing parts of ob-gyn—the connections with your patients. I see patients around town or their children at school functions. If you enjoy knowing your patients, this is the perfect specialty for you.

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

- *Blueprints Obstetrics & Gynecology* by Tamara L. Callahan, MD, PhD, and Aaron B. Caughey, MD. Dr. Callahan was one of my professors and this is an excellent concise source of information about obstetrics and gynecology.
- *Te Linde’s Operative Gynecology* by Victoria L. Handa, MD, and Linda Van Le, MD, is our go to source for gynecologic surgery.
- *Obstetrics: Normal and Problem Pregnancies* by Steven G. Gabbe, MD, et al. This is our go-to source for obstetrics.

I have autographed copies of all three on my shelf to this day.

The online resource students interested in obstetrics and gynecology should follow: A big part of being an ob-gyn is being an advocate for women’s health. Everyone interested in the specialty should follow the American College of Obstetricians and Gynecologists on Twitter.

Quick insights I would give students who are considering obstetrics and gynecology: It’s a great specialty, and I would recommend it to anyone. If you are considering it, shadow an ob-gyn for a day. For most, after they are immersed in the specialty, they know that’s what they want to do. It’s a long road, so you really want to make sure it’s a good fit for you.

Obstetrics and gynecology also has many possible subspecialties. You can focus on obstetrics, high-risk obstetrics, urogynecology, minimally invasive gynecologic surgery, primary care, or infertility. There are almost endless possibilities. Make sure you explore all the options as you decide whether this is the specialty for you.