

Choosing a Specialty: A Primer for Medical Students

Choosing a medical specialty is one of the most important decisions that you'll face in your medical career. Unfortunately, you might have to go through a lot of confusion, frustration, and uncertainty to get to that decision.

"You should go into pediatrics. You love kids!"

"Ophthalmologists make a good living, and they get to spend time with their family."

"You have the hands of a surgeon. What's there to think about?"

By now, you've probably heard a lot of "helpful" advice from family and friends. But ultimately, you need to be the one to decide what path your career will take. Finding a specialty that suits you is a process of assessing your strengths and weaknesses, and identifying the lifestyle, intellectual challenge, and research potential—among other factors—that agree with you. When you find a specialty that meets all these factors, you've found the perfect match.

However, taking the time for the proper self-assessment, research, and exploration of your desired field of medicine would mean having less time for patient care, clinical rotations, and studying. Combined with the already intensive workload and considerable time commitment required of a medical student, the process of making such an important decision is often pushed aside. As a result, the decision of which specialty to choose is very rarely an educated one.

The Basics

There are 24 official specialty boards recognized by the American Board of Medical Specialties. These specialties are:

- Allergy and Immunology
- Anesthesiology
- Colon and Rectal Surgery
- Dermatology
- Emergency Medicine
- Family Practice
- Internal Medicine
- Medical Genetics
- Neurological Surgery
- Nuclear Medicine
- Obstetrics and Gynecology
- Ophthalmology
- Orthopedic Surgery

- Otolaryngology
- Pathology
- Pediatrics
- Physical Medicine and Rehabilitation
- Plastic Surgery
- Podiatry
- Preventive Medicine
- Psychiatry and Neurology
- Radiology
- Surgery
- Thoracic Surgery
- Urology

In addition, each specialty may have sub-specialties, sometimes as many as 10! This means that as a medical student, you have the option to choose from over 60 different specific fields of medicine. Having this many options doesn't make the decision easier, obviously.

Luckily, you have to choose the initial specialty first, before you can even worry about sub-specialties. But don't forget about them either; they can provide further focus in an area that may be saturated with generalists, and developing a niche market might be an excellent idea.

Don't Rely Purely on Clinics

While the clinics you participate in during your third and fourth years can aid you in the decision-making process, they have their limitations. Fundamentally, clinical rotations are so short that they do not allow you adequate time to get a sense of your role and your enjoyment of any particular specialty. Additionally, being in an academic or teaching hospital setting can prevent you from truly experiencing what a typical day is like for a practicing physician in that specialty.

Finally, the fact that there is such an overwhelming number of specialties ensures that it is impossible to experience even a majority of them during your clinical clerkships. You will typically rotate through seven fundamental specialties (internal medicine, surgery, pediatrics, ob-gyn, psychiatry, family practice and neurology) in your third year. What happens if you want to try physical medicine and rehabilitation or radiation oncology? Chances are, you will miss out on clerkship experiences that you may have considered for a residency.

Residencies/Fellowships

Residencies are typically three to seven years of formal "on-the-job" training with physician supervision. You will be able to take your broad clinical knowledge from medical school and apply it in the real world. It's an excellent process that will effectively prepare you to practice medicine unsupervised. As long as you

don't mind being an indentured servant, that is. You'll have long hours, get paid a minimal salary, and learn to love the feel of a nice cot, couch, office chair, or, if you're lucky, hospital bed.

If you didn't have enough fun with your residency, you can apply for a fellowship, which can vary in length considerably. Fellowships are the method by which you sub-specialize. Here are some examples of subspecialties that are available:

Anesthesiology --> Cardiac, Pediatric, Obstetric, Regional, Ambulatory, and Neuro-Anesthesia. Fellowships available: Pain Management and Critical Care Medicine.

Emergency Medicine --> Medical Toxicology, Emergency Medical Services, Pediatric, Undersea and Hyperbaric Medicine, Emergency Ultrasound, and Sports Medicine.

Internal Medicine --> Allergy and Immunology, Cardiology, Endocrinology, Gastroenterology, Geriatrics, Hematology-Oncology, Infectious Disease, Nephrology, Rheumatology, and Pulmonology and Critical Care.

Surgery --> Cardiothoracic, Colon and Rectal, Pediatric, Surgical Oncology, Transplantation, Trauma and Critical Care, and Vascular Surgery.

Factors to Consider

There are several factors that should have the most influence over your decision to join a specific specialty. While this is not an exhaustive list, and you should rank these factors based on your own personality and goals, this list has proven to be an effective guide for hundreds of medical students who are in the same position as you.

- **Primary, Secondary, Tertiary or Supportive?**

Primary care tends to be a generalist specialty, such as family practice, internal medicine, or pediatrics. You have to have a broad base of knowledge that you can draw upon to treat a wide variety of common problems. You will be heavily involved in continuous care and performing preventive medicine.

Secondary and tertiary care practitioners are more reactive. You'll perform highly technical procedures, and most of your patients will be referred to you by primary care physicians. Many times, your interaction with the patient will be limited after the procedure, and you will have infrequent follow-ups.

Finally, supportive care consists of specialties that tend to be hospital-

based, and they normally support the procedures of secondary and tertiary care providers. Examples include radiology, physical medicine and rehabilitation, radiation oncology, and anesthesiology. Some supportive care specialties are unrelated to other types of care, such as emergency medicine and pathology.

Whether you're a generalist, a specialist, or supportive, your role is integral to the health and well-being of the community. Each role is rewarding in its own way, and determining which rewards are most important to you is a big step towards making the right decision.

- **Intellectual Challenge**

The intellectual element of your specialty should be fascinating (hopefully) or interesting (at a minimum) to you. You should have a genuine clinical interest in advances in the field, diagnostic challenges, and the research and conclusions of your colleagues.

As a medical student, you should take the time to read the current journals for specialties that appeal to you. If you don't enjoy or have any interest in the research materials, you're less likely to have a lasting interest in that specialty. Remember, it's not the initial appeal that is important, it's the long-lasting effect on your career. Will you still enjoy your field of medicine 10, 20 or 30 years from now?

- **Patient Contact**

Many medical students don't experience heavy patient contact until their third and fourth-year clinics. Even if your intentions entering the medical profession were the noblest – you want to help people – you may find that continuous patient contact was difficult at best. **This is perfectly okay. The level of patient contact you're comfortable with has no bearing on your value as a physician.**

Every specialty and subspecialty has an essential role in patient care, and actual “face time” with patients has nothing to do with the importance of your function. If you find yourself enjoying the contact immensely, consider family practice or internal medicine, or on an even more contact-heavy level, psychiatry, ophthalmology, or radiation oncology. If your idea of ideal patient contact is more hands-on, consider emergency medicine, surgery, or ob-gyn. You'll find that as you examine the level of patient contact and your comfort level with such contact, the decision will be made much easier.

- **Lifestyle**

When most people think of a physician's career, they associate it with long hours, little or no personal or family time, and tireless effort. Many newer physicians entering the workforce are not as willing to sacrifice themselves at the expense of spending time with their loved ones. And rightly so—having a more enriching family life and social life will make you happier and more successful in your professional life as well.

Currently, many physicians are focusing on specialties that have more flexible lifestyles instead of focusing purely on income level and prestige. Some fields of practice that can be considered “lifestyle friendly” are areas such as anesthesiology, dermatology, emergency medicine, ophthalmology, neurology, radiology, and pathology. These specialty areas offer you more control over your hours, and the income can be commensurate with the workload and level of responsibility.

Of course, this move toward lifestyle specialties means that other areas, such as general surgery, internal medicine, and obstetrics-gynecology, have suffered as fewer medical students elect to join their ranks. So, if you are ambivalent or unconcerned with the potential workload and its effect on your social life, these areas may be perfect for you, as well as less competitive than some of the others.

- **Chances of Success**

Be honest with yourself. If you have always wanted to enter a highly competitive field such as urology, plastic surgery, ophthalmology, neurosurgery, dermatology, radiology, orthopedic surgery, emergency medicine, radiation oncology, or otolaryngology, do a serious self-assessment and review your academic qualifications. Perhaps your skills and interests lie in two separate areas. If so, you need to make sure you are choosing the area that will give you the best chance for a long and fruitful career. Perhaps you should consider choosing a second and third specialty as a backup, just in case you are unable to meet the criteria for getting into these very competitive specialties.

- **Additional Factors**

Obstetricians have to be comfortable with the extremely high level of litigation in their field; oncologists of all types must be able to deal with the terminal nature of many patients' conditions; gynecologists must obviously be at ease with women; pediatricians (and family physicians) have to work well with small children (and concerned, frustrated parents).

Each specialty comes with its own unique characteristics that must be

taken into account. Make sure you've talked to physicians who work in the areas you are considering in order to find out what some of these unique factors are.

An Informed Decision is the Best Decision

Once you have identified the key elements that interest you about practicing medicine, you may deem several specialty areas appropriate. Fortunately, this means that your chances of choosing the “wrong” specialty are unlikely. However, while the majority of physicians are basically satisfied with their careers, more recent studies have shown that the number of doctors dissatisfied is currently at 20% and growing. Take the time to choose your medical specialty prudently and with considerable forethought. You'll thank yourself later.

Source: www.thedoctorjob.com