

Residents' Views | College • Collège

Encouraging trainees

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o, are you going to specialize or are you going to be just a family doctor?" This is a question we have all heard repeatedly as medical students from friends, from strangers, and even from teachers. I did not know how to respond to this question. Because I knew that family medicine was well recognized and respected as its own specialty, I believed that what I was being asked reflected an old, entrenched way of thinking and that things would be different when I entered residency. I believed that, as a family medicine resident, I would no longer experience this awkward feeling of trying to defend my choice.

Interestingly, family medicine residents still get asked the same question—not only by patients, members of the public, and even our specialist colleagues, but also by those within our own family medicine community. As a second-year resident I am often asked what fellowship I am going to do. The discipline of family medicine has embraced some amazing enhanced-skills training programs, and the medical community is greatly benefiting from family doctors with enhanced areas of expertise (eg, sports medicine)1 or those who are subspecialists within family medicine (eg, GP oncologists, GP psychotherapists). Many of my fellow residents are either in the process of applying to these programs or already trained in a subspecialty area. I truly believe that these family doctors with Certificates of Added Competence and subspecialists within family medicine contribute a great deal to the care of patients and the profession of family medicine. However, I do think we should also be encouraging residents to be proud of being "just a family doctor" or, actually, of just being a family doctor.

Last week I saw a Syrian refugee family who had recently arrived in Canada. I was involved in helping the family members find community resources, vaccinating the children so that they could attend school in Canada, and providing them with medical attention

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that they had not had in years. The father of the family took photographs while I examined his daughter; they were so happy to be receiving medical care. I am now following them regularly. The next day a patient I knew well returned to the clinic to disclose a history of abuse. She had never told anyone about what had happened. We worked together to create a safety plan and I started counseling her about the issue. She was also out of her blood pressure and diabetes medications, so we discussed lifestyle changes, I examined her, and I sent her for bloodwork. I also look after this patient's daughter, who booked an appointment with me once just to clarify whether I agreed with her cardiologist's plan. I most certainly did, but she wanted to hear her family doctor's opinion. Last week a medical student who was shadowing me remarked that he could not believe how many different tasks we had completed, from performing a well-baby examination, to counseling a patient who was grieving for her dying husband, to prescribing contraception and discussing prevention of sexually transmitted infections, to doing a punch biopsy of a suspicious skin lesion. It's true: it is amazing that we get to care for people with a range of health-related issues. We are specialists; we are specialists in the person and the doctor-patient relationship. I told the medical student that he was right, that family doctors have an extremely varied job, with an immense scope, and that we get to influence patients' lives on a deep level. I am incredibly proud to be a family doctor.

What a privilege it is to be just a family doctor. Let's all continue to encourage family doctors and trainees to be involved in subspecialties within family medicine, but let's also encourage and take pride in trainees who choose to be just a family doctor.

At the time of writing, Dr Rosenthal was a second-year resident in family medicine at St Michael's Hospital in Toronto, Ont, and is now working as a locum family physician at St Michael's Hospital.

Competing interests

None declared

Reference

1. College of Family Physicians of Canada [website]. Certificates of added competence in family medicine. Mississauga, ON: College of Family Physicians of Canada; 2017. Available from: www.cfpc.ca/CAC/. Accessed 2017 Sep 25.