



IS OBSTETRICS AND  
GYNECOLOGY RIGHT FOR  
ME

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# OBSTETRICS AND GYNECOLOGY





# OBSTETRICS AND GYNECOLOGY

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❖ REWARDING AND GRATIFYING

❖ HEALTH CARE FOR WOMEN

- COMPLETE LIFE CYCLE
- PREVENTION
- DIAGNOSIS
- TREATMENT

❖ OB/GYN

- PRIMARY CARE
- SURGICAL
- REPRODUCTIVE HEALTH CARE





# HISTORY

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- ❖ PUERPERAL FEVER
- ❖ POSTPARTUM HEMORRHAGE
- ❖ PREGNANCY INDUCED HYPERTENSION
- ❖ PAP SMEAR
- ❖ DES
- ❖ DELIVERY
  - OPERATIVE VAGINAL DELIVERY
  - CESAREAN SECTION



# RESIDENCY TRAINING

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## ❖ FOUR YEARS

- OBSTETRICS
- GYNECOLOGY
- GYN ONC
- REI
- MFM
- UROGYN
- OTHERS: Primary care, ER, U/S, Minimally invasive surgery, family planning

## ❖ FELLOWSHIP TRAINING: 3 YEARS TRAINING IN SUB-SPECIALTY

# COMPETITIVENESS

Year	# positions	#filled	# filled US Seniors	% filled US Seniors	% filled
1984	1014	979	844	83	97
1998	1125	1075	928	82.5	95.6
2005	1144	1083	772	67.5	94.7
2010	1187	1182	915	77.1	99.6
2014	1242	1237	950	76.5	99.4



# WORK HOURS

## ❖ Private Practice

- 41 to 60 hours per week
- Similar to other specialties
- Flexibility
  - Depends # partners
  - Nature of practice
  - Allows time for personal life and Family
  - Examples: day off each week, job sharing, part-time, hospitalist, ambulatory care only, gyn only, military, PHS, administrative or academic roles.

# GENDER MAKE UP

## ❖ Fake News:

- Female patients may not want to see male ob-gyn
- Male students not welcome or viable candidates for residency or practice.

## ❖ True News:

- Majority women want(1):
  - Knowledgeable
  - Skilled
  - Communication skills
- Males(2)
  - No difficulty finding jobs
  - Earning power still favors males.

1. Med Econ survey
2. CREOG surveys



# LIABILITY CONCERNS

## ❖ ALL PHYSICIANS

- 7.4% face malpractice claims annually
  - Psychiatry 2.6%
  - Neurosurgery 19.1%
  - Ob/Gyns 11%
- Ob/Gyn 7<sup>th</sup> highest out of 24 specialties
- Programs to curtail impact
  - Birth injury funds
  - Caps on claims
  - Expert witness panels



# TYPES OF PRACTICE SETTINGS

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## ❖ Range

- Clinical
- Academic
- Research

Practice Type	Percent
SOLO	23.6
Single Specialty	27.1
Multispecialty	9.3
Salaried employee private practice	11.2
Salaried employee HMO	2.4
Salaried employee hospital	11.9
Salaried employee Med School	8.8
Salaried employee state or local gov	0.6
Salaried employee fed gov	0.9
Military	1.8
Other	2.3
TOTAL	100.0





# PRACTICE SETTINGS

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## ❖ Solo Practice

- Probably more senior physicians
- Limited approach for new residency grads

## ❖ Single-specialty group

- Most new graduates join
  - Find career
  - Better work-life balance

# PRACTICE SETTINGS

## ❖ General Ob-Gyn

- Consultant
- Primary care physician
- Probably no average day; depends:
  - Number of partners
  - Nature of practice
  - 41 to 60 hours/week & 50-99 patient contacts (80% clinic & 20% hospital)
  - 47 weeks/year devote to practice
  - 2-3 evenings/month: med Soc, committees, med-related activities



# PRACTICE SETTINGS

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## ❖ General Ob-Gyn

- Many are clinical faculty
- Personal enrichment

## ❖ Private practice

- Widest latitude lifestyle or practice model
- Satisfaction index:
  - Long-term relationships patients
  - Practice preventive medicine
  - Challenge diversity of health care over wide spectrum





# PRACTICE SETTINGS

## HMO

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### ❖ Prepaid Managed Care plans

- HMOs and Preferred provider organizations (PPO)
- HMO: system provide comprehensive health care to voluntarily enrolled consumer at fixed premium
- PPOs:
  - offer discounted flat rates or specific charges to a company or group
  - Company sends patients to PPO

### ❖ Physician

- No longer sole decision maker health care provision
- Accept PPO or HMO patients in private practice
- Join as salaried position.



# PRACTICE SETTINGS HOSPITAL EMPLOYED

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- ❖ Ob-gyn hospitalist
  - Manage continuum of care in hospital
- ❖ Laborist
  - Care laboring patients and cover emergencies
- ❖ Advantages:
  - Flexible and predictable work schedule
  - Guaranteed time off
  - Liability premium coverage
  - Decreased pressure of running private office



# PRACTICE SETTINGS ACADEMICS

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- ❖ 9% of board-certified Ob/Gyns.
- ❖ Responsibilities
  - Teaching: Medical students, GME, CME
  - Direct patient care
  - Research and administrative duties
- ❖ Unique discipline
  - Financial rewards tend to be less (but better)
  - Thrives on strong teamwork
  - Commitment to common good.





# PRACTICE SETTINGS PUBLIC HEALTH

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- ❖ Patient is the community: towns, states, global
- ❖ Examples:
  - STI
  - PAP screening
  - Family planning
- ❖ Ob/Gyn leading role preventive med and public health

# PRACTICE SETTINGS





# OB / GYN

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## ❖ Society

- Involved specialty
- Socially exciting specialty
- Must feel comfortable discussing sensitive topics
- Make timely clinical decisions





# ACOG

## WWW.ACOG.ORG

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❖ STUDENT MEMBERSHIP: complimentary

❖ Benefits include:

- Access to the "member" side of ACOG's Web site [www.acog.org](http://www.acog.org)
- Access to the Resource Center, ACOG's library, for research documents, etc.
- Selected ACOG Patient Educational Pamphlets through membership dept.
- ACOG Medical Student Facebook page
- ACOG Rounds Newsletter
- Low registration fee (\$25.00) for medical student events at the Annual Meeting - \*New\* Step Up to Residency Program for 3rd & 4th year students only, John M. Gibbons Medical Student Lecture, Medical Student Reception, OB-GYN Resident Fair, Medical Student Hands-On and CV prep Workshops.
- Member discounts on publications
- Low registration fees at most Annual District Meetings (ADM)



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"Of course I know when most babies are born.  
During dinner."