

Essay: Entering medical school, I “knew” I wanted to be a Family Physician; however, I vowed to keep an open mind. During Obstetrics and Gynecology, I enjoyed seeing patients in the office and the time I spent in labor and delivery. I found Surgery interesting, but missed having continuity with my patients. The complex cases of Internal Medicine and Pediatrics intrigued me, but I missed seeing children and adults together. Such a reflection may leave some students wondering how they will choose a specialty, for me it reaffirmed my desire to be a Family Physician.

The relationship Family Physicians have with their patients is a vital aspect of the specialty. I have been the patient in this relationship and now I have had the opportunity to be in the physician’s role. During my Family Medicine sub-internship, I formed such a relationship with a 22 year-old woman in the ICU who had developed multiple complications during her post—operative period. Even with the surgeons and intensive care physicians involved in her care, she and her family turned to us for answers and explanations. They knew and trusted us, “her doctors”. While we discussed the different procedures and provided reassurance, we also went beyond the medical topics. We talked about her work, her church, and how her parents were coping with this situation while still enjoying the arrival of two new grandchildren. This is an example of how we are our patients’ primary physician and connection to the healthcare team. It reminded me how important it is that we know our patients, their families, and their home environment.

Growing up in a small town, I witnessed how a community depends upon its Family Physician to be a leader and resource. I will not limit my care to my individual patients; I will be involved in my community, working with the schools, service organizations, and free clinics. My involvement as a student leader in the OSUCOM FMIG and FMLDP has prepared me to be a successful leader. Serving as Vice Chair of the OAFP SAC and as Ohio Delegate to the AAFP National Conference, I have further developed my leadership skills. I enjoy working with the OAFP and the AAFP and plan to stay active as a resident and practicing physician.

I know the breadth of knowledge necessary to be a good Family Physician is expansive, and while this can be intimidating, it is why Family Medicine appeals to me. The thought of learning new things with each patient and developing relationships with my patients excites me. Besides curiosity and a thirst for knowledge, a good Family Physician knows true empathy, shows compassion and patience, and has a passion for caring for others. These are qualities I look for in a physician and have worked to develop in myself. I have worked hard to get where I am and although I know the road to becoming a Family Physician will be difficult, I am prepared, excited, and ready to start down that road.