



July 2017

## About me

My name is Jill Trinacty, and I was raised in Berwick, Nova Scotia. I went completed my BSc. (Honours) at Saint Francis Xavier University in Antigonish, Nova Scotia. I spent a year as the Active Living Coordinator with the Town of Kentville then completed my MD at Dalhousie University.

I moved to Ottawa, Ontario in 2013 for my residency in Internal Medicine at the University of Ottawa and am currently a PGY-5 in Endocrinology and Metabolism.

## Why I chose General Endocrinology

In medical school I became interested in almost every area of medicine, but ultimately applied to internal medicine for a number of reasons. I have always been interested in Endocrinology, specifically diabetes. Diabetes affects so many people in our communities and can have significant morbidity and mortality. I liked the detail of internal medicine and the complexity of patients.

Having some previous experience in public health, I knew that I wanted a career that would allow me to discuss lifestyle changes as an aspect of therapy – specifically nutrition and physical activity. I also wanted a career that would allow for work/life balance. Seeing the day-to-day lifestyle of each internal medicine subspecialty confirmed that Endocrinology was the right fit for me.

## Clinical Life

### What does a typical day of clinical duties involve?

This is an example of my typical daily and weekly schedule:

Endocrinology – A typical day	
7:30 – 8:00	Clerical work / Chief resident duties. Review emails, follow up on patient results, approve vacation requests, make call schedule.
8:00 – 9:00	Review inpatient list with consult team. Provide teaching to junior residents based on patients we are following or other major topics in Endocrinology.
9:00 – 12:00	Round on inpatients. Review consults with rotating residents. Liaise with diabetes nurse specialists to review management of patients with diabetes.
12:00 – 1:00	Travel to clinic. Review consults for afternoon clinic.
1:00 – 4:30	Clinic. See new consults and patient follow-ups in clinic with a staff supervisor.
4:30 – 5:30	Division rounds. Rounds are weekly and focus on a specific topic within Endocrinology. PGY-4 and PGY-5 residents are expected to present four times per year.
5:30 – 6:30	Dictations and patient follow-ups. Dictate letters from clinic. Call patients to review results of blood work and provide telephone advice.



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# Endocrinology Resident Profile — Jill Trinacty

Endocrinology – Weekly Schedule at a Glance							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
06:00		Review Emails	Review Emails	Review Emails	Review Emails	Review Emails	Possibly on call (round on inpatients and see new consults)
07:00	Prepare for presentations	Clinic / Inpatients / Research	Clinic / Inpatients / Research	Orientation for rotating residents	Clinic / Inpatients / Research	Clinic / Inpatients / Research	
08:00							
09:00							
10:00							
11:00							
12:00		Lunch/ Review labs / Respond to emails	Lunch/ Review labs / Respond to emails	Lunch/ Review labs / Respond to emails	Case Discussion Rounds	Lunch/ Review labs / Respond to emails	
13:00		Clinic / Inpatients	Longitudinal Clinic	Diabetes Clinic	Half day teaching	Clinic / Inpatients	
14:00							
15:00							
16:00		Dictations	Division Rounds	Dictations	Dictations	Dictations	
17:00							
18:00		Home call (typically 1-2 evenings per week)					
19:00							
20:00							
21:00							
22:00							
23:00							
00:00							

## What kinds of clinical rotations are required in your program?

The PGY-4 year of Endocrinology involves clinic-based blocks and inpatient consultation service. Subspecialty rotations include bariatrics, women’s health, reproduction, lab biochemistry, nuclear medicine, and pediatrics.

The PGY-5 year is more tailored to your interests and can be research-focused, with up to four blocks for research. Community Endocrinology can be done in the 4<sup>th</sup> and 5<sup>th</sup> year. There is also opportunity for elective blocks at other institutions.

## Which of your personality characteristics have been particularly helpful in your field?

Being organized and self-disciplined is an asset in any specialty, because being prepared when you see a patient helps to establish trust and develop the therapeutic relationship, which can sometimes be difficult as a learner. Reviewing test results before patients come to clinic and knowing what the next steps will be shows that you care and are working with the patient to improve their health.

## What are the best aspects of your residency?

Seeing improvement in patients’ conditions and working as a team to support patients. It is so rewarding to have a patient achieve results with lifestyle change, and to follow the same patients over time and adjust management of their conditions based on their particular needs.

## What are the most challenging aspects of your residency?

The most challenging aspects of this specialty are patient engagement and keeping track of lab work and outpatient testing. Diabetes requires consistent day-to-day effort and sometimes patients have a lot on their plate. Diabetes may be the last thing they think about. It's important to keep that in mind when seeing a patient, because although diabetes is the number-one focus for you during the clinic visit, it may not be for them.

This specialty also involves a lot of outpatient lab testing and imaging that needs to be reviewed between visits. Keeping track of this as a resident can sometimes be difficult.

## What is one question you're often asked about your residency?

"Is it all diabetes?"

Many medical students, residents, and even other clinicians often perceive Endocrinology to be all about diabetes management. That is about 50% of what we see in clinic. We are also often managing a variety of thyroid issues, parathyroid, bone metabolism, adrenal and pituitary disease. Many of these clinical issues can be definitively managed, and treatment often results in a significant improvement in the patient's well-being, which is very rewarding as a clinician.

## Can you describe the transition from clerkship into residency?

The transition from junior resident to senior resident in core internal medicine comes with a focus on the role of the physician as manager. Transition from core internal medicine to subspecialty resident was a bit more difficult to navigate because you take on more of a supervisory role and need to let junior residents have autonomy while providing teaching and support.

## Will you be pursuing further training or looking for employment? What resources are available to you for future-planning?

After I complete my PGY-5 year, I will pursue employment. After a decade of training I am ready to work! Future planning is mostly done on your own. Often, institutions will contact the program director with information about open positions and it is up to the trainee to pursue it if it is of interest. For those looking for a career in academic medicine, it is typically expected that the trainee will pursue a Master's or PhD in a clinical scholar position. In this position, you act as staff with your own clinics and you have protected time to pursue your studies.



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## Non-Clinical Life

### What are your academic interests (e.g. leadership activities, research)?

I am Chief Resident of the Endocrinology and Metabolism program. This entails making call schedules, teaching junior residents, and developing curricula for Endocrinology residents. I am currently involved in research relating to patient access to their medical records through online portals and diabetes management at various stages of end of life care. Previously, I was a member of The Ottawa Hospital Physician Wellness committee.

## What is your work-life balance like, and how do you achieve this?

Work-life balance was a bit difficult in PGY-4, as the year is heavily focused on studying for the internal medicine Royal College examination. I was fortunate to have a very supportive group to study with who made the process much easier.

Personally, I engage in physical activity as a way to manage stress and find it helps to clear my mind. I am also a big planner, so I try to map out my week, month, and year so I can allot time to work on projects, presentations, and so on without feeling too rushed or stressed. It is also important to schedule in vacation time and relaxation time and to take full mental breaks from work.

You can follow Jill on Twitter @jtrinacty



## For further information

The Canadian Medical Association website features profiles for more than 35 medical specialties. Each contains information about training requirements, demographic trends within the specialty, information about specialists' practices, levels of satisfaction, and more. Available online at <https://www.cma.ca/en/pages/specialty-profiles.aspx>

Another useful resource is the Canadian Medical Residency Guide, available online at <http://medicine.dal.ca/content/dam/dalhousie/pdf/faculty/medicine/departments/core-units/student-affairs/RBC-2011-Canadian-Medical-Residency-Guide.pdf>

*Disclaimer: These specialty profiles illustrate some aspects of the lives of individual residents, and convey their personal perspectives on the challenges, opportunities, and rewards of their chosen fields. These views may not be shared by all residents, as there is tremendous diversity in lifestyle, experience, and interest among the residents in each specialty.*