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### About me

My name is Ankur Ralhan and I am a PGY-2 resident at Queen's University studying Ophthalmology. I'm originally from St. John's Newfoundland, where I completed my undergraduate medical education. Prior to that, I did a Bachelor of Science in Biology and Mathematics at Mount Allison University in New Brunswick.

### Why I chose Ophthalmology

Choosing a specialty has to be one of the more daunting tasks that a medical student is faced with. The breadth and variety of options seem endless. Unfortunately, the residency match is a competitive process with significant implications. I would advise medical students to explore potential disciplines of interest early in their training, and to acquaint themselves with residents or faculty to serve as their mentors during the decision-making process.

Ophthalmology is the study of the visual system. Our profession provides both medical and surgical care to all age groups. It is rooted in the basic sciences but benefits from the latest technological advances. The visual system is crafted to an exacting degree empowering the skilled clinician. The eye itself is a microcosm for systemic disease and the resultant inter-professional relationships are exceptionally rewarding. Patients are remarkably attentive to their ophthalmic health and grateful for our commitment to protecting and restoring their vision.

## Clinical Life

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

As per the Royal College, all ophthalmology programs are mandated to provide a foundational year of rotations in related specialties. At Queen's University, this includes rotations in Dermatology, Emergency Medicine, Internal Medicine, Neurology, Neurosurgery, Plastic Surgery, Pediatrics, Radiology, and Rheumatology.

The remainder of our training is devoted to acquiring the skills necessary to practice as a comprehensive ophthalmologist. This includes training in each of the ophthalmic subspecialties including: Oculoplastics, Cornea and External Disease, Refractive Surgery, Glaucoma, Cataract, Uveitis, Retina, Neuro-Ophthalmology, Pediatric Ophthalmology, Low Vision Rehabilitation and Ocular Genetics, Pathology, and Oncology. Many of our colleagues proceed to complete fellowships in these areas thereafter.



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At Queen’s University, ophthalmology services are centralized at the Hotel Dieu Hospital facilitating subspecialist consultation. A typical day runs from 0800 – 1700 and involves participation in clinical and surgical care. Faculty led educational activities occur weekly and include professor’s rounds on Tuesday afternoons and Friday mornings, as well as grand rounds and an academic half day on Wednesday mornings. Our department regularly hosts visiting speakers and conducts journal clubs which provide an opportunity for collaborative learning between residents and faculty. Our department also provides funding for residents to attend various conferences in Ophthalmology on a regular basis.

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

I’ve been fortunate in my medical training to be the recipient of graded responsibility and independence. Ultimately, the patients whom I care for are the responsibility of my attending physicians and I am grateful for the opportunity to learn from them. In my opinion, an effective resident is one who continually strives for self-improvement and greater autonomy but actively recognizes the heightened responsibility that comes along with this. As such, I think an effective resident needs to be dedicated, organized, and thoughtful of the concerns of others.

## **What are the best aspects of your residency?**

The Department of Ophthalmology at Queen’s University is based on a culture of collegiality.

We are a team and work hard to ensure the best experiences for our patients and learners. Our administrative staff, technicians, residents, fellows, and attending physicians are all very approachable and dedicated to facilitating our success. As residency involves a great deal of independent study, it is helpful to have experts just an email away.

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

Balancing professional and extracurricular responsibilities is one of the most challenging aspects of medical training. Given the length of our training, I think it is important for medical learners to develop strategies to combat burnout early on in their career. Personally, I find having a routine with regular exercise, hobbies, and social activities to be preventative.

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

Clerkship is a very challenging part of a medical learner’s training. It involves consolidating a broad base of knowledge obtained in pre-clerkship through a series of diverse rotations. The difficulty of clerkship rests in its dynamic learning objectives and environments.



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In addition, clerks face the daunting task of selecting and preparing to apply to a preferred discipline. In contrast, residency involves graded learning objectives and responsibilities in a narrow set of learning environments. This allows the resident to thrive by understanding their role within the workplace and the resources available to them. It also facilitates longitudinal learning by enabling the resident to fully embrace the teaching styles and expertise of their individual preceptors.

You can follow Ralhan on Twitter @ralhan\_ankur.



## 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.*