



June 2019

About me

I was born and raised in Edmonton, Alberta. I did three years towards an Honours Immunology and Infection degree at University of Alberta, then attended the Cumming School of Medicine at University of Calgary, Class of 2016. I am currently completing my second year of Psychiatry at University of Manitoba.

Why I chose Psychiatry

I have always had an avid curiosity for people's stories as I believe our stories shape our wellness. In an era where medicine emphasizes efficiency, I was attracted to a field that looks more closely to the process of healing. Although Psychiatry doesn't produce the same adrenaline rush as some other medical fields, I enjoy forging a more concentrated and intimate relationship with my patients that lead to growth and recovery. All in all, Psychiatry is an art of Medicine and I look forward to honing my craft until I retire.

Clinical Life

What does a typical day of clinical duties involve?

Psychiatry is a unique and varied field of Medicine, and our training reflects this quality. We have longer core rotations (usually 3-6 months), which also encompass longitudinal components of training. The result of this combination is that our days are quite different. In general, I expect a few hours of direct patient contact from my core rotation and psychotherapy training, alongside with their associated supervision time. Other common components that will add to my schedule include longitudinal community elective time, research and academic protected time, and service requirements. With this mix of clinical practice, I think it is essential to hone my time management skills, but the benefit is that I am always 'on my toes' and excited about my day.



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Psychiatry Resident Profile — Audrey Nguyen

Weekly Schedule at a Glance								
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
06:00								
07:00								
08:00		Chart review	Outpatient Follow Up	Longterm Psychodynamic Follow Up	Outpatient Follow Up			
09:00		Outpatient Consult	Outpatient Clinic Supervision	Academic Half-Day / Research	Charting	Outpatient Consult	Yoga	
10:00								Outpatient follow up
11:00	Studying	Outpatient follow up	Grand Rounds			Cross Service Rounds		
12:00		Day Call	Transportation	PRAM Meeting		Outpatient follow up		
13:00				Family Therapy	Transportation	Charting	Supportive Psychotherapy Supervision	
14:00					Outpatient Consult	Outpatient follow up	Outpatient Follow up	
15:00				Long-term Psychodynamic Supervision				
16:00	RDoC Work		PARIM Meeting	Charting	Transportation	Charting		
17:00		Charting		Transportation	Call	Transportation	Social Event	
18:00	Wellness	Gym	PARIM Work	PARIM Meeting		Work Social Event		
19:00								
20:00		PARIM work						
21:00								
22:00								
23:00								
00:00								

What kinds of rotations are required in your program?

University of Manitoba Psychiatry has a robust rotating PGY-1 ‘internship’ year that has five on-service rotations (Elective block, Research, Psychiatric Intensive Care Unit (ICU), Emergency Psychiatry, Addictions Medicine), and 7 off-service rotations (Internal Medicine Clinical Teaching Unit (CTU), Pediatric CTU, Selective block, Emergency Medicine, Neurology, Neuroradiology, and Family Medicine), and 4 weeks of vacation. Long-term psychodynamic psychotherapy training starts in first year, which is unique about our program.

The proceeding years are quite similar across the nation. For instance, in second year we focus on General Adult Psychiatry divided in six-month blocks of outpatient and inpatient work. Again, distinctive factors about my program is its emphasis on psychotherapy training throughout residency. We also have community electives each year to explore different branches of Psychiatry.

Which of your personality characteristics are particularly helpful in your field?

Personality traits that have helped me in Psychiatry would include my attention to detail (or if you're in Psych, my "obsessive compulsiveness"), empathy and understanding, and hardworking attitude. I think if you are passionate about where you want to go in Medicine, that will take you very far irrespective of the field.

What are the best aspects of your residency?

My co-residents! Psychiatry at University of Manitoba is a large enough program that there is ample opportunity to learn and befriend many co-residents, but not so large that we feel distant from each other. I regularly spend my weekends or evenings with co-residents doing everything from grocery runs to study sessions to lazy days on the beach. It is a blessing to have the support and mentorship of other residents.

What are the most challenging aspects of your current role?

The first challenge of Psychiatry is how to maintain one's resiliency despite being a part of difficult patient stories. It's a balance between remaining empathetic and present in our patients' lives without being wholly consumed by their stories. Secondly, our program trains residents in different psychotherapeutic modalities from our first year. This robust training gives us breadth, but also demands managing our time/schedules effectively.

What is one question you're often asked about your decision to pursue a non-clinical career?

I think there is a curiosity from medical students about choosing Psychiatry in general. My advice to you is find an area of medicine that intrigues you. For me, I enjoyed many different areas of Medicine, but Psychiatry stood out as the most interesting. Everyone will define interesting differently, and that should also help you in your discovery of Medicine. Find a field that will still make you curious 5, 10, 15 years down the road.

Can you describe the transition from clerkship to residency?

The transition from clerkship into residency is a whirlwind of emotions. It was a bittersweet goodbye from my home province moving to a new city. However, I reminded myself that I was heading towards a well-respected program and that I would be a more well-rounded physician by the end of my training. One way to help reduce the shock of starting residency would be to slowly add more responsibilities (whether in reality or not) to your plate during clerkship. I regularly mentor medical students with questions such as, "how would you approach this issue if you were the resident on call?" Similarly, ask questions! That's the only way you'll learn. Lastly, be assured that your training has prepared you for this transition and that it's expected that you'll feel a little nervous. You still have a team to support you.



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Non-Clinical Life

What are your academic interests?

I have far too many interests! I have always had a passion for medical education, and I want to pursue teaching communications and mental health. My other non-clinical love is medical leadership, and I foresee pursuing further work in Associations and/or Colleges.

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

Work-life balance is an ongoing goal! I continue to pursue my passions and hobbies and that helps bolster my mood. I have learned that prioritizing and setting aside time to replenish makes me a more effective physician. Build a strong support team for yourself. I find my supports provide perspective when I am too narrowly focused.

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.