



October 2019

About me

My name is Ryck Schielke and I have a rural Family Medicine practice in Cranbrook, BC (including low-risk Obstetrics, Vasectomies, rural ER, and surgical assists). I'm originally from Rosalind, AB and completed my Urban Family Medicine residency at the University of Saskatchewan in Saskatoon.

I initially worked for ten months in an urban Saskatoon practice before transitioning to completing a series of locums in Port Hardy (Vancouver Island), Whitehorse, La Loche and La Ronge (Northern Saskatchewan). I also spent three months practicing tropical medicine in The Democratic Republic of the Congo (DRC).

Prior to my residency I received my Bachelor of Science (Biology Major) at the University of Alberta (Augustana Campus) and was in the University of Alberta Medicine class of 2014.

Why I chose Family Medicine and this location.

For the longest time, Family medicine wasn't interesting to me. I always wanted to do something flashier and more specialized. After completing my first block of Rural Family Medicine in medical school, I realized there was nothing else I would rather do. The diversity of work and ability to engage in so many different types of medicine fascinated me.

My career path has been quite circuitous thus far. I ended up in Cranbrook because of a love for the mountains and rural practice. With a population of around 20,000 people, it provides good support and work-life balance that is hard in smaller towns; while maintaining the diversity of medical practice I enjoy.

Clinical Life

What does a typical day of clinical duties involve?

A typical day	
08:00	In-patient rounds. I round on any patients in my panel that have been admitted to hospital.
09:00-12:00	Work in the clinic. Some days I work as an OR assist. I perform vasectomies on Thursday and Friday mornings. I take off Monday and Wednesday mornings.
12:00-13:00	Lunch break
13:00-17:00	Work in the clinic. I take Friday afternoons off.
17:00 and on	I practice low-risk obstetrics and have a rotating call schedule with nine other physicians.



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Weekly Schedule at a Glance									
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
06:00									
07:00							1 in 9 weekends I am on call for the entire clinic's in-patients.		
08:00		In-patient Rounds	In-patient Rounds	In-patient Rounds	In-patient Rounds	In-patient Rounds	1 in 9 weekends I am on call for the entire clinic's in-patients.		
09:00		Off	Clinic	Occasional Operating Room (OR) assist	Vasectomies	Vasectomies			
10:00					Clinic	Clinic			
11:00									
12:00									
13:00		Clinic	Clinic	Clinic	Clinic	Off			
14:00									
15:00									
16:00									
17:00									
18:00									
19:00									
20:00									
21:00									
22:00									
23:00									
00:00									

How did your Residency/Fellowship program prepare you for practice?

a) Were any rotations particularly helpful?

In rural practice you need to know a little about many different fields of medicine. I found a diversity of rotations helpful. Rotations in more challenging areas of rural medicine like obstetrics and emergency medicine were very helpful, especially rural experience in these areas.

b) Were you given specific practice management training?

I was not.

Did you seek any resources outside of your residency/fellowship training to prepare for practice?

I tried to get certified by as many specific courses as possible e.g. Advanced Trauma Life Support (ATLS), Advanced Cardiovascular Life Support (ACLS), Neonatal Resuscitation Program (NRP), Advances in Labour and Risk Management (ALARM), bedside ultrasound etc. My program covered the cost of a lot of these courses, and they are very helpful to have when working rurally.

Can you describe the transition from residency/fellowship to practice?

I intentionally transitioned to a Family Medicine clinic where I had worked on elective during my residency training. This was very helpful as I knew the staff and had a mentor in the clinic to answer my many questions. I also knew the Electronic Medical Record (EMR) system, making the transition to an independent practice much easier.

What are the best aspects of being in practice?

I love rural Family Medicine and all the diversity it offers. There is no shortage of programs I could join or skills I could employ to fill gaps in patient care in the community. The comradery and the relationships I have developed with the specialists and other family doctors is very special.

What are the most challenging aspects of being in practice?

Working as a locum was a very difficult but rewarding part of my practice. I was transported to several new health care systems and practices and had to adapt and learn so much each time. Then just as I got settled, I packed up and moved to the next one.

What is one question you're often asked about being in practice?

"How do you maintain a sufficient work-life balance?"

Is there anything you would do differently in residency now that you are in practice?

I would probably try to develop diagnoses and treatment plans as if I had no chance to review it with staff. It sounds obvious, but one of the hardest things was developing a plan and not having any one check over your work and give you the okay.

What are your colleagues like and how do you interact with each other?

I have amazing colleagues in my clinic and as specialists. Rural Medicine allows for more relationships with other physicians which is very beneficial.

How do you achieve your CME hours (i.e. do you go to conferences, read journals, etc.)?

If you have an up-to-date account it will save you in this department, as it is a nice back up if you need a few more Mainpro+ points. I attend about one conference per year and otherwise have been attending specific courses (e.g. ATLS, ACLS).



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Non-Clinical Life

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

I would like to further pursue research in Family Practice. I have started to train residents at our rural site as well.

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

I would say I have an excellent work-life balance because I joined a clinic that let me set my own schedule. The other crucial component is taking on a panel of patients that is small to begin with. I found at the beginning my days weren't

always full, but this was a good thing as it gave me more time to get used to independent practice. My best advice here is that you can always take on more responsibilities, but it is hard getting rid of them once you have started, so go slow!

Are there any major differences in your non-clinical life now compared to residency?

I find I just have more freedom with my own time and schedule which is lovely.

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