



December 2019

### About me

My name is Yael Bensoussan and I'm from Montreal, Quebec. I graduated as a Speech Language Pathologist in 2010 and now am a PGY-5 and Chief Resident in Otolaryngology – Head and Neck Surgery (OHNS) at the University of Toronto.

### Why I chose Otolaryngology

I initially went to school and studied to be a Speech Language Pathologist. As a previous singer, I had a real interest in the human voice and the functional aspect of swallowing. When I was first accepted to medical school, I didn't know if I wanted to be a surgeon, so was exploring other options.

However, when I was a clerk in OBGYN I remembered thinking how much I was going to miss being in the operating room once the rotation ended. OHNS seemed like the perfect fit, allowing me to balance my medical and surgical interests, while delving deeper into my curiosity around voice, swallowing, and the larynx itself.

## Clinical Life

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

A Typical Day	
6:00-7:00	<b>Rounding</b> – See all inpatients, and develop care plans for the day before teaching rounds
7:00-8:00	<b>Teaching Rounds</b> – Presentation developed by one of the residents on rotation and provided to fellow staff and resident physicians.
8:00-17:00	<b>Operating Room</b> – Complete cases for the day, assist junior resident with emergency department and inpatient consults between case
17:00-18:00	<b>Evening Rounding</b> – Re-evaluate all inpatients and check in on post-operative patients from the day
18:00- 19:30	<b>Royal College Teaching</b> – Attend department led teaching to prepare for royal college
19:30-20:30	<b>Operating Room (OR) Prep</b> – Prepare for next day OR cases
20:30-21:30	<b>Chief Resident Administrative Tasks</b> – Respond to emails, complete resident scheduling and department event organization



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Weekly Schedule at a Glance							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
06:00		Round	Round	Round	Round	Round	
07:00			Teaching Rounds				
08:00		Operating Room	Operating Room	Operating Room	Operating Room	Operating Room	
09:00							
10:00							
11:00							
12:00							
13:00							
14:00							
15:00							
16:00							
17:00		Evening Rounding	Evening Rounding	Evening Rounding	Evening Rounding	Evening Rounding	
18:00		Royal College Teaching	Royal College Teaching	OR Prep	Department Skills Workshop		
19:00		OR Prep	OR Prep	Research	OR Prep		
20:00		Home Call			Home Call		
21:00							
22:00							
23:00							
00:00							

### What kinds of rotations are required in Otolaryngology?

In fifth year of residency, we complete all of our rotations in OHNS. In Toronto we will often rotate through four different hospital sites over the course of the year, with some residents completing community-based rotations. This is also the year we complete our Royal College Examination.

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

I think it's extremely important to be adaptable. As a trainee in a large centre, you work with a wide variety of personalities from staff, fellow residents, and allied healthcare professionals. It takes a concerted effort to successfully adapt to different hospitals, supervisors, and teams every few months. Everyone has their way of doing things.

I feel it's important to be able to handle stress and challenging situations. Particularly in surgical residency, the work environment is high paced. There are times when the amount of work in the hospital can become overbearing, and this can be difficult to deal with when criticism occurs from patients and staff. I think being able to take a step back, be humble, try your best, and not take things personally helps to get through those time.

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

The best part to me is when I work on the head and neck. You have to communicate with the patient and then utilize our toolbox of medical and surgical interventions to help them. I also find being an airway surgeon gives me energy. We need to think fast, and I really love that thrill.

Next year I'll be starting my Laryngology fellowship. It's the perfect subspecialty for me, I'm passionate about the human voice and love to help individuals work to communicate again. It's a huge impact on people's lives to help them regain vocal function.

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

While I love the thrill of being an airway specialist, it also means that we're often called to assist with adverse situations that will have poor outcomes. We often deal with very sick patients and it can be challenging to deal with unfortunate outcomes when they occur.

### What is one question you're often asked about your decision to pursue your specialty?

I think the most common question I get asked is, "What do you do, exactly?".

I find most people don't understand the scope of our practice; when I tell someone I'm an Otolaryngologist (or Ear Nose and Throat doctor), they think we only look into people's ears. Many people don't realize we're also surgeons, and even when they do learn we are head and neck surgeons, they think it means we operate on the spine. People are often unfamiliar with the different nuances of our work until they need us.

### Can you describe the transition from junior to senior resident?

It can be a hard transition. When you're a junior resident, you get really good at completing "Scut" work; placing orders, completing the OR notes.

I remember when I was starting in PGY-3 and we were about to start an Awake Tracheostomy. I was working to get the room ready and pre-fill the orders, and the Fellow at the time looked at me and said, "No Yael, you're doing the surgery".

That transition took some getting used to - as you start doing more surgeries, you also start dealing with more complications.

I think another notable change was the increasing leadership requirements. It can be hard to be a good leader, to get the team working together, make everyone efficient, be a good example, get your points across in a firm - but respectable - manner. This is something that you learn as you go.



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### **If applicable, can you describe your experience with the subspecialty matching process? What resources did you find helpful for this (e.g. choosing electives)?**

I went through the Laryngology interview process in PGY-4 and found the amount of available information online sparse.

The best option was going to subspecialty meetings, speaking to staff and those who recently went through the match. Networking with these individuals and others by email helps to build your network.

For my electives, I visited nine locations and spent about 1-3 days at each place. I found this was a good amount of time to be able to meet people and get an understanding of what the programs offered while maximizing my exposure to different centres.

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

I'll be completing a Laryngology fellowship next year at the University of South California in Los Angeles. I'm still building my network to identify future job opportunities. I think being upfront with what you're looking for is important to finding a fulfilling job and am currently pursuing places of interest.

## **Non-Clinical Life**

### **What are your academic interests?**

I really enjoy taking on leadership positions and most recently was chosen to be the Chief Resident during my PGY-5 year. I'm really enjoying how diverse the role is, and love helping to organize the social and academic events, along with communicating with my fellow residents as they grow.

For research, I'm very interested in exploring topics like surgical safety, quality improvement, and patient satisfaction.

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

I had a kid during residency, so work-life balance is crucial. Firstly, I think it's extremely important to have a great partner. My partner was amazing at collaborating with my schedule. I also think it's important to realize whether you need to hire help for your family, and not feel bad for doing so.

Setting priorities was paramount. If there is work to do at the hospital, you need to get it done while ensuring you're prioritizing family as well. This might mean missing out on some social events so that you can be home with your child and partner.

As time has gone on, I've found my efficiency has improved and find that really helps.

In the end, it's tough having a child as a surgical resident, but you can definitely have a family during residency, and it's 1000% worth it. If you're at that point in your life, I think it's compatible and I would do it again. I feel lucky because when I have a bad day, I get to come home to a smiling, wonderful 2-year-old that loves me.

That always reminds me about what really matters.

*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.*