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Mr. Speice

Independent Study and Mentorship- 3A

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Internal Medicine Career Outlook

Research Assessment 2

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Works Cited:

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Assessment:

Prior to studying Obstetrics and Gynecology in ISM 1, I had already conducted my personal research over the field and was quite knowledgeable from the beginning. However, ISM 2 will be quite different due to the fact that I have little to no prior knowledge on Internal Medicine and what it entails. Many people go “back to the basics” when grappling with a new or unknown topic, which is what my career outlook has allowed me to do as I begin my extensive research on Internal Medicine.

When an individual, specifically one that is completely unaware of the medical field, thinks of a physician, they are most likely automatically drawn to the definition of an internal medicine physician. The job description of a general “internist” or “hospitalist”, depending on the environment in which they work, is one that consists of primarily working with adults and treating a broad spectrum of illnesses. What sets an internal medicine physician apart from other physicians is the fact that they do not perform any real surgical procedures. I find this to be quite interesting, and I am not sure if it is in a good or bad way, because every other specialty that I have been remotely interested in includes some aspect of surgery. This raises the question, will the daily activities and responsibilities of an internal medicine physician become too routine over time? From my experience in ISM 1 and through my study of Obstetrics and Gynecology, I came to realize that procedures, such as cesarean sections and tubal ligations, were one of the only things that made every work day different from the other. This subject is one that I would like to focus on as I continue my research and interviews over Internal Medicine. I am going to strive to discover the full extent of the responsibilities that an internist has, which will allow me to get a full sense of the job and make a more informed decision about my future.

An internist is just a physician that decided to pursue general internal medicine and did not subspecialize. However, those who decided not to subspecialize may also work as a hospitalist, which consists of working in a hospital setting. When I discovered the two options offered to those who study internal medicine, it made me wonder about the advantages and disadvantages of each path. From the basic definitions of each option it is quite safe to infer that those who work as internists are more equipped to form long lasting relationships with patients. Their private practices allow them to serve as primary care physicians to the people in their

community. On the other hand, the hospital would provide the platform for new and interesting cases to appear, making every single day a new and unexpected one. Considering my desire to be challenged and to continue growing, I am interested in furthering my research on hospitalists and even interviewing some in order to get a better sense of their daily lives.

The path to becoming an internist is much less time consuming than other specialties, which is something that I do not find surprising at all since internists have not had further education in certain body systems. In order to become a general internal medicine physician, a student must obtain a bachelor's degree that fulfills all the prerequisites for medical school. From there, the future physician must spend four years in medical school and then complete a three year internal medicine residency. Compared to the 12 years and onward education of other specialties, such as neurosurgery, internal medicine provides a nice break from that and may be quite motivating for me if I realize that I am truly passionate about this field. However, if subspecialty becomes an option, that could add one to four years of fellowship training. This fact makes me also want to interview subspecialists of internal medicine, such as gastroenterologists and cardiologists, in the next couple of weeks. Subspecialties range from endocrinology to infectious disease, which makes internal medicine a fantastic stepping stone for many incredible specialties. The opportunities that are also provided for subspecialty will allow me to explore many areas for my future original work and final product. Therefore, if I was ever unsure about what path to take, internal medicine is also an option that could lead to a multitude of great careers. Considering the shorter length of education required to become an internist, a smaller salary is to be expected. What I did not know, however, was that internists make one of the lowest salaries compared to other physicians. The median salary of an internist is around

\$196,000 while around 25% of these physicians make approximately \$119,000. Furthermore, I have learned from family members in this field that hospitalists can potentially make more money than internists because of their ability to take extra shifts at multiple hospitals. This new knowledge, combined with my prior knowledge in internal medicine, provides me with comfort in pursuing this topic. Overall, a salary of around \$196,000 is not that different to me than a salary of \$300,000. Both incomes allow for a life of comfort and the occasional luxury, which is all that I am looking for in terms of income. However, what does concern me about internal medicine is the relatively low job prospect of around 9%. While this job prospect is still quite positive, when it is compared to other fields in the medical field, such as obstetrics and gynecology, it is quite low. This is most likely due to the high number of medical school students becoming internists, which will likely make for more competition to get into prestigious residency programs. Also, in Texas specifically, there is quite a high concentration of internists and hospitalists when compared to states like California and Florida. This is something to consider while studying my topic in the next couple of weeks and to research into more.

While there are many prospective medical students that are interested in internal medicine, or may just fall back on it, not everyone can become a superior internist. Other than requiring the typical physician characteristics, like compassion, empathy, dedication, and a warm bedside manner, internal medicine requires people with good problem solving abilities. I have always considered problem solving as one of my strengths and something that I would like to experience in a job, which is why fertility specialty has also always interested me. The realization of this fact was my major “aha moment” throughout my career outlook research because it made me much more hopeful of enjoying this specialty and my ISM experience this

year. Overall, my first look into internal medicine has left me quite skeptical about the job due to the relatively low growth rate compared to other medical specialties. Also, I have fears that the job may feel too routine and become uneventful. However, these fears have me more interested and motivated to take the next step in my ISM 2 journey and schedule interviews with a wide variety of professionals. This includes internists, hospitalists, subspecialists, physicians assistants, and more. Being able to interview with individuals from all aspects of the medical spectrum will not only provide me with clarity on my current topic, but also more insight that I can use in the future.