To the Editor: Changing Specialties Brings Challenges but Also Great Opportunity

Michael G. Rydberg, MD

I read with great appreciation the excellent article written by Thackeray and Harris on switching fields during residency training.[1] As a physician who faced significant uncertainty when initially choosing a specialty and then successfully shifted into a different specialty during residency training, I wanted to expound on the experiences for readers (and program leaders helping trainees through these decisions). As a medical student, I enjoyed nearly all of my rotations. Though many may find this surprising, my favorites were urology and internal medicine. After much deliberation, I applied for urology residency and matched at an outstanding program. I started residency and found that I loved my co-residents and attendings, but I did not enjoy urology and surgery as I thought I would. I kept these feelings hidden from everyone for months. I was performing well and pressed on.

Somewhat fortuitously, my residency program included significant training in kidney transplant and critical care. I, unlike most of my co-residents, loved these months and the medicine involved in transplant care and the intensive care unit. My doubts deepened. I enjoyed these rotations far more than the urologic surgical rotations.

I decided to continue on with the start of my second year in urologic surgery training with the thought of switching fields lingering in the back of my mind. As summer turned into fall, I finally started talking with close friends and mentors from medical school about my dilemma. My mentors were universally supportive and ultimately affirmed my desire to switch into internal medicine after hearing about what I liked, and what I did not, about the 2 specialties and what I wanted in my career.

I arranged a meeting with my program director to tell him my final decision. It felt like I was asking for a divorce from people who invested in me and cared for me, and it easily counts as one of the hardest discussions I have had in my life. My program director sat with it, said something along the lines of trying to keep me in the field, and then said he would help me in any way possible. Telling my co-residents was the next hardest task.

Interviewing for a different specialty was better than expected. Most programs were excited to interview someone from a surgical specialty who realized they wanted to go into internal medicine. I found a program that valued my prior experience, matched, and thrived in internal medicine residency. I loved my training and subsequently served as a chief resident in internal medicine at the institution. To this day, I am profoundly grateful that I decided to switch fields. While it can be an incredibly isolating process, switching for the right reasons can bring joy and perspective in medicine. I agree wholeheartedly with Thackeray and Harris: give the decision time, talk with mentors, and excel in your initial field while you are considering a switch. And while the process may seem daunting and even impossible, your life and your career satisfaction are worth it.

Reference

1. Thackeray EM, Harris MJ. Strategies for successfully changing specialty during training. *J Grad Med Educ*. 2024;16(6):637-640. doi:10.4300/JGME-D-24-00394.1

Michael G. Rydberg, MD, is a Clinical Instructor, Division of Geriatric Medicine, University of North Carolina at Chapel Hill, Chapel Hill, North Carolina, USA.

Corresponding author: Michael G. Rydberg, MD, University of North Carolina at Chapel Hill, Chapel Hill, North Carolina, USA, michael.rydberg@unchealth.unc.edu

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