FREQUENTLY ASKED QUESTIONS – 2019

Program:  GENERAL PATHOLOGY

Specialty/Field Questions:

1.  a) What are some strengths about your specialty? What draws and keeps people in your specialty?
   • The opportunity to understand the nature of disease in an in-depth way that isn't achieved in any other specialty. You get to practice scientific diagnostic medicine over a broad range of subjects and you have a fair degree of control over your schedule. You are very much a part of the team taking care of the patient (it just isn’t as obvious!), and this is becoming even more apparent in the era of precision medicine.
   • Although there is limited direct contact with patients, there is a great deal of contact with a variety of clinicians outside the laboratory as well as with physician, PhD, and technical staff colleagues within the laboratory. We get satisfaction from the interactions we have with others, and knowing that we are helping a clinician take the next step in diagnosing or treating a patient. The stereotypical image of the hermit-like pathologist who stays in their office and never talks to anyone is rapidly disappearing in today’s pathology practice.

   b) What are some common complaints about your specialty?
   • There is limited direct clinical contact – you’ll never have an office full of patients who regard you as their doctor and most pathologists have a hospital-based practice which can limit professional autonomy.
   • You often have to sit/stand at a microscope and/or computer a lot, so sometimes you need to get creative about staying active during the day.

2.  Why did you choose your specialty?
   • Potential breadth of practice. Although it is true that a pathologist who actively practices in all 4 areas (anatomic pathology, hematopathology, medical biochemistry, and medical microbiology) is very rare today, having that broad-based training is perennially useful and also situates you well for leadership roles within the laboratory.

3.  What types of clinical cases do you commonly see?
   • The entire gamut of clinical problems has a counterpart in pathology. You can practice as a subspecialist or as a generalist depending on your interest and on the needs of your practice environment.

4.  Briefly describe a typical day.
   • Depends upon the setting. Pathologists are involved in rounds, laboratory supervision, and direct diagnostic work in biopsies, surgical pathology, hematology, autopsies, etc. Academics do academic things; community-based pathologists often have major roles in their institutions/medical staff organizations. Some pathologists do procedures such as fine-needle aspiration and bone marrow aspiration and biopsy procurement. Evening and weekend call is variable and in many settings is light compared with many other specialties. Call is always taken from home and usually the problems can be solved over the phone or by a brief hospital visit.
5. a) What are the varieties of lifestyles within your field?
   - It is possible to do pathology and do it well and still have a life outside medicine. Most pathologists work regular office hours and work quite hard during the day, but don’t haunt the hospitals at night!

b) Specifically, how able is your specialty to accommodate family life?
   - Relatively easily. Working hours are regular for pathologists and there is usually enough flexibility to deal with life’s other demands as you need to. As described, call is variable in terms of how busy it is, but even during a busier call week our family still sees us!

6. Range of incomes?
   - In Alberta, pathologists are paid on a standard grid, depending on experience, and are well-remunerated. Pathologists do have our own specific overhead costs, but generally do not have the kind of overhead required by maintaining your own clinic or office.

7. How do you see your discipline changing over the next decade?
   - While morphology will remain the mainstay of diagnosis, there will be increasing usage of molecular techniques for both diagnosis, prognostic determination and treatment responses. These will be exciting changes.

**Residency Program Questions:**

8. a) What are you specifically looking for in an impressive candidate?
   - Someone who is hard-working, self-motivated, able to function as part of a team, and who is passionate about understanding the nature of disease and contributing to patient care. Communication skills are of prime importance given the nature of our work.

b) What can a potential candidate do now, in order to be an appealing applicant to your program?
   - Acquire a sound foundation of medical knowledge, develop excellent communication skills both with patients and other medical colleagues, and do electives in laboratory medicine to see if this is the right choice for you. Research activities, whether basic (bench) or applied, are encouraged.

9. How is your residency program organized? (i.e. year by year breakdown and schedule of rotations)
   - General Pathology has launched Competence By Design in 2019! In CBD, the previous structure which divided the programs into PGY years will instead be replaced by the following 4 stages. The overall length of the program is expected to be 5 years for most residents.

   1) Transition to Discipline
   - Includes basic skills and concepts not necessarily covered in medical school, including laboratory safety, microscopy skills, principles of specimen handling and workflow in the laboratory, and basics of laboratory testing.
2) Foundations of Discipline
- Includes rotations in relevant clinical specialties (Infectious Diseases, Hematology, Medical Oncology, Surgery, Radiology, etc.) and exposure to selected procedures such as fine-needle aspiration and bone marrow biopsy.
- Experiences in normal histology/morphology, frozen section, autopsy, and grossing of simple specimens are also included, as are experiences in the biochemistry, hematopathology (including transfusion medicine) and microbiology laboratories.

3) Core of Discipline
- This stage comprises the bulk of the program (at least three years) and includes:
  - Rotations in anatomic pathology (including selected subspecialty areas such as neuropathology, cytopathology, etc.) and,
  - Rotations in the three clinical pathology areas: biochemistry, hematopathology and microbiology, with exposure to and benchwork in the various subdisciplines of each.
- Trainees will continue to acquire skills and knowledge to become effective and knowledgeable laboratory consultants, not only regarding histology/morphology and the generation of accurate and comprehensive laboratory reports, but also regarding laboratory management.

4) Transition to Practice
- In this stage, trainees consolidate their skills to work independently and demonstrate leadership in rounds, teaching and other activities.

10. What is your residency program’s orientation and focus?
- The goal of the program is to train highly competent pathologists who will be equipped to pursue careers in whatever setting of laboratory medicine they choose to work, and who will make substantial contributions to their health care communities as experts in laboratory medicine, collaborators with their colleagues inside and outside the laboratory, leaders, and teachers. The program aims to deliver high-quality training across all the laboratory medicine disciplines and exposure to a wide variety of laboratory environments.

11. What is the availability of experiences in subspecialty areas during training?
- Subspecialty training is built into the program, with opportunities to further pursue particular areas during electives.

12. Are there sufficient elective opportunities during training to explore your special interests?
- Yes – electives can and have been done in any field of laboratory medicine, and in a variety of environments from large centers to small rural hospitals.
13. What is the on-call schedule during each year of residency?
   - When on clinical rotations, as per the clinical rotation.
   - The frequency and business of call depends on the rotation and the number of trainees, with transfusion medicine and hematopathology being typically the busiest. Call is taken from home and returns to hospital are infrequent for some areas and nonexistent for others.

14. What distinguishes the U of A program from other programs?
   - The greatest strengths of the program include large volume of cases and strong support from all laboratory disciplines. Having residency programs in Anatomical Pathology, General Pathology, Hematopathology and Medical Microbiology at UofA means the programs reinforce rather than compete with each other and foster skills and opportunities in collegiality for the residents.

15. a) Who can we contact for more information or to set up electives?
   - Our program administrator, Ms. Kathryn Tomlinson. She can be reached by email at kathryn.tomlinson@ualberta.ca.

   b) Specifically, is there a list of residents whom we can call or email?
   - Yes – please contact Ms. Tomlinson for contact information.

16. How competitive is it to get in, and then to succeed in your field?
   - A motivated, high-quality candidate has a very good chance to match to their program of choice. Succeeding within the field requires commitment and willingness to continue to work hard. Given its breadth, there is a great deal to learn in General Pathology, but for many of us that is what attracted us to it in the first place!

17. a) Is there active and/or required research in your residency program?
   - Every resident is expected to complete a research project during residency. It does not have to be basic research. Residents must also present their research at our annual research day at least once during their residency. If residents are interested in and are able to do more, they are encouraged to so!

   b) What role does research play in your career?
   - Research is present in varying degrees among pathologists. Our research strengths include a world-renowned renal and transplantation pathology research program. Some are 75% research, 25% clinical practice, while others do no research at all. It is pathologist-dependent.

18. What local, national or international conferences would be of benefit to candidates interested in your residency program?
   - The annual Banff course on subspecialty pathology, the Canadian Association of Pathologists (CAP) annual meeting and the United States and Canada Association of Pathologists’ (USCAP) meeting are all regularly attended by residents and pathologists.