Graduating from Residency

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“It’s for the best,” I say to my parents over the phone. We have been talking about canceling their flights and their planned trip for our program’s residency graduation. Our training program already canceled its reservations at a local restaurant for graduation and, as a pandemic rages around us, some sort of virtual ceremony seems all but certain.

“Really,” I insist, “It’s just residency graduation.”

Residency graduation often attracts less attention than other milestones in medical training. Undergraduate and medical school graduations are known for their pomp and circumstance, the gowns and the mortarboards, the crowds and the commencement speakers, the processions and diplomas. More than 44,000 residents graduated from US training programs during the 2017 to 2018 academic year, but residency graduations are usually more intimate affairs [1]. Ceremonies might include certificates, remarks, and perhaps some awards over a luncheon or a dinner.

As one physician wrote about residency graduation in 2011, “At the initiation of your residency, after having received a medical degree, you were legally a medical doctor. Now that you have finished your formal training, you have the potential to become a true Healer” [2]. This transition from a physician to a more capable physician can seem ill-defined. After all, residents typically do not get any new degrees or letters after our names upon graduation. Keeping track of the differences between medical students, residents, fellows, and attending physicians can be challenging for patients, patients’ families, and our colleagues. This year, residency graduations may seem even less important amid a pandemic.

Yet, residency training is a profound part of becoming a physician, and its completion warrants a moment for reflection. After medical school, residents work within the specialties that we have chosen and grapple with enormous new responsibilities in patient care, ranging from prescribing

medications to ordering diagnostic tests to pronouncing someone’s death. Despite these increased responsibilities, residents remain under supervision by more seasoned clinicians. Residents often work alone in the hospital overnight, managing dozens of patients and all kinds of life-threatening situations, but we typically need permission from supervisors to discharge someone home. Residents spend hours documenting patients’ histories, current conditions, and treatment plans, but attending physicians still have to review our notes and co-sign them for approval. Residents sit in clinic with patients whom we have seen for months or years and developed close bonds with, yet there is still that knock on the door at the end of each visit as an attending steps in to review the plan together.

Residency is a stage in medical training where independence and dependence overlap, where autonomy and supervision blend together. Residency graduation marks the threshold before we can practice on our own. Some might describe residency graduation as the end of a physician’s formal training, but our training never truly ends and, as written by two of my medical school professors, all physicians need to be “life-long learners and adaptable practitioners” [3].

Over the years, much has been written about the career choices, salaries, and financial debts of graduating residents. Surveys often ask graduating residents about their confidence with managing specific conditions, their abilities to complete certain procedures, and their attitudes toward their training. Yet, the actual moments of graduating from residency can mean a great deal to trainees. These celebrations provide opportunities for thanking mentors, for introducing family to faculty and friends, for saying goodbyes to colleagues, for pausing and commemorating what these years have meant.

Every year during residency, we received invitations to our program’s graduation, and I had assumed that our class might have a similar celebration. Then, a few months before graduation, a pandemic hit, and our program dispersed. Much of our outpatient and inpatient care moved to telepsychiatry. Resident didactics moved online. Our annual resident retreat was held via videoconference. Just before my co-residents and I crossed the threshold of residency graduation, the practice of

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psychiatry, and the world around us, seemed to turn upside down.

In response to the pandemic, many residency programs are rearranging graduations and moving them online. This is understandable, and online graduations may offer some benefits, such as enabling family members to attend virtually who might otherwise not have been able to do so. Still, there is a wistfulness to not being able to come together and to say goodbye in person. I am reminded of an informal talk that I once attended before residency, where a faculty member said, “You will make some of the deepest friendships of your life during residency. These will be the people standing next to you in the middle of the night, who have your back when you don’t know what to do.”

He was onto something. Residency graduation is just one of many milestones in medical training, but it is still one worth celebrating even, and perhaps especially, during a pandemic. Across the country, some residents will stay local and work where they trained, but many will head off to different fellowships, to different jobs, to different cities. We were always going to disperse at some point, but a pandemic hastened our farewell. It is time to use our training from before this

pandemic, as well as what we are learning now and what we learn in the days ahead, to help our patients.

When the world needs it, true healers are on the way.

Compliance with Ethical Standards

Disclosure The author states that there is no conflict of interest.

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