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An Interview with Dr. Ray Whitt, MD, FACOG

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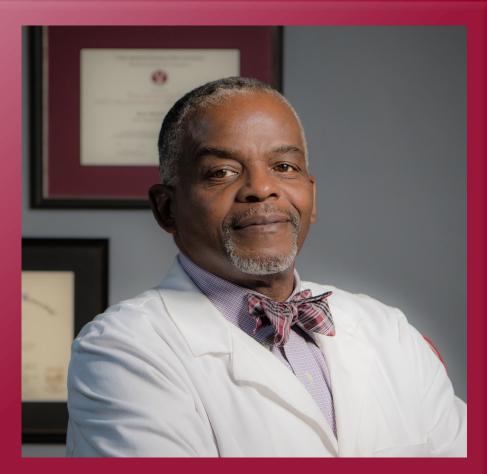
DR. RAY WHITT, MD, FACOG

INTERVIEWED BY Q&S EDITORS-IN-CHIEF, GILLIAN HECHT AND BRINDA RAVAL

Q&S: Where did you grow up and what was your early life like?

Dr. Whitt: My father was in the Air Force so we grew up all over. My parents are both from Alabama and met and got married there while my father was in the military. I have four sisters and one brother, and we all get along really well. We ended up traveling around a lot - from Alabama to Texas to Japan and eventually to Delaware. We then moved to the upper peninsula of Michigan, then to the Goosebay in Newfoundland, Canada, and later to Southern California. By the time I was 15, we finally moved to Colorado. My father was still in the military, that's where we stayed and bought a house. I went to high school in Denver, Colorado.

I had a lot of interests, but I could always draw so I ended up going to a local art school to study graphic design. In high school, I was very good at it, but then when I went to art school, I learned everybody is very good at it. I think I discovered other people had a lot more creativity than I did. After school I worked for about two years doing graphic design for a Colorado newspaper - someone used to type up all of the pages and then we would put wax on the



DR.RAY WHITT, MD, FACOG

ATTENDING PHYSICIAN- DEPARTMENT OF OBSTETRICS AND GYNECOLOGY METROPOLITAN HOSPITAL CENTER (NEW YORK CITY HEALTH + HOSPITALS) CLINICAL ASSISTANT PROFESSOR OF OBSTETRICS AND GYNECOLOGY FORMER CLERKSHIP DIRECTOR OBSTETRICS AND GYNECOLOGY ADVISORY DEAN, NEW YORK MEDICAL COLLEGE back of it to make the layout! It was fun!

I was really a young man then, just out of school, and I wanted to work at a big ad agency in New York City because that's where I imagined big ad agencies were. Fortunately, I didn't really know how to go about doing that. Instead, I got a job working as a flight attendant for United Airlines. I thought I would do that for about two years at most, but I ended up working there for 15 years. There are a lot of really nice things about that job, one of them is you have a lot of time off, and the other is that you can go anywhere you want at almost any time. A friend would call and say "we're having a party in Chicago tonight," so I'd finish my flights and then get on a plane and go! It's just like getting on the bus or getting on the train. I had a very good experience and a chance to see a lot of things. But I'm afraid I have developed a fear of flying now!

Q&S: How did you get into medicine?

Dr. Whitt: I knew I wanted to do something else. When I was a kid I used to get these little microscopes and chemistry sets for Christmas. I liked science and enjoyed it all the way through school. It was sort of in the back of my mind as something that would be challenging. I worked as a flight attendant, and trust me, that's challenging; you're on a plane of 300 people and everybody on that plane is your boss. But, I decided when I was about 28 years old I would become a doctor. My third-grade teacher said "you can do anything you want to do," and that stuck with me. I thought about becoming a doctor and I said, "I can do

that."

I didn't have an undergraduate degree, so I had to go back to school. I went to Fordham University while I was still working. I took a lot of classes because I just wanted to know everything. I got a double major, applied to medical school, and thought if I got into medical school I would just quit my job.

I got accepted to Einstein in 1991. I worked out my flying schedule as best I could and I didn't have to take out student loans. At the time I was flying back and forth, six trips a month to San Francisco or Los Angeles over the weekends. I didn't know how long I would keep the job, but when I finished my third year, it occurred to me that I was actually going to graduate medical school and become a doctor so I could probably stop working.

When you finish your second year of medical school you get a lot of advice. Back then, I was thinking about going into pathology, and I remember scrubbing in on my first surgery during my rotation, and the surgery resident looks at me and says "what are you going into?" I said "pathology" because no one told me when you do your surgery rotation and they ask you what you're going into, you just say surgery. The resident started to yell at me and said "Don't ever say that in public!" I continued to remain interested in pathology. even after I matched into OBGYN. Deciding on which residency to apply for can be very difficult. When I was in medical school, it wasn't unusual for doctors to do two different residency programs in different specialties. I turned 39 the year I graduated medical school. Had I'd been younger, I think I would have followed up my OBGYN residency with a pathology residency.

Q&S: How did you get interested in OBGYN?

Dr. Whitt: I thought it might be nice to deliver babies. I watched my first delivery and I was pretty fascinated. I was with a resident and a patient getting ready to deliver and they basically just pushed me in there, and I just had to make sure the baby didn't fall on the ground. Afterward, the resident said, "Okay, now go home and read up on how you're supposed to do it." That may not be the best way to learn, but I have to tell you, after doing those deliveries I was sold. It's a tough residency, there's a lot to do, but I think every residency is tough when it occurs to you suddenly that you are responsible. You are the doctor. But I did enjoy it, and the joy of delivering babies took a long, long time to wear off. I used to get in trouble for stealing deliveries from the residents!

Every year, someone schedules their OBGYN clerkship last because they have no intention of going into it, and then they fall in love with it and come to me asking if it's too late. And I always reassure them that it's not too late.

It's nice to walk down the hall and see someone whose baby you delivered long ago, and they remember you and show you pictures of the baby. After they are finished having children, their children become my patients. A few years ago, a young couple came in and their mothers were both in the delivery room. We realized I had delivered the baby's father, and then I got to deliver his baby!

Q&S: What have you enjoyed most about your job?

Dr. Whitt: I really enjoyed the patients that I have, and it was re-

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ally important to me to work with the patient population at Metropolitan. I think the most rewarding part of my job is working with medical students. I became the site director at Metropolitan sort of as default, everyone else had done it and I figured I would do it for about five years. I did it for over twenty! We have a different generation of students now; it used to be really cutthroat and competitive. Now, you all help each other out and have really good camaraderie. I enjoy seeing students progress throughout the rotation, and I enjoy it when they keep in touch years later!

Q&S: What is the best piece of advice you've given or received?

Dr. Whitt: My younger sister is a nurse, and this is the best advice I can give you. I give it to all medical students. Be nice to nurses! And really, be nice to everyone! Everyone has a role, from the students to the attendings. You have to treat everyone with respect and dignity.

Q&S: What have you found most challenging about a career in medicine?

Dr. Whitt: Paperwork. There's always paperwork that needs to be done. If that's the worst part of the job, it's probably a good job.

I can share a difficult story with you though. For a moment, I thought I wanted to do pediatrics. It was the early 1990s, HIV was relatively new, and it was a death sentence. I had a five-year-old boy on my service who was born HIV positive. He was fortunate just to have lived that long. He just sat in his bed, looking out the window, and waiting for his mother to come and visit. She never came. I went to visit every day, and one day I walked in and he wasn't there. I asked the nurse what happened, and she said he had died overnight. To this day, the image of him staring out the window and waiting for his mother is still imprinted in my mind. I had a hard time getting through the rest of that rotation, I couldn't walk past that room at all. I think now if something like that happens, there are mental health professionals to help you out, but we didn't have that sort of thing, and I knew I was not strong enough to be a pediatrician.

Q&S: How do you deal with loss in your career?

Dr. Whitt: Unfortunately, I think residency hardens you. You realize that difficult things happen and you just have to move on. In OB, our patients lose pregnancies or have postpartum depression and I think you just have to be there for them. You have to listen to them and send them to other services who can treat their mental health better than you can. You make sure they have the services they need, you treat them as individuals, and you treat them as human beings, not just disease states. Residency is tough, and you have to not let it harden you. Whatever it is that you love to do, that gets you away from medicine, do it. It's hard to find a balance, but you have to try.

Q&S: How do you think a career in medicine transforms who you are? Do you feel like you're the same person you were when you began your journey?

Dr. Whitt: I don't know if I had a really big metamorphosis, I think I was just waiting to find myself.

If I had it to do over again, I would do it all the same way. I've been very lucky.

I suppose I'm the same person when I'm sitting here and I'm different when I'm there [in the hospital]. You really have to give a lot of yourself to your patients, you become very involved in other peoples' lives, and you become very important to them. You really shouldn't take that lightly. That sense of responsibility isn't difficult, it just becomes who you are. It's what's expected of you, and you want to do right by your patients.