UCSD COMBINED FAMILY & PSYCHIATRY PROGRAM NEWSLETTER
PGY 5

What I love about my last year of residency and what are plans after residency

Aaron: This year, I'm considering what I want to do after residency. There are a lot of different areas I am interested in, so I have had to more deliberately look at what I've enjoyed over the last five years. Right now, I’m considering academic medicine and looking at ways I can be more involved on a system level to improve care. Another thing I love about this year is the chance to work more with my counterpart, Dr. Ahmed. I feel very fortunate that he is my better half. He is a very thoughtful person and we’re incorporating togetherness activities with a game night coming up!

Safi: Currently I’m at the VA as an inpatient psychiatry senior. I’m surprisingly enjoying the role despite finding it odd not seeing patients, not writing notes. Most of it is teaching the newbie interns, supporting the residents and then offering support for burnout and promoting wellness as some residents are struggling to juggle the demands from their peers, nursing, attendings, life, families, etc.

I’m currently applying to integrative medicine fellowships with a focus on the underserved. There are only 3 programs dedicated to underserved, so if that doesn't work out, I'll have to explore different community health clinics and FQHCs in the San Diego area.

It has also been great working Dr Meyer on a shared vision of combo togetherness. You quickly learn to rely on your fellow residents during training and beyond so we hope to foster more camaraderie amongst the combos as well as categorical Family and Psychiatry residents.

PGY 4

What I love about combined training and our program

Maryam: In 2009, I came to UCSD with the dream of becoming a neurosurgeon. My doctoral research was done in the neurosurgical operating room and my data obtained directly off of the human cortex. I thought that I was destined to be a neurosurgeon. However, I gradually became aware my main reasons for being drawn to medicine lay in the possibility for direct work with people; the possibility to render science helpful in the context of a meaningful human relationship. My work at the UCSD Student-Run Free Clinic Project during my first two years of medical school as well as the year I spent working with Dr. Chris Searles, a physician board certified in family practice and psychiatry, on the mobile medical clinic run by
St Vincent De Paul and my psychiatry clerkships solidified my resolve to pursue a path towards practicing combined family medicine and psychiatry. When I reflect on my most notable clinic days, my most salient memories are those of patients with severe mental illness coming in for a physical exam or management of chronic medical condition. In my mind’s eye I see my patient with paranoid schizophrenia and COPD. I see her face light up when she learns that she can have both medical conditions managed by the same physician. I feel a chill run up and down my spine, as I think I too can be that physician. I become charged with enthusiasm and a passionate sense of purpose as I imagine my future as “the physician for the mentally ill.”

Ellie: What I love about combined training is the ability to be able to offer comprehensive care to my patients. Given the patient population that we work with (primarily homeless and underserved), I think it is very important to be able to take care of and assist with as much as possible when you see your patients without having to shift them to another provider/clinic/specialist. And I am such a believer in the mind/body connection, and so to me it is important to be able to be best prepared to work with my patients on that intersection.

What I love about our program; Our clinic and all the people involved! Our clinic is just the best. Every single person who works/volunteers at our clinic- from the front desk to the case managers, to the nurses and MAs (and everyone in between)-all have the same passion for our patients, and all go above and beyond simply to do what is right for our patient population. It’s a joy and a privilege to be able to work with such great humans, and I don’t think you'll find any other place like it.

PGY 3

Mari: I love working at SVDP for both primary care and psychiatry. SVDP was one of the leading reasons why UCSD Combined training was my top choice. The clinic has many diverse interdisciplinary services that allow us to provide comprehensive care to a population that is hungry for resources. The staff is so supportive, so caring, so fun and so like-minded when it comes to serving the underserved, all of which make each day unique and meaningful. It is so nice being at the clinic 3 days a week - it allows for continuity of care and the ability to help patients get through acute crisis'. Since we are in Family Medicine clinic more frequently than prior years, we are able to see more OB patients, well-child visits, and do more procedures. The addition of Psychiatry clinic to our schedules this year has been so enriching. Seeing new patients (when they show) is fascinating and challenging. Seeing follow ups can be very energizing and gratifying, since patients often say how much better their lives have been since getting psychiatric care at SVDP, and their charts often support this improvement!
**Kanwar:** What I love is being a part of an amazing and dedicated team providing services to truly helping underserved, homeless patients. It’s so incredible to be able to see a patient who is struggling to manage their health and address both their psychiatric and physical conditions, staff them with attendings that are well versed in both family medicine and mental health. Our talented M.A.’s ensure their needs are met, walk them to the pharmacy to get them a pill box and their meds, then the case managers for their referrals and their cane/walker, have their labs drawn and then have our expert social worker help them find a potential source of income and possibly even a place to live all within a single visit to the clinic. This allows us as providers to truly help them with their conditions by providing truly integrated care for the whole patient. I couldn’t imagine a more fulfilling experience as a provider or for our patients.

**PGY 2**

**What I love about the support at UCSD**

**Leo:** one of the reasons I chose to come to this program is because of the cohesiveness amongst the combined residents. We understand our unique experience and do not hesitate to be there for each other throughout this journey. The current chief residents have just implemented a monthly “togetherness event.” Also, we have wellness committees in both the Family and Psychiatry departments. The members of these committees are residents who make sure they reach out to their peers to provide support during difficult rotations or difficult personal or professional experiences. I remember receiving an uplifting page from wellness when I was on my OBGYN rotation; it put a smile on my face and made my day! The combo program directors are also very supportive.

**Allie:** When I was a student, I remember looking for residency programs that conveyed a certain sense of empathy not only to their patients, but to their trainees as well. I was lucky to have found such a place at UCSD and to have experienced this outpouring of support first-hand. As any resident, I have faced unexpected challenges at home and at work, along with the expected difficulties in managing ever-increasing responsibilities during residency. In each situation, I have been the grateful beneficiary of solidarity from my colleagues, who recently took on extra work without question or complaint when a family emergency arose; from my senior residents, who regularly check in to offer advice for upcoming rotations; from attendings, who model a healthy work-life balance and support residents in this endeavor, and from administration, who responds quickly and efficiently when logistical questions arise. Because I feel well-supported, I feel secure in my work; I respond better to stress; and I enjoy a sense of community that makes my job that much more meaningful to me.
Anish: Living in San Diego has been great! As an undergrad at UCSD I took the city mostly for granted, but something about the culture and lifestyle kept calling me back once I left here. I knew I wanted to return sometime in the future. Fortunately, the combined program accepted me, and this time around, I’m experiencing San Diego County in a very different way. I’m immersing myself in the culture as much as I can, attending events at the Del Mar Racetrack, going to farmers' markets, playing beach volleyball, and learning to boogie board (graduating to surfing soon). My goals are to visit the ocean at least once a week and to commute to work by biking and taking the train. I’m so grateful to be down here and have a community that supports my beliefs and me — it has been vital to both my physical and mental health. This is where my heart feels at home.

Hannah: This is my first time living in San Diego and I can’t wait for winter! I wonder if it gets cold? There are windows everywhere and I’m loving the sunshine. My vitamin D levels are probably back to normal now. The beaches are minutes away and nature is definitely therapeutic. There’s so much great food, especially Japanese ramen. What I’m most shocked about is how genuinely kind and welcoming everyone is. Not to generalize but people are more willing to chat and take the time to ask about your day. Coming from the East Coast, daily interactions are more rushed and direct, which has its pros and cons. Very pleasantly surprised with everything San Diego has to offer and I can’t wait to explore more of the city!
Kudos

Kudos to Aaron for winning the excellent consultant award from the ED

Kudos to Aaron and Safi on their excellent work as chiefs (and the togetherness night they put on!)

Kudos to Leo and Mari for helping out with the newsletter and reviving kudos!

Kudos to Ellie for doing the UCSD OMT night clinic!

Kudos to Mari and Kanwar for the successful transition to 3rd year

Kudos to Hannah and Anish for the successful transition into internship!

Kudos to Dr Lindeman for all the above kudos!

From Anish: Kudos to Kanwar for letting me borrow his car the day my bike got stolen.

From Leo: Kudos to Hannah and Anish for all their hardwork so far with intern year!

From Leo: kudos to Safi and Aaron for the togetherness events!

From Brissa: kudos to Leo for her work with Dunya’s Women Health Initiative and refugee women who have undergone female genital cutting.
How are you using your combined training in your current career?
My combined education perfectly prepared me for a career in underserved medicine. For the first eight years or so after graduation, I worked at a community health clinic (CHC) both in FM and in psych. After getting to know the leadership better, I was afforded the opportunity to start shaping an integrated behavioral program at that CHC. During the implementation, I was always grateful for the support and wisdom of fellow alumni, Gabe Rodarte. He has blazed those trails at another nearby CHC. I am also grateful to another alumni, Shayna Walker, who played a fundamental role in the success of that program at our CHC and now is the Clinical Director. I recently switched jobs from the CHC setting (combined admin/clinical) to an all administrative role for San Diego county. Assuming no huge changes at the federal level, I will be helping to implement an integrated and coordinated substance use disorder system of care in San Diego County. I can't imagine being able to do this without my combined education.

What were some challenges transitioning from residency to career job?
I didn't have any major struggles with this since five years is a long time to train! I did find it hard to practice strictly FM in a CHC since I was so heavily utilized as a psychiatrist. And that is tough to do psych all day in an FM clinic schedule. I couldn't sustain that.

Looking back at your residency training, what are some pearls of wisdom you will give to the current residents?
I have no medical or career pearls since I am confident, if you made it this far, you'll find your path. I think if I had to do anything differently along my path I would it learned more about personal finance. Five years is a long residency and I didn't realize that delaying student loans and retirement savings wasn't wise. I recommend a very short and good read "white coat investor"
How are you using your combined training in your current career?
I work at Neighborhood Healthcare a Federally Qualified Health Center (FQHC) in San Diego and Riverside counties as their Behavioral Health Medical Director. I mostly practice Psychiatry but I have about 90 patients that I provide primary care for. All of my primary care patients have some sort of BH diagnosis. A lot are adults that have severe Intellectual disability or autism. I also go to group homes to provide psychiatric services at Board and Cares and Group Homes for adults with Intellectual disabilities and behavioral issues. Recently I have been implementing substance abuse services at Nhcare, implementing Medication Assisted Treatment (MAT) for opioid use disorders and alcohol use disorders. My combined training has been extremely helpful in my current job as it gave me a unique perspective and understanding of primary care and psychiatry allowing me to effectively integrate BH services into our primary care centers.

What were some challenges transitioning from residency to career job?
Finding a job that would allow me to practice both psychiatry and primary care was a bit difficult. The village is quite unique, finding a setting where I could practice both primary care and psychiatry seamlessly took some work. I found having control over who I see for primary care was very helpful. Otherwise I was sent all the personality disorder and somatizer patients for primary care, which was challenging in a very busy primary care practice.

Looking back at your residency training, what are some pearls of wisdom you will give to the current residents?
Think hard about what you want to do when you are done with your training. You will have a unique skill set but it does not necessarily translate well to traditional medicine. Most settings will not know what to do with you. Paying someone like us to do traditional primary care does not make financial sense to some people (therefore most of job offers I got were going to pay me less if I spent time doing primary care). Find a niche where you can really utilize your combined training.
Also when I graduated combined training I knew very little about the research around integrated behavioral health in primary care. Hopefully that has changed but if not I would encourage you to learn about integrated behavioral health as I think combined trained physicians are ideal for working in these environments.
Good Luck to you all and feel free to contact me if you have any specific questions or just want to talk. If you are looking for a job we love combined residents here so don't hesitate to email or give me a call!

Dr Gabriel Rodarte
1) How are you using your combined training in your current career?
I use my combo training everyday, which I am very grateful for. For example as the director of behavioral health I am integrated within my entire community health center. I am fortunate to be able to teach in a multidisciplinary site and also feel comfortable managing complex patients with medical conditions. It's great that I can integrate patient care and seamlessly be an educator in my current role.

2) What were some challenges transitioning from residency to career job?
In residency, I wish I was more attentive to the business of medicine as I am now more involved in the administrative part of my role. I often think I need an MBA or project management degree due to the many responsibilities of leading a department. I learned from many role models (past combos!) about how to navigate the system/business of health care but I think that is the most challenging part of my job. I think no matter what patient is thrown at us clinically we are prepared however it's the people and administrative management that is often the most difficult part of my day.

3) Looking back at your residency training, what are some pearls of wisdom you will give to the current residents?
Enjoy that time as much as possible as it goes by fast. Please invest in your loved ones and family members during residency and don't forget to rest. Take care of yourself and remember -"All will be ok"
OUR LEADERSHIP

OUR PROGRAM DIRECTOR AND ASSOCIATE PROGRAM DIRECTOR

Dr Lindeman is a graduate of the UC San Diego Combined Family Medicine and Psychiatry Program. Dr Lindeman had the honor of accepting a faculty position with UC San Diego upon graduation and Program Director role within the Combined Program. In addition to providing integrated physical and mental health care at Father Joe’s Villages Family Health Center he is the psychiatrist for Father Joe’s Villages Tenant Services team, coordinates the Behavioral Medicine curriculum for the UC San Diego Family Medicine Residency Program.

After medical school, Dr Le completed a one year psychiatry internship at King/Drew Medical Center then transferred to UC San Diego Combined Family Medicine and Psychiatry residency program. Her heart lies with helping a variety of patients in the primary care setting. She currently enjoys working with both family physicians and internists at 5 different outpatient clinic locations. As Assistant Program Director of the Combined Program, Dr. Le is looking forward to all the exciting aspects of residency including recruitment, education, and everything needed to make this program as strong as ever.

OUR PROGRAM COORDINATOR
Brissa Chavez
200 W. Arbor Dr #8809
San Diego, CA 92103
Phone: 619.233.8500 x1535
email: combinedresidency@ucsd.edu

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COMBO LOVE

By Maryam Soltani