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No Limits

As I approach the end of my four years of medical school, I can't imagine myself being happier in any specialty other than OB/GYN. While I was certainly very excited about having a role in the miracle of childbirth when I helped to deliver a baby in my first year, it wasn't until I experienced the specialty in its entirety as a core clerkship student that I developed a passion for OB/GYN. One week I would be in the clinic doing prenatal checkups or counseling women on preventive health, and the next week I would be using my hands in the operating room to hold a laparoscopic camera or to close the skin of a patient who had just undergone a hysterectomy. I found it so fulfilling to be involved in my patients' health at various stages of life and to take on multiple roles -as primary care physician, ultrasonographer, obstetrician, and pelvic surgeon- all at once.

However, there were several times during medical school when I asked myself, "What if I'm making a mistake?" Other people had often questioned my decision to pursue a career on OB/GYN. "Babies are born at all hours of the day and night! It's a very demanding career. Are you sure you have the physical strength and endurance to work such long hours? Are you mentally strong enough to handle the bloodiness of childbirth? And most importantly, when will you ever have time to raise your own family? You may think that you love OB/GYN now, but once you get married and have kids you'll change your mind. You'll be so fatigued and resent yourself for not choosing an easier career where you could spend more time with your children."

I was truly disappointed that people in my day and age were still trying to pressure me, as a woman, to pursue a "mommy track" and devote my entire life to my children, regardless of what I actually wanted to accomplish for myself. It was as if my ultimate purpose in life was to be a good wife and mother -nothing else mattered. I had envisioned myself becoming an advocate for women's health issues and a leader in perinatal ethics research. If I chose to dedicate my time and attention towards these goals, would that really make me less of a woman?

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Despite these supposedly well-intentioned concerns, I was steadfast and persistent in my decision to pursue a career in OB/GYN. Underlying that decision is a strong conviction that a woman's identity should not be defined solely by motherhood. No one demonstrated this better than my most influential mentor and role model, Dr. Christina Davidson, whom I first met during my OB/GYN core clerkship.

When I walked into Dr. Davidson's office for the first time, I noticed that she had stacks of medical literature on her desk and on her bookshelf, just like any other attending physician. However, I immediately sensed a very personal touch from the photographs and artworks displayed around the room. Her daughters were lovingly embracing each other and smiling at me from a photo on her desk. In another photo, one of the girls was carefully poised like a dancer ready to initiate intricate movements. Up on the wall was a portrait of Dr. Davidson herself, hand-drawn and colored with markers on construction paper. Yet if I

had never stepped foot in that office, I would not have known how much Dr. Davidson's children were a part of her life. On the Labor and Delivery (L&D) and antepartum wards, she was 100% focused on providing the best care for her patients and the best education for her medical students and residents. She was always happy to spend extra time reassuring patients about their hospital course, reviewing evidence-based practice guidelines with the residents, and answering questions for the medical students.

What I appreciated most about Dr. Davidson's approach to practicing maternal-fetal medicine was that she advocated for the mother's wellbeing as much as advocated for the baby's wellbeing. Instead of telling women that they were obligated to take a certain course of action solely for the child's sake, she encouraged women to play an active role in decision-making and to weigh the risks and benefits for both themselves and their baby. Whenever mothers were concerned about the potential impact that certain interventions would have on their own health during and after pregnancy, Dr. Davidson was very sympathetic and gave serious consideration to these concerns. Because of her empowering approach to patient care, these women did not feel trapped by their pregnancy. Instead, they felt that their autonomy and their health truly mattered.

I was ultimately not dissuaded from pursuing the career that I am most passionate about because I

have learned that there are truly no limits to what a woman can accomplish in her life. Motherhood does not require us to sacrifice who we are or what we believe in. Dr. Davidson modeled this for me not only through her own work-life balance but also through her empowering approach to guiding pregnant women in making difficult decisions regarding their health. Now when I look into my future, it is defined not by my success in giving birth to children, but rather, by my success in helping women to accomplish their health goals, both within and outside of motherhood.