

Department of Psychiatry & Behavioral Neuroscience Psychiatry Residency Training Program

Resident Perspectives

Julia Purks, MD



PGY-1 year is off to a great start, especially now that I've learned my way around the hospital and feel comfortable with the workflow. I'm in my second month of inpatient psychiatry at Ingalls Memorial Hospital. It's a community-based hospital on the South Side. Our other affiliate unit is in Evanston, where the patient population and resources are very different. So as a trainee, I'm looking forward to getting the full spectrum of experience between the two locations. This year, I will spend approximately 6 months on-service (inpatient psychiatry, consult-liaison psychiatry, and an elective of my choice) and 6 months off-service (internal medicine, neurology, and emergency medicine).

PGY 1

PGY 2

My experience on the inpatient psychiatry unit at Ingalls has been truly outstanding! I've been fortunate enough to work with a highly diverse, often complicated patient population that allows for an incredibly rich training experience. I feel like I've seen it all in just my first two months. I couldn't do it without the

tremendous support of the faculty and the PGY-2 on site with me, Alex. My attendings are always available and willing to teach while still respecting and supporting my autonomy. I ask Alex questions all the time about Epic, the workflow, and general program stuff, and she is always happy to help. Not to mention, she is great company to have while working on notes in the resident workroom. Even though I'm a new intern, I've still had the chance to offer some tips and teaching to third-year medical students, which I didn't realize would be so fun and fulfilling. They are an integral part of the team, and it's quite rewarding to watch them improve each week on the rotation.

It has been a pleasant surprise to have more free time than I expected during intern year, and I've been able to explore many parts of Chicago this summer. Coming from Vermont, where I did medical school, I was a little worried the city would be too big and overwhelming. Instead, I've found it to be pretty perfect. My fiancé and I have absolutely loved visiting the various neighborhoods to see friends, finding vintage shops, biking along the lakefront, exploring different beaches, and trying new restaurants and bars. Thus far, Chicago has been manageable, affordable, and, most importantly, very, very fun. I feel confident that I chose a great residency program in a great city, and I look forward to seeing what the next few years bring.



Emilie Sohl, MD

 2^{nd} year is off to a great start! This is by far the hardest year of our residency program and just about everyone agrees. This year is about honing in the skills we started to build last year and "senioring" as we welcome our new interns. These tasks can seem daunting, especially because 2^{nd} year is when residents do the bulk of call, but I feel so lucky entering this year surrounded by brilliant, supportive, and motivated peers. If I have a question about anything, which happens a lot as a resident, I feel comfortable reaching out to any faculty or resident.

One of my favorite parts of 2^{nd} year is that we start doing psychotherapy! We all start off with 1 patient, which allows us with the time to both learn psychotherapy, but also to dis-

cuss with peers and our faculty. We have a weekly psychotherapy course, where we have both a set curriculum and where we are given the freedom to support and teach each other through individual insight. I knew I loved psychiatry, but I didn't realize just how powerful it can be to train with peers who share that same excitement about psychotherapy! We are constantly building each other up, checking in both clinically and non-clinically and we always make time for fun activities.

The last part I love about our program is our desire to support one another both academically but also in our outside lives. We have people of all ages, from all areas of the world, and who are all in different chapters of live, yet we all get together to stay connected. For example, in just the first 2 months of this year, we already were invited to our program director's home for a dinner party, invited to our chair's home for a beautiful evening of food and fun, had a BBQ at a co-resident's home, had a payday pizza party, and a birthday beach day! I am so proud of our program and while there are always ways to improve, I feel empowered to bring up issues with our leadership and feel that changes are constantly being made to benefit us.



Maggie O'Brien, MD

The end of my second year marks the close of the majority of our inpatient training and the beginning of outpatient. By this time, we feel comfortable with acute stabilization on the inpatient side, rapid diagnosis assessments in the emergency department, and complex comorbid medical issues on the CL service.

As third years, we each get our own office to see our clinic and therapy patients. It's been so great to have my own space to decorate and to welcome patients into. Not to mention a personal test to see how long I can keep a few plants alive! For outpatient clinics, we can either have four half-day clinics with a half-day dedicated to research or five half-day clinics. I've chosen to lead a research project on

narrative medicine in psychiatry. Fingers crossed, I'll have a few submissions from our work this year! Our general adult and child clinics spend the full year, allowing for continuity between patients and providers. We also choose six-month elective clinics, such as geriatrics, addictions, personality disorders, neuropsychiatry, treatment-resistant depression, medpsych, student mental health, LGBTQ mental health, women's mental health, transplant, eating disorders, memory clinic, neuropsychiatry, and psycho-oncology.

One of my favorite parts of third year has been the increased time and resources for psychotherapy training, mainly focused on psychodynamic and cognitive behavioral therapy. We take on 8 hours' worth of psychotherapy patients per week and have two separate individual supervisors as well as office hours with a therapist specializing in CBT. Perhaps the best part of third year is the end of call as you know it! Any call I take is optional internal moonlighting, meaning I sign up for it willingly and am paid for my time and effort.

The benefit of our class size is that you grow to know your class deeply over time. I'm grateful for the friendships I've developed with my classmates and for the support we continue to provide each other. We love exploring the amazing city of Chicago together! We're looking forward to attending Lollapalooza this weekend. The city is a mosaic of constantly changing restaurants, bars, rooftops, concerts, and various festivals to entertain me at on the weekends. I'm so happy to call this city my home and feel very excited for the year ahead.



Zachary Bean, MD

PGY-4 has a few structured requirements, though otherwise allows for you to cultivate your personal interests as you prepare to finish residency and enter attending-hood. These requirements include outpatient clinics, an ECT rotation, serving as a chief of a clinical site, a research project, a forensics experience, a grand rounds presentation, teaching didactics to PGY1s, and a quality improvement project. Possible additional experiences that my fellow PGY4s are involved in include intensive forensic elective, clinical medical ethics fellowship, pharmacology and pharmacogenomics fellowship, MBA

PGY 2

at Booth School of Business, and auditing courses at the university.

I personally am in the treatment-resistant depression and addictions outpatient clinics. The former involves evaluation for ECT, performing the ECT, and/or the consideration of psychotropics including TCAs and MAOIs. The latter includes the treatment of both substance-related and obsessive-compulsive disorders and is overseen by one of the leading experts in the field. I will complete my junior attending at Ingalls, our inpatient unit, shortly. Regarding psychotherapy I am involved in both a weekly psychoanalytic seminar (led by trained analysts) including the study of literature and consultation on our own patients, as well as an acceptance and commitment therapy seminar with our psychology trainees. I am very interested in medical education and am currently training under the MS3 clerkship director to soon lead some of their didactics! Additionally, I am one of two administrative chief residents (shoutout to Robert!) as well as filling the chief role for our consultation-liaison service.

I love the University of Chicago. This department is filled with incredibly supportive and dedicated people. In a residency program I sought a 'home away from home,' and having been here for three years I can attest that I found just that. We have superb mentorship opportunities and a plethora of clinical exposure, which makes me feel confident in my abilities as I near more independent practice. Our psychotherapy training is astounding and surely one of the draws for the program. As I reflect on my time here, I can say wholeheartedly that I would do it all over again. After graduation, I plan to complete a fellowship in consultation-liaison psychiatry.