

# The Value of Mentorship Inside and Outside the OR

Mentorship, which keeps retina alive, occurs in places other than the OR.

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**T**raining as a surgical fellow is a unique challenge. As fellows at the University of Louisville School of Medicine, we have found that the relationship we have with our mentors, although similar to other mentor-mentee relationships we have encountered, entails more than surgical training and reviewing cases.

Although surgical training is an important component of mentorship, we have found that mentors in retina often dedicate time and energy to areas outside of surgical training. In this article, we highlight the importance of surgical and nonsurgical components of mentorship, remind current mentors of their importance, and offer a fellow's perspective on the importance of mentorship.

## SURGICAL TRAINING

Retina surgery can be intimidating for first-year fellows, and mentors who help to ease fellows into the surgical process can reduce fears and build confidence. Starting with work in a wet lab or on animal models gives surgical fellows the poise required for surgery; without such practice, the simplicity of trocar insertion or core vitrectomy could trip up a surgical fellow.

Beginning training with relatively easy surgeries, such as vitreous hemorrhage with flat retina, before introduction to more challenging cases allows fellows to build their skill set in a stepwise fashion. Although it may seem obvious that mentors should challenge their fellows to increase their competence, mentors would be wise to remember that a slow, methodical approach will yield greater surgical and safety results than presenting a challenging case for which a fellow is unprepared.

The presence of a mentor in the OR is crucial for both patients and fellows. Knowing that an expert surgeon is standing by ready to assist should any unforeseen complication arise maintains patient safety and keeps fellows at ease. An attending in the OR also acts as an

immediate reference, helping fellows navigate the steep learning curve of retina surgery.

Experience with a variety of attendings gives surgical fellows the opportunity to learn from and observe the styles of different retina experts. The old adage is true that there is more than one way to skin a cat. As exposure to attending surgeons' individual styles, techniques, and even machine settings increases, so too does the number of options available to a fellow to incorporate into his or her own practice. In this sense, mentorship through fellowship can be seen as a team project. One might even say it takes a village to raise a fellow.

## CONVERSATION

Mentors whose surgical preparation involves open conversation with fellows provide training that, although related to surgery, occurs outside the OR. A conversation about the particulars of upcoming surgical cases, including observations about any potential learning opportunities they present, gives a chance for the mentor to provide insight before the patient even arrives in the OR. Also, such time can be used to discuss the possible challenges of upcoming cases, including a discussion of possible pitfalls or how to manage unforeseen circumstances.

Postsurgical discussions contribute to the fellow's understanding of his or her performance in the OR. Highlighting areas where the fellow performed admirably inspires confidence in the fledgling surgeon, and highlighting areas requiring improvement helps focus the mentee's preparation for future cases.

In the same way that observing the personal styles of surgical attendings exposes fellows to an array of surgical techniques, allowing different surgeons to engage fellows during pre- and postsurgical conversations maximizes exposure to diverse avenues of critical thinking. In presurgical conversations, different attendings may

point to certain areas of concern or familiarity; in postsurgical conversations, an attending might notice something another attending might overlook. Again, exposure to an array of relevant opinions and styles guides fellows in their education.

## RELATIONSHIP BETWEEN THE FELLOWS

Retina fellowship not only offers guidance in order to create a competent surgeon; it is also about leading by example to craft a future leader in retina. The mentor-mentee relationship between attendings and fellows mirrors the relationship between second-year and first-year fellows. This relationship, sometimes overlooked by attendings, is important because it fosters the development of the first-year fellow's surgical skills and strengthens the mentoring abilities of the second-year fellow.

First-year fellows may feel comfortable asking second-year fellows questions that may seem trivial or simple; second-year fellows typically offer advice to their junior colleagues on job searches, managing expectations, and handling workloads. Fellowship programs with at least one fellow enrolled each year put their fellows at an advantage because first-year fellows have an additional resource compared with first-year fellows in solo residency programs. And because second-year fellows serve as mentors in their own right to first-year fellows, senior fellows strengthen their own mentorship skills, which in turn prepares them for the academic or private-practice world.

Knowing that the symbiotic relationship between first- and second-year fellows makes fellows—and thus the programs in which they are enrolled—stronger, mentors offering mentoring advice to second-year fellows help grow their mentees in the professional aspects of retina practice, and not just in the fundamentals of surgery or clinic duties.

## CONCLUSION

The strength of the retina field lies not only in the tradition of mentorship built by those who founded the field, but also in those who continue to train and guide the next generation. Ensuring that retina remains among the strongest subspecialties in medicine requires mentors to continually guide mentees toward excellence inside and outside the OR. ■

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