Sarah A. Shaffer, DO, MME



Clinical Associate Professor of Obstetrics and Gynecology-General Obstetrics and Gynecology

Clerkship Director - Obstetrics & Gynecology

If you had not chosen medicine as a career, what field might you have gone into instead? Why?

Probably evolutionary biology. I took two courses in college, the undergraduate level course then the graduate level introductory course and was fascinated in every aspect of the field. I amazed by the history, 'evolution' of theories, the ties to other fields like archeology, botany and psychology. In the graduate level course, Stephen J. Gould's recently published, The Structure of Evolutionary Theory, was the textbook. It is a massive, dense thing, but with a lot humor; I still consider reading a good portion of that book one of my life's greatest accomplishments.

Why did you choose to specialize in Obstetrics and Gynecology?

ObGyn was my very first clinical rotation and I was surrounded by a crew of really great residents. One of the attendings was the father of one of the younger male residents. My husband and I forged a friendship with that resident and his wife; we all spent many nights during my core clerkship year at the

Please cite this paper as: Sarah A. Shaffer, DO, MME. Proc Obstet Gynecol. 2021; 10(2):Article 9[4 p.]. Available from: http://ir.uiowa.edu/pog/ Free full text article.

This is an Open Access article distributed under the terms of the Creative Commons Attribution 4.0 Unported License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

home of the attending father and his wife playing games and eating dinner. In that setting, and at the hospital, I watched the father work to shape not only his son's knowledge and execution of the knowledge, but also his integrity and professional identity development. I also recognized the father's occasional investment in me. Watching that kind of depth to a teaching relationship, along with my ever- increasing understanding of the breadth of specialty, hooked me.

Who in Obstetrics and Gynecology do you find most inspirational? Why?

In many circumstances, I find my Pediatric and Adolescent Gynecology patients – and their parents – to be incredibly brave and thoughtful. I see young ladies have to summon a lot of courage to trust me and to learn hard things about their bodies early in life. Their parents have to face vulnerability and their own inability to ensure a certain future with respect to child-bearing and sexual function. It's difficult to navigate these relationships and interactions, but – in most cases – everyone learns and grows quite a bit. It's quite inspiring when it turns out well.

What have you enjoyed most about your clinical experiences? Why?

Two things. The first is the never-ending experience of learning something new, or learning to adjust my outlook on something familiar, every single day. The other is continuing to find evidence for the old clinical adage, "The patient will tell you what's wrong with them."

Why did you choose to work in an academic setting?

It took me a long time to realize that, throughout my adolescence and medical training, I had consistently developed relationships or held roles that focused on teaching and mentoring. When I did not match to fellowship as a senior resident, my program director sat down with me to ask why I wanted to pursue a fellowship. When I said that I wanted to emulate some of my best teachers, he replied that I needed to pursue academic medicine. I had followed a non-traditional path to medicine and ObGyn residency, so I actually had little idea what he meant by this. It wasn't until I settled into my job as an academic clinician, that I looked back with an educator's eves and then looked ahead at how to teach my learners better that I knew what he had meant.

What is the best part of working in academics?

The learners!! And, by that, I mean everyone. Because there are multiple levels of learners around most of the time, and because we see the most complex patients, the environment is always welcoming of questions and discussion. I feel challenged to be comfortable not knowing it all and working with a team to devise the best plan. I cannot stop learning here and find that to be an incredible feature of academic practice.

How do you balance work life and home life in your busy career?

I'll be honest (and few will be surprised) that I don't maintain the best work/life balance. I work too much, but I still love

it. While I am young and more vigorous, and while I work really hard to show my husband oodles of gratitude, I feel like it is okay to give my career, my patients and my leaners more effort and energy. I also know that watching my parents' work ethic as a child was incredibly formative for me. I talk with my son (and will, in the future, with my daughter) about my job nearly every day; I want him to understand the joys and pains of being invested in other people and of pursuing challenging work. For this season of life, this relative 'balance' has also allowed my husband to learn, train for and design a very unique path within his field of study. He is very close to achieving some of his goals and it is a really good feeling to know that some of my hard work that helped him achieve his dreams.

How would you summarize your personality using just three words?

Positive, empathetic, meticulous

Which book (fiction or non-fiction) would you recommend for people in you field to read?

The Body Keeps the Score by Bessel Van Der Kolk, MD. I read this book during my second pregnancy at the recommendation of my doula. It was incredibly enlightening regarding the effects that a variety of trauma on many aspects of health, how the effects of trauma evolve and change, and much more.

If you could make one change in the way medicine is practiced in your field, what would it be? Why?

There would be more TIME

allowed/allotted to talk with patients, to counsel them and address their questions. Many of the patients I see in my specialty clinics feel that their referring physicians did not listen or stopped listening somewhere along the way. Conversely, I find that some of my patients need to say a lot to feel heard, but that doesn't mean that what they are saying isn't valuable or that it doesn't contain helpful information. I also find that many patients would benefit from more counseling regarding the plan of care, making sure they have written or verbal instructions that they understand and teach back to a member of the care team. I think so many of our pitfalls in medicine are because we simply are not afforded enough time with our patients and they with us.

If you could change one thing about the world we live in, what would it be? Why?

Healthy physical activity would be an acceptable and encouraged use of time at work!!

Who is the person in your life you would most like to thank?

My husband, Mark. We've been married for 18 years in May (yes – since we were kids) and together for two decades. He is still the guy I want to see when I get home from a long, hard day. And, despite all the long, hard days (and nights), he still helps me to rest and maintains our home as my absolute favorite place to be. He is a super dad and our kids' favorite playmate. And with all that, he hasn't stopped dreaming and pursuing his own goals. I want him to thank him for being incredible.

What do you feel is the most important attribute(s) of a successful medical educator?

A commitment to life-long learning. I think anyone that can maintain this outlook over many years has to have some amount of approachability, resilience and ability to reflect.

What are the greatest strengths of the medical clerkship program that you oversee?

Teamwork, hands down. I have a fantastic clerkship team that I simply cannot (and do not want to) function without. They have great ideas, remember things that I forget and they care so much about our students. In addition, the students that have expressed interest in ObGyn have been an amazing team as well. They pull together for QI projects, support one another through the interview process and respond to learners that contact them after they've left the nest for residency elsewhere. I am so proud to be a part of the ObGyn clerkship team!!