

THE REST OF YOUR LIFE

For Country and Medicine: Physician Reservists

United States military service does not run in Dr. Iffath Abbasi Hoskins' family. She grew up in Pakistan and attended medical school overseas. But when she enlisted with the U.S. Navy as part of her obstetrics and gynecology residency at the National Naval Medical Center, Bethesda, Md., in 1979, she did so eagerly.

"The hospital had an excellent reputation," said Dr. Hoskins, who is now chair and residency director of the department of obstetrics and gynecology at Lutheran Medical Center in Brooklyn, N.Y. "Secondarily, being raised with certain values in a family that was very involved with community service and politics, it was a way to serve the country."

Dr. Hoskins remained in Bethesda as an active-duty Navy physician until 1987, when she switched to the Navy Reserve

culture and the requirements that come with military service. In addition, her two grown children were very young when she started her service.

"They didn't know any other life," she said. "They just knew that their mother gets out there and wears a uniform and floats all over the place."

One personal reward of her role as a reservist, she said, is a sense of serving the country. Another is learning to become an effective leader. "Everybody who trains in the military is force-fed leadership skills," she said. "There is no way that anybody can rise up through the ranks of the military without learning—either painfully or easily—leadership. You have to mentor people and work with disparate groups of people."

She went on to explain that that in the reserves, "if my unit or my team or my company is not successful, people don't blame the person; they blame the commanding officer. It is his or her responsibility to make it all successful. My success in the military, every time I got promoted, every time I got a medal for leadership, was because somebody else said, 'she did a good thing for her area of responsibility, whatever she was in charge of.' Because, in the military, there is no such thing as personal success; it doesn't even exist. That's what has been one of the best rewards for me ... to learn that concept."

Today, when she counsels young physicians who are considering joining the Navy Reserve Medical Corps, in which she is a captain, she doesn't sugarcoat it. She tells them, "if you're looking for personal glory, like, 'I'm going to get out there and do this heroic thing or serve the country, and I love the uniform,' you're not going to find it to that extent. It's a lot of personal sacrifice, a lot of time away from family."

The military "is a different culture," she said. "It's a different world, language, and behavior. I was constantly worrying that I was forgetting pieces of my uniform while I packed my bags and ran all over the country. There were a lot of issues like that. But, in general, it's the best thing I ever did."

Didn't Want to Miss Out

Dr. John C. Liu's father, uncle, and cousins fulfilled obligatory military service as citizens of Taiwan. However, Dr. Liu broke the family mold in 1992, when as a citizen of the United States, he elected to enroll in the U.S. Army Reserve during his first year as a surgery resident at the Northwestern University, Chicago. Operation Desert Storm had just ended.

"Growing up, I'd always enjoyed military thinking and what [the military] stands for," said Dr. Liu, who is now a neurosurgeon at Northwestern. "I was in the first generation of my family that was not required to serve in the military. I've always thought that by not doing that, I kind of missed out."

So, he underwent basic training at Fort Sam Houston in San Antonio and cur-

rently is assigned to Brooke Army Medical Center in that city as a reservist neurosurgeon. He spends a minimum of 2 weeks in service there each year. In 2004, he spent 3 months at Brooke filling in for neurosurgeons who were deployed to Iraq. During that stretch of time, a reservist vascular surgeon, who was being deployed to Afghanistan, phoned him to ask him the basics of how to do a craniotomy.

"As a surgeon who does not normally do any type of brain operation, he would be called upon to do a brain operation should that need arise when he's in Afghanistan," said Dr. Liu, who was promoted to lieutenant colonel in 2005. "So you tend to be a lot more resourceful and work with equipment that you might not have in a well-funded hospital in the United States."

He noted that the toughest part of being an active reservist during wartime is not knowing when or where you may be deployed. "They can call you up and say, 'we need you here,'" said Dr. Liu, who is married and has four children aged 1-18 years. "As a family, we've held off on making any type of major purchases right now. We don't want to buy a new house or anything like that because if I get re-deployed, financially, we could certainly take a hit."

Balancing his military and civilian obligations is "like anything else," he added. "You have to multitask the best you can. I was very lucky in the sense that, when I was deployed, I had full support from my colleagues in the department of neurosurgery here. That was very helpful."

Dr. Liu said that that when he returns home from military service he feels "re-grounded." We Americans "live in a very materialistic society," he explained. "I usually come back with a sense that certain things just aren't that important. In the current Iraq war, a lot of young soldiers are hurt, and hurt badly. It regrounds you [to the fact] that the most important things in life are your family and your career."

Military reserve service "is not for everybody, but it taught me [a great deal] in terms of discipline and working together as a team," he said. When colleagues learn about his role in the Army Reserve "they tend to act positively," he added. But it hasn't always been that way. "In the past, I've had people say, 'are you nuts? You could be killed or hauled away for a year.' I've heard a variety of reactions."

From Resident to General

Military service doesn't run in Dr. Jamie S. Barkin's family either. In 1977, he joined the U.S. Army Reserve during his first year as an internal medicine resident at the University of Miami because he wanted to serve his country.

"We all need to make some contribution back to our country," said Dr. Barkin, a

Florida native who has been chief of the division of gastroenterology at Mount Sinai Medical Center in Miami since 1985. "It doesn't have to be with the armed services. It could be with the Peace Corps, or inner city work, or teaching people forestry in the Civilian Conservation Corps."

Before he retired from the Army Reserve with the rank of major general in 2004 after 27 years of service, his assignments included stints in Florida, Tennessee, Georgia, Kuwait, and other Persian Gulf states.

Practicing overseas "taught me that in medicine, we've had the opportunity of bringing first-class medical care to our troops, no matter where they're stationed, whether it [is] in southwest Asia or down-

town Savannah," he said. The most challenging aspect of his service was learning leadership and management skills, which "for the most part in medicine are not taught," noted Dr. Barkin, who also is a professor of medicine at the University of Miami School of Medicine and governor of the Florida chapter of the American College of Physicians.

"What we learn in medicine is the science and the art. We must realize that dealing with people as a supervisor or as an employee requires management skills. . . . Once you learn those skills, they are incredibly valuable to you and to your employee or employer. The benefits are amazing to both society and to medicine. There's a cross-fertilization."

Dr. Barkin, who is married to a physician and has a 20-year-old son, added that military reservists need support from their family, employers, and friends as they carry out their obligations. Without family support, "the ability of our reservists in the future is going to be very limited."

He added that the military emphasis on team over self makes reservists an invaluable asset in the civilian business world, particularly in medicine. A reservist is "notoriously reliable, a self-starter, a person who will benefit . . . by taking educational courses, and the person who will learn people skills and make the team better," Dr. Barkin said. "That's what we need in business." ■

By Doug Brunk, San Diego Bureau

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COURTESY DR. IFFATH ABBASI HOSKINS

Dr. Iffath Abbasi Hoskins, pictured above during weapons qualification, was deployed to Camp Pendleton in 2003.

and relocated to New York City with her husband William, who is an ob.gyn. oncologist. Since then, her reserve assignments have included a stint as a member of the Secretary of the Navy's Policy Board; chief of professional services with the U.S. Marines 4th Medical Battalion in Camp Pendleton, Calif.; chair of medical credentials for the entire U.S. Navy, both active duty and reserves; and training family practice residents at the Naval Hospital Jacksonville (Fla.).

Balancing the demands of her civilian life with those of the Navy Reserve "has not been easy," she said. "The military expectations are that you will focus on the needs of the military. Over the years, those needs have become far more than just a weekend a month."

This includes completing occasional online training courses to keep up to date on topics such as biological warfare. This training is "going on in parallel to our civilian life, in order to remain a credible, deployable military officer or enlisted person," she said.

The impact on family life is tempered by the fact that her husband was in the Navy for 20 years, so he can identify with the