The Kids Are Alright

Urologic training just isn’t what it used to be.

Every surgeon has heard a version of this saying at some point during their residency. As a junior, you try to ignore it. As a senior, you have a “back in my day” moment and wonder when things changed. I used to believe that I would never be as good as those who came before me. As I near graduation, I reflect on the common complaints and reconsider what it means to be a well-trained urologist.

Residents these days are weak surgeons. They don’t operate enough to become independent.

Duty-hour regulations exist to protect residents from overwork, but time outside the hospital is time spent not operating. Loss of autonomy leads to fear that we are training less capable surgeons. These are valid concerns, but the way we learn has changed and time in the OR is no longer the only metric of success. “See one, do one, teach one” has been modernized. Nothing can replace the experience of operating on a patient, but video libraries let residents review complex cases performed by world experts, and high-fidelity simulations allow safe practice before scalpel touches flesh. Surgical teaching methods have also evolved, replacing shouting and insults with intentional learning and a focus on deliberate practice. Residents have more resources and are learning more skills than ever before.

Residents these days are lazy. They all want to go home early. No one works hard anymore.

We are at the forefront of a major shift in attitude towards resident well-being. It has long been a core ACGME requirement, traditionally satisfied by mandatory wellness sessions and powerpoint lectures that blame exhausted doctors for poor sleep hygiene. Unfortunately, burnout cannot be solved by power naps. Instead, residents have become more attuned to their needs outside of training and are not afraid to advocate for themselves. I had a junior resident who prioritized time with her child. We adjusted our team schedule so she could leave early for bedtime and call me later to run the list. All the work was still completed, but this small change made an outsized difference to her happiness. Everybody wins when life is restored to the work/life balance. Residents that take care of themselves end up more resilient and can take better care of their patients.

Residents these days are soft. They have it easier than ever, but they still complain.

When attendings share their war stories of what residency used to be like, it can feel like modern training pales in comparison. The truth is there is no such thing as an “easy” residency. Every advancement brings new trials and tribulations. Each generation of residents builds on the success of its predecessors and rises to the challenge. As I transition out of training, I plan to keep a new motto in mind that celebrates this progress.

Urologic training isn’t just what it used to be. It’s better.