Letters to the CSA

No, You Can’t Do It All
(A Word to Everyone Who Thinks She Can)

In response to your editorial in the Fall 2008 CSA Bulletin, I offer my view. It’s an unpopular view, but no, young ladies, you really can’t do it all. Marriage, motherhood, career—in the heady days of the 1970s and ’80s, we came to believe that all a girl needed was determination enough and she could be and do anything she ever wanted. I’m here to tell you that there’s more to the story.

At first glance, you might think I’m a woman who has done it all. My first child was born in 1975 and I started medical school when she was four. I’m now in private practice as an anesthesiologist at Cedars-Sinai Medical Center in Los Angeles. My colleagues, both doctors and nurses, often ask me to take care of them and their families when they need anesthesia, and surgeons request me for challenging cases. The orchid on my kitchen windowsill was a gift from a grateful patient, and I’m lucky enough to love what I do.

As for marriage and children, I’m very thankful. My husband also practices anesthesiology, and he understands better than anyone that some days I get home late because I can’t leave until surgery ends and my patient is safely tucked into the recovery room. I’m a mom, too—not a soccer mom or a hockey mom—but nonetheless, a mother of three. My older daughter has a master’s degree, a good job, and a wonderful husband. My son is a pre-med sophomore in college, and my younger daughter just left to start her freshman year, which is why I have time to write this letter.

So where’s the downside? I can sum up best by saying that you can juggle many things fairly well, but you will never be the perfect wife and mother and have a high-powered career all at the same time. There aren’t enough hours in the day or enough brain cells in your head. Marriage? I’ve been divorced, and my husband deserves a lot more of my attention than he usually gets. It’s lucky that he can cook. The children? They learned early that if they forgot lunch in the morning, then no one was going to hop in a minivan and bring it to school. No doubt there were a thousand lapses in my mothering that they still resent, although I did read them a lot of bedtime stories. They have borne up for the most part with cheer and fortitude—and thankfulness that they weren’t burdened, like some of their friends, with “helicopter moms” who hovered constantly.
What about my career? I’ve always worked full-time except for maternity leave. Some procedures in anesthesia require technical skills that I would quickly lose if I performed them less often. I truly believe that women should not accept places in medical school if they think they might someday leave to be moms; society bears a lot of the cost of training doctors and has a right to expect much in return. I’m fulfilling that obligation.

However, you'll note that I am not a department chairman in a medical school, or a researcher on the cutting edge of medical discovery. Because I have a family, I’ve downscaled some ambitions. My group practice is large and enables me to take time off when it's important. Once I’m done for the day and leave the hospital, unless I'm on call, my pager is off.

Over time I came to terms with what men knew all along: you can't be a CEO or the president of the United States or a hardworking wage-earner and still make it to all the soccer games, or be the room mother who brings healthy snacks to school. You won't always be around to give a reassuring hug at the exact moment a child needs one. Something has to give. Once you acknowledge that you can't do it all, you can figure out where you need to be when it really matters.

Recently a surgeon approached me and said, “Are you here on Thursday? I need you—I have a patient for an esophagogastrectomy.” I replied, “Sorry, no. My son is having his tonsils out.” My son isn’t a baby; he’s 19 years old and would have been perfectly able to get a friend to give him a ride to the surgery center. That wasn’t the point. The point is that the patient undergoing a major operation deserved to have an anesthesiologist who was fully engaged in taking care of him. My mind would have been elsewhere. So we arranged for another anesthesiologist to take care of the patient, and I took the day off to be with my son. He seemed pleased to have me there.

My 33 years as a mother lead me to conclude that some jobs are too important to multi-task. My patients can count on the fact that when I’m at work, my full attention is with them, and the rest of the time—well, I do my best, and luckily I never set my sights on the award for “Mother of the Year.”

Karen Sibert, M.D., Associate Editor

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