When doc becomes doc and mom

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Abstract

As the proportion of women entering the veterinary workforce continues to grow, young veterinarians are demonstrating an increasing need for guidance in navigating pregnancy and motherhood while maintaining their role as a veterinarian. As a relatively new issue for many rural practices, the profession lacks a consistent and distinct precedent for maternity leave and what can be expected during pregnancy. One veterinarian's experience cannot begin to cover what can be expected for everyone, but can provide tips and insight onto navigating these concerns for other new graduates and practice owners. Following the obvious challenges of pregnancy and then maternity leave comes the more difficult task of juggling on-call, daycare schedules and sick kids with a busy and unpredictable veterinary schedule. Finding a balance is not always easy but can be incredibly rewarding with the right mindset.

Key words: pregnancy, maternity leave, safety, young family, children, working with kids

Introduction

When is the right time to start a family? This is the golden ticket question that many young veterinarians struggle with. After completing the arduous task that is veterinary school, starting to pay off student debt, finding the right job and settling into a new community, adding the chaos of starting a family right away seems impossible for many. However, it does not have to be impossible, and waiting for the perfect time may leave you without ever starting a family. From navigating when to start a family comes pregnancy concerns for our young female veterinarians. These concerns range from everything from the obvious disease risks and pharmaceutical concerns to juggling physical changes, nausea, exhaustion and safely navigating in the workplace. Following pregnancy comes maternity leave and understanding your employer's maternity leave policy and in the case of many, helping develop a maternity leave policy and finding what will not only work for the practice but for yourself. Upon returning to work comes the task of juggling breastfeeding into your already busy schedule, if you so choose, and then as your children grow, how to navigate taking them with oncalls as the needs arise.

Pregnancy

Pregnancy is an experience that is different for everyone and can be a completely different experience for one woman between children. The task of growing a human being is very draining both mentally and physically and will manifest symptoms differently for everyone. I, personally, went into pregnancy very naïve thinking "how bad can it be?" and misplacing a high level of concern on certain aspects that were less important than I thought them to be. The best advice I can give a new graduate is to be prepared for everything. Prepare for exhaustion, mood swings, nausea, food aversions, the potential for a high-risk pregnancy – the list goes on and on. While it is not

possible to prepare for every one of these things at great length, you can give some thought as to how you will handle each obstacle and be better equipped to handle it as it arises. An area that you may not think to consider is your obstetrician's (OB) education. As veterinary medicine has gotten more specialized, my experience was that my OB did not fully understand what I was doing on a daily basis and thus had a hard time setting limits for what is safe, leaving me to my own judgement. Left to figure things out for myself I turned to pregnancy books and was met with outdated advice saying you should not lift more than 20 lbs or walk too much, etc. making the day-to-day life of a dairy vet nearly impossible. With the application of a little common sense, I was able to determine what I was comfortable doing and what I wasn't comfortable doing. Outside of my own comfort then came the reactions of colleagues and clients who, in some cases, were significantly less concerned than I was, but more often than not were more concerned for my safety than I was when performing certain tasks.

There are many safety considerations that come with pregnancy. There are the obvious physical limitations of trying to perform tasks with an altered center of gravity and the obvious limitations of trying to do many things with a large abdomen. Along with that comes a decreased reaction speed and difficulty navigating handling animals in certain settings. Then there are the pharmaceutical concerns of the products many of us handle frequently and determining how to delegate the handling of certain products and/or making it safer to handle the products oneself.

Products of concern include, but are not limited to: prostaglandin F2-Alpha, gonadotropin-releasing hormone, human chorionic gonadotropin, hormone containing implants, CIDRs, oxytocin, steroids, hoof glue (Technovit®), formaldehyde, oxytetracycline, Micotil®, any modified-live vaccine, anthelmintics, insecticides and unpasteurized dairy products. All of these products carry a varying degree of risk to embryonic development, and safety concerns surrounding their use should be heightened during pregnancy. In the same vein comes concerns of exposure to certain disease organisms. This is another area where we often possess more expertise than the average OB and need to move those conversations forward to make sure we are on the same page as the OB we are working with. Common cases that carry some degree of risk to pregnancy include any abortion event, but especially small ruminant abortions, as well as diarrhea/scours in calves.

The last area of concern regarding safety is the safety of your mental/emotional health. Large animal medicine is a physically demanding job working with animals weighing 10X our weight on a daily basis. Finding ways to handle these animals safely while meeting your clients expectations, your expectations for yourself and seeing these tasks become more difficult, can be mentally draining. For first time mothers, the uncertainty of what they will feel comfortable doing, if they will be able to complete certain tasks and always the risk of inducing labor. Balancing these fears with client, employer and self-expectations can be challenging.

Maternity leave

Maternity leave is a concept that America is lagging sorely behind the rest of the world in. Even further behind than America falls agriculture, and with it large animal medicine. There seems to be a phenomena in agriculture where women are assumed to either take 5 years off after having a child or take no time off after having a child and finding that balance is a bit tricky. On top of that, there seems to be an unspoken competition among some moms in veterinary medicine looking to earn a medal for taking as little time off as possible; a competition that should cease to exist. My advice for every new mother is to first understand what the established protocol is for maternity leave in your practice, and then do what feels right for you. Many employers are going to be open minded and want to work with you, within reason, to allow you success in both motherhood and as an associate. Understand that you may not get exactly what it is that you are looking for; however, chances are the ideas you have may not have been considered before and they can still work for your practice. Advocating for yourself is the best thing you can do when determining what maternity leave will look like for you. At the very least consider taking 6 weeks of time off to allow your body to heal and breastfeeding to be established, if you choose to breastfeed, prior to returning to work after an uncomplicated vaginal delivery and even longer when returning following a caesarean section or more complicated vaginal delivery. Give yourself grace in this process as what you think you may want prior to baby's arrival can be very different than what you find yourself wanting when the time comes to return to work. Most employers are going to be understanding of that and want to work with you.

Specifically for dairy practices, many of us work with the same producers on a weekly basis. It can be tricky to tell these producers you are going to be gone without contact for a set amount of time when they are used to having you as "their vet". However, when communicated and framed appropriately, most clients are going to be understanding and realize that in the grand scheme of things, the time that you are going to be gone is actually a very short time frame and will not have a major impact on their operation. Establishing these boundaries early on in both pregnancy and when discussing maternity leave will result in a much smoother leave for both yourself and your clients.

Breastfeeding

Breastfeeding has certainly become more of the norm now than it was when we were all born. And with that normalcy has come better technology making it easier for busy working moms to pump and successfully breastfeed. The only tip I can give moms who want to take on this task while working full time is to decide it is a priority for you. If you make it a priority and a goal, you will accomplish your goal. If you are half-heartedly

interested in it, it will be more difficult for you. In order to successfully breastfeed, unless you have a significant over supply, you do need to consistently remove milk as you would if you were home with baby. For many this means pumping every 3 hours which can be tricky to juggle into an already full and unpredictable schedule. Working with an IBCLC lactation consultant can be helpful in determining what works for you and what does not as well as investing in the right equipment for your situation. As mentioned before, breastfeeding is a commitment. Being able to multitask while pumping is helpful, i.e., pumping while driving, writing reports while pumping, etc., can make it a bit more doable; however, this is not always possible and sometimes it really is just a break, a break you probably need in your day.

Kids in the vet truck

Finally, after pregnancy and maternity leave comes the inevitable advent of needing to take your kids in your truck. The best advice I can give you is to embrace the chaos. Kids are resilient and with the right framing anything can be a toy. When the need arises to take your children to work with you, consider a few things to set yourself up for success: how will the client react/did I prepare them for this, will there be a safe and clean space for my child to be in while I am working, how is my child likely to react to the situation? If you consider all 3 of those categories, you are likely to have a successful trip with your child. However, if any of them are less than ideal, you set yourself up for tantrums or disgruntled clients.

Conclusion

Starting a family is something that many young veterinarians struggle with as they enter the profession after 8 years of higher education. Balancing the expectations of a rewarding but demanding profession with the expectations of a newborn and young children can be difficult. As more young female veterinarians enter large animal medicine, it is becoming more common to navigate through concerns surrounding pregnancy and maternity leave. In order for our profession to evolve, these young veterinarians need to advocate for themselves and their needs while employers need to be creative and receptive to new ideas to meet this challenge.

