Andrea Dutoit, MD: As program director, my goal is to not only provide the best clinical and educational opportunities but also to see each individual grow to the fullest of their potential and professional potential. While I could tell you all kinds of things that make the University of Nebraska an excellent place to train, I think the most important voice is that of our own experts and that would be our residents.

John Riley III, MD: When I was interviewing around I did see that not every program gave you the opportunity to take care of really sick patients. For example, I’ve already had the opportunity to be involved in five liver transplants and I’ve only been in the ORs for a few months now. I feel like just the breadth of experiences that I’ve already had is a huge strength of the program.

Maireen Miravite, MD: Right off the bat, you could tell that I was going to get great training here. The potient population is so variable.

Haiying Liu, MD: I mean, I really like the training here. A lot of the things that tipped me toward UNMC, they became true right after I got here. The faculty here are very friendly, interacting with those residents, always professional during their interactions with us so you know we’re not used and abused.

Clayton Damme, MD: When I originally applied for anesthesia residency, I applied and interviewed all over the country, both coasts and the Midwest as well. I was really looking for a well-rounded program where I feel like I fit. You know, really in the end I ranked UNMC first because I saw it as a place that I fit in. I felt like there was really good camaraderie here.

Maireen Miravite, MD: What’s special about UNMC I think is that you don’t necessarily define just one person to be able to help you get to where you want to be because everyone is so willing to be a part of that journey.

John Riley III, MD: I would say in general, every attending that you work with in the department, they serve as a mentor in some sense. I have attendings come up to me that I’ve only worked with once that will ask how things are going and even ask how the family’s doing. I’m not sure you’ll get that kind of culture everywhere you go.

Clayton Damme, MD: In my mind there are two different types of learning; one is like street smarts of anesthesia and one is the book smarts of anesthesia and I think that our program really fosters both. We really structure our call system so that you know you work hard when you’re here and then you have some time off. So we really try to keep the day’s before and after call light and so a lot of times I found that I would be studying independently on those days.

We have a very structured didactics system; it’s dedicated time outside of the OR where we get together.

Haiying Liu, MD: I feel like every type of learner can be successful in the program here. Visual learners have the question banks, have the textbooks. Tactile learners have the aura board scenarios, the OSCE scenarios where we go through the practice together and auditory learners have lectures. We have lectures, fixed lecture schedules every week and we have faculty that kind of walk through PowerPoint, talk you through everything. Going through keywords together, talking through things, so I feel like the three types of learners, all of them, have something to rely on.

Maireen Miravite, MD: Honestly, coming from the Southwest, the only thing you hear about Nebraska is like this land of corn and people that are really nice and I guess that was true. Everyone that I met I just felt like I could get along with and that was really important to me because especially uprooting our lives from Arizona where we have our families, that’s where we both grew up and then coming to a different part of the country with nobody else but each other it was really important to find somewhere where we felt like we could fit in. I felt that with every person I interviewed with and even with all the interactions that I had with the residents and so I felt like this is somewhere I could train but also feel like I belonged.

Clayton Damme, MD: If I had to describe just the culture as a residency, as a whole, I think we’re very supportive of each other. I think we’re more than colleagues, we have barbecues at each other’s houses, we have drinks on the deck , we go out, go downtown when we have time off together.

John Riley III, MD: So it’s a very family-friendly program, one that was honestly the main factor for me. Most of the residents or many of the residents, I should say, either have kids or they’re expecting kids. When we had our second, Josie, they were nothing but supportive and they even sent a small gift and card congratulating us. We’re able to own a home while I’m in residency, we’re living very comfortably. So we have our family and I haven’t had to put our personal goals on hold.

Haiying Liu, MD:I like Omaha, I feel like people here are mostly friendly and it’s a city, I feel like it’s big enough that has everything you want to do but small enough to have affordable living.

Maireen Miravite, MD: I was surprised that it was not just corn. I was surprised that in Omaha itself there’s plenty to do as long as you’re willing to venture out and find it. There’s a lot of activities for families and for people that don’t have that. So outside of residency you definitely can have a life and enjoy it.

John Riley III, MD: I have had the opportunity to live in a lot of other places, growing up in an air force family, and I’ve decided to stay in Nebraska because it truly is my favorite place that I’ve lived. Which is saying something because I’ve lived on a tropical island for three years.