

Everyone Eventually Gets to Point B

BY TRAVIS ULMER, MD

This time of year can be disorienting for junior residents. Most of their senior residents will have signed contracts for their first job while they are just starting what is likely to be their first job search in a very, very long time.

When the fall of my chief year hit, I realized that I hadn't had a full-time job or even conducted a job search in more than eight years! Sure, I had some temporary or part-time jobs during medical school and the occasional moonlighting gig during residency, but the last full-time job I held was as a camp counselor. I'd gotten that job through a referral from a friend who had previously worked at the camp. I didn't even have to interview.

Just as it was time for me to start thinking about my first job search in nearly a decade, my parents' house unexpectedly burned down. My younger brother Treg, who was in high school and lived at home at the time, fortunately woke up after smelling smoke from

the electrical fire that started in the garage. He found our parents sleeping on the second floor and shuttled them outside while the house continued to burn. We lived in a rural area, and it was too late by the time the volunteer fire department arrived. My focus quickly changed from my own job search to helping my family pick up the pieces.

By late winter, as my family rebuilt

their lives, I was finally ready to focus on myself and find my first job as an attending. Unclear on what to do, I turned to my seniors, but the advice I got from them felt

incomplete and not very helpful. Everyone told me some version of the same thing: "Don't worry; you'll get a job. It always works out."

What?! Don't worry?!

This wasn't an actionable piece of advice for junior residents. Everything they had been through for the past eight (or more?) years had been clearly laid out and straightforward. Want to be pre-med? Pick a

major, and take these classes. Applying to medical school? Take the MCAT, and fill out these forms. Applying to residency? Do your rotations, fill out these forms, and wait for match day. Sure, you could be shown around hospitals and cities for medical school and

even for the basics. I didn't even know how to contact different EM groups. Plus, the actual jobs and groups appeared to have huge differences. It all seemed mysterious. The seniors kept telling me not to worry, but I wanted to know, "How would it work out?"

The best thing juniors can do is ask pointed questions of the seniors who have just gone through the process: Where are you going? How did you end up choosing that particular job? What was the actual process you went through? When you start asking specific questions of multiple people, you begin to see that there is more than one path to finding a job.

Some people already know where in the country they want to work; either family connections or something else leads them there. Others had classmates they trusted who ended up with a site or group and recommended it to those below. Some just look for their own best fit, whether that's type of group, ED size, patient acuity, or pay and benefits.

The more you talk to people about their paths, the more you will understand that many different paths can take you from

In Brief

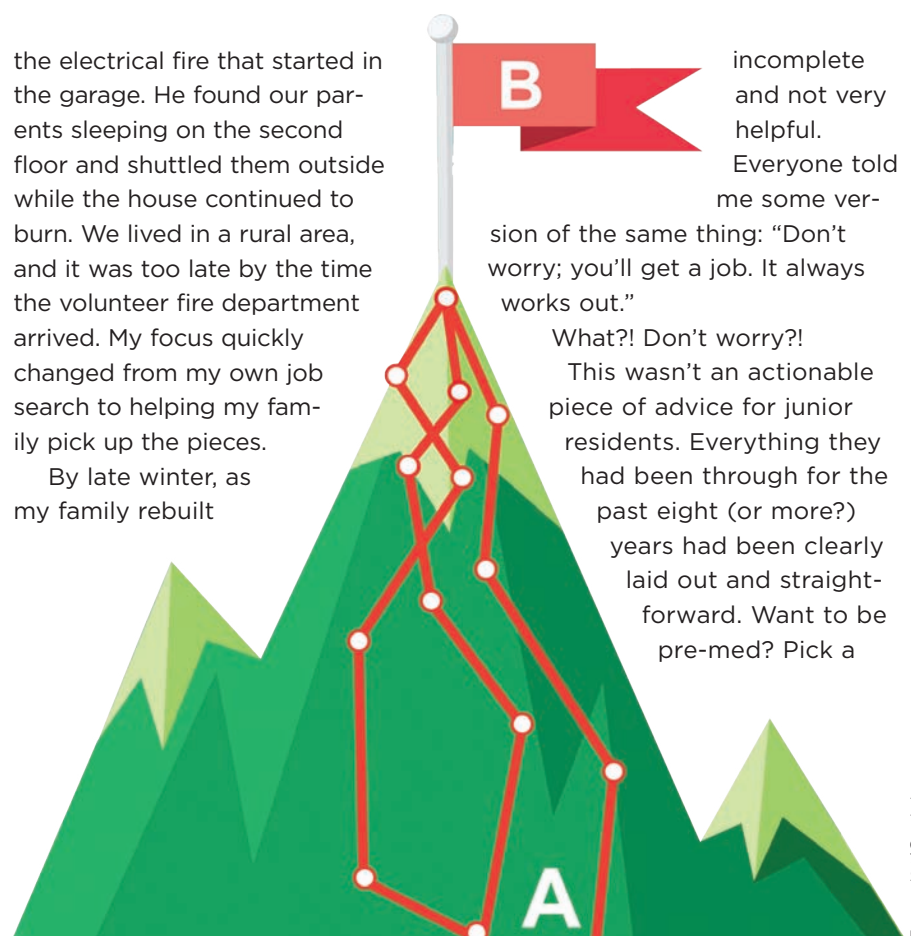
Helping Female Residents Combat Burnout

Being a resident ranks right near the top of stressful jobs, and a retreat in 2016 went a long way in addressing and improving wellness for female residents at Duke University Hospital. The weekend retreat sought to assess resident morale and well-being, encourage residents and provide activities promoting resident well-being, find ways to continue to improve and maintain resident well-being, and foster relationships across specialties so that other specialties would be able to provide relational support to each other throughout the residency years.

The weekend included a variety of activities such as positive affirmations, resident discussion on activities they like to do outside, taking personality tests to learn how to better manage their work environments, and a hike, said Chanel Fischetti, MD, one of the retreat's organizers and an emergency medicine resident at Duke. She said a survey following the retreat demonstrated that all of the residents found the event to be a safe environment that encouraged and promoted their well-being.

She said most residents (75%) were from out of state and usually saw their family fewer than two days a week. The feedback reinforced that some of the more favorable activities from the experience were those that allowed others to find a sense of community and meet new people, Dr. Fischetti said. Rates of resident burnout have been recorded as high as 76 percent in some specialties, especially in individuals who are older, unmarried, or female. (*Eur J Intern Med* 2006;17[3]:195.)

Residents found that even a brief but positive encounter outside of the hospital was enough to change from feeling very burned out to feeling relaxed in a matter of hours, she said. Using a scaled response, with one being very burned out and five being very relaxed, only 25 percent felt relaxed at the start of the event, but 75 percent reported feeling relaxed after it.



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residency, but whether you liked them was beside the point; if you're lucky enough to get into medical school and then an emergency medicine residency, you're definitely going. The schools can't be *that* different.

Chart Your Own Course

The job search to become an attending, in contrast, felt like a blank slate. There was no clear roadmap,

point A to point B. It's natural for emergency physicians to think about worst-case scenarios. That's part of our training. With such an open road ahead of them, junior residents may fear that their worst-case scenario is going to be a bunch of student loan payments and no contract. But trust me: Everyone eventually gets to point B. You will too. It always works out. **EMN**



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