



## View from the PURCH

On 1 July 1986 I spent my first night as an internal medicine resident on call in the medical ICU at Walter Reed Army Medical Center. I would spend every other night there for the next month. My senior resident would be the immediate future Chief Resident for our program and—unbeknown to any of us at the time—would go on to be a recipient of the Bronze Star for meritorious service in a combat zone. His first question to me on that first night was “Do you know what the problem is with being on call every other night?” Of course I could think of several, but he only had one: “You miss half of the good cases.” And he was only half-joking.



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Provider ‘burnout’—characterized by disengagement, cynicism, and at times frank exhaustion, is a well-recognized syndrome that negatively impacts patient safety, quality of care, patient (and provider) experience, professional development, recruitment, retention, medical education, and a host of other important outcomes. Its causes are multifactorial and with the mounting pressures on and expectations of providers—many of them seemingly out of the control of individuals—burnout appears to increasingly recognized. National surveys suggest that approximately 50% of physicians experience professional burnout. My own primitive literature search reveals more than 2000 peer-reviewed papers on the subject over the past 35 years. Burnout extends across all members of the health care team and likely, (although less well studied) involves non clinical employees within health systems. It is therefore an epidemic of enormous magnitude that will have devastating effects on our ability to provide the “higher state of caring” to which we aspire if we fail to address its root causes. Towards that end, I have chartered the Provider Wellness Task Force to investigate these issues and provide a roadmap and recommendations for actions to mitigate and prevent burnout in BMP. In this and future issues of the BMP Voice, you will hear from some of these Task Force members on this important topic. We will dedicate an issue of the Voice to an in depth review of possible tactics. I would be interested in hearing your thoughts on provider burnout as well.

## View From the Trenches

I love my job.

I am a family physician. I care for newborns and adolescents, their parents, their grandparents, and even their great-grandparents. I live in the community in which I work, so I interact with my patients both in and outside the office.

I have great relationships with my patients, partners, and staff, and I would not trade that for anything.

From all outward appearances, I might be considered a successful professional, and I admit that I am used to a certain measure of success. I did, after all, survive medical school and residency.

It is a privilege to do what I do – but that privilege is often tarnished by the context.

Recently, and for the first time in my life and career, I am being confronted with indications that I am actually not measuring up. I am realizing that it is not possible to simultaneously focus on productivity, quality, patient panel size, patient satisfaction, and access to care. In addition, the work required for documentation, insurance approval, medical home, Medicare, MACRA, billing, ordering, and managing paperwork has only increased in recent years. The importance of the doctor/provider-patient relationship is clearly under-appreciated in our current health system.

Through all of this, I find myself feeling overwhelmed and unsupported. I am not the sort of person who needs to be

thanked and showered with awards every day. I simply enjoy what I do, and that is almost always enough. Like most of us, I do, however appreciate the occasional recognition of a job well done; unfortunately those moments are becoming scarcer. Reminders of what we are not accomplishing and what additional requirements we have to meet are much more common.

I am a physician, but more importantly, I am a person. I am a mother, a wife, a daughter, a sister, a friend. I teach medical students, I coach baseball and Girls on the Run, and I sit on my children’s school council and my synagogue’s membership committee. I like to bake, garden, camp with my family, and watch my kids play basketball. Disconnecting from my work responsibilities and enjoying all of these things has become increasingly difficult for me.

We are all more than our professional identities. As individuals we need to determine how to reconcile our personal lives and interests with this all-consuming, perennially challenging career that we have chosen. Finding time for the basic requirements for our own health: sleep, exercise, healthy eating and even deep breathing - is more critical than ever.

As an organization, we have to find a way to make all of us feel appreciated and supported. We need a clearer path to negotiate the ever increasing job requirements that not only get between us and our patients, but between us and the balanced lives that we would all like to have.