(Un-)Advice for the New Graduate

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To all the new graduates out there, congratulations! Emergency medicine is not easy. Residency is not easy. What you will do for the rest of your life is not easy. But you are ready. You are prepared.

Over the next several weeks, months, and years you will receive a lot of advice. Most of it will be generic, feel-good, and worthless. So why should you read this article on advice? Easy — because I won't give you any advice. If you want advice on what to do with the rest of your life, stop reading now. What I will relate are some of the dumb things I did when I first graduated. So why read about my mistakes? Well, learning from other's idiocy is better than learning from your own.

Six years ago this July 1, I happily started what I considered my first real job. July 1 was also when I started making my first real mistakes. My mistakes fell into two broad categories: those that involved the clinical practice of emergency medicine, and those that didn't. We've all benefited from well organized and robust EM residency training programs and are clearly prepared to provide high-quality care, so thankfully fewer of my mistakes fell into the first category. Below are four of the many mistakes I made, but at least recognized.

Mistake #1: Believing that it was just "practice variation" when a new hospital wanted me to practice medicine differently.

While there are practice variations between institutions and most of this is appropriate, I was a little too quick to assume that all of the differences were appropriate local variations. In reality, some of these differences were just bad medicine. As a young staff member I was a prime target for hospital and ED directors who cared more about patient throughput and admissions than about quality of care. I quickly, but not immediately, learned that good medicine is good medicine and does not vary much between locations. I then pushed back and ... it didn't work. The advertised culture and mission of the institution, "To provide the best and most efficient care," was not reality. Reality was closer to, "To provide the quickest care." I stopped working there and am infinitely happier for it.

Mistake #2: Using "I need to study for my boards" as an excuse not to get involved.

Wow, did I use this for all it was worth. While preparing for boards is important, I used this excuse repeatedly when asked to get more involved in teaching residents, joining hospital committees, and getting involved in the state medical association. Almost all committees and organizations refresh themselves and somewhat start anew each July. Missing the opportunity to get involved immediately after residency cost me some choice assignments and delayed my professional development. I also wasted the opportunity to be new and inexperienced. The first year out

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For more information about YPS or the CV Review service, please visit us at www.ypsaaem.org or contact us at info@ypsaaem.org. of residency is a little like being an intern — except the hours and pay are better. No one expects an intern to know much of anything in July. As long as interns work hard and are interested, it's OK if they make a mistake or seven. I missed the opportunity to be the "intern" on committees, and therefore when I joined the following year, people actually expected me to know what I was doing — which I didn't.

Mistake #3: Thinking I was too inexperienced to make suggestions or share opinions.

No one likes the new guy who knows everything. That said, there is a reason my group hired me. They wanted me to contribute. They wanted to learn from me. Many current emergency physicians were never trained in the procedures and techniques that we were, such as ultrasound or video-guided laryngoscopy. And sometimes a situation just needs to be viewed from a new perspective. At first I was too concerned with not upsetting the status quo. Once I got over this, my department chair finally started to take notice.

Mistake #4: Not finding a mentor.

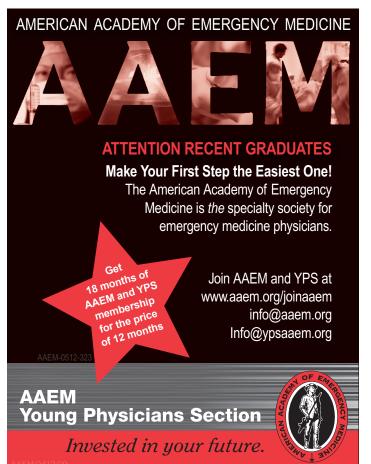
Most places have a mentor system set up, and most don't work. I waited too long to set up a system that would work for me. While there were many faculty members whom I respected and could learn from, there was really only one whose interests, career plans, and personality all matched mine. However, she was getting less involved in the day-to-day

affairs of the department and most people thought she was too busy and too important to have a mentee. It took me a few years to work up the courage to approach her on my own, but it was one of the best decisions I've made. She was thrilled with being asked and the advice she has given has been invaluable.

So congratulations, good luck, have fun — and don't make my mistakes. ■

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