

PRESIDENT'S LETTER



Edward J. Ward,  
MD, MPH, FACEP

# Everything Counts Always

I would like to start by thanking all who participated in Resident Career Day on August 29 at Presence Resurrection Medical Center. The event included 260 participants from Il-

linois' nine residency programs and was sponsored by 24 recruiters whose support enabled us to put on the event.

Resident Career Day was an excellent chance for our residents to explore the different career opportunities available, get answers to the commonly asked questions associated with obtaining your first job as an attending, discover the importance of mentoring, and get advice on life after residency. I can assure all residents that in time you will only eat Ramen noodles when you want to, not because you have to.

Our guest speaker, Dr. Alex Rosenau, President Elect for the American College of Emergency Physicians, gave a great lecture on emotional intelligence. The topics included communication skills, conflict resolution and self-development. To review his presentation slides and pick up some great information, visit [ICEP.org/rosenau](http://ICEP.org/rosenau) or listen to the full audio online at [ICEPblog.org](http://ICEPblog.org). (See article on Page 3 for more about the audio podcasts available from Resident Career Day.)

I found Dr. Rosenau's presentation to be a

positive affirmation that many of the tools and techniques he mentioned are those that I have tried throughout my post-graduate career.

In this article, I will restate some of the advice covered at our conference and add more on what I have found to be most useful in the years since my own residency.

Years ago, I attended a lecture given by Dr. Robert Strauss on conflict resolution. Dr. Strauss' article on this topic is posted on the ICEP website if you would like to read it (see Page 2 for details). I now understand that when I get frustrated or am faced with conflict, I feel a knot in my stomach. With practice, I have been able to recognize this feeling and the associated exasperation. This has helped me to cope better, to be more effective in my responses, and to take a step back to see if I am causing similar negative feeling in others.

It is important to take the time to identify how you feel when you are frustrated. Conflict resolution is an hourly requirement for our profession. If there is an attending you admire, I would bet that he or she has this particular skill mastered.

For the longest time, I was convinced that there were certain individuals that were put on this planet for the sole purpose of messing with me and wrecking my day. It would be hard for me to measure the level of frustration I felt when assigned to work with them, knowing that it was only a matter of time before they would

confound, confuse and obfuscate my delivery of patient care.

This is, of course, completely wrong. Almost everyone comes to work with the intention of doing a great job every time. I have come to realize that in frustrating situations, I often wasn't helping the team with my negative attitude. I don't recall how I figured this out but when I am faced with an exasperating situation or behavior, I now assume that everyone is trying hard and that it is my job to do a better job listening and explaining.

I have used the title to this article when teaching medical students and residents: Everything counts always. I am referring to the countless choices, behaviors and interactions we all have every day and how these choices will help or harm you. I guarantee that if you cut someone off in traffic on the way to an interview, that person will be the one interviewing you. Likewise, the person you go out of your way to share an umbrella with or open a door for will be your first introduction to the new chief nursing officer.

Take the time to get to know all of your security guards by first name. You may need to get their immediate attention one day. Being able to speak to your radiology technicians on a first-name basis is the most effective way to get what our patients need in a timely manner. Make sure to publicly recognize and thank your environmental service colleagues. In ad-

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## InsideEPIC

2013 - Resident Career Day Edition

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# Everything Counts Always

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dition to doing more to prevent the spread of communicable disease than we will likely do in our careers, they can be a powerful source of information. Thank and remind your staff that it takes everyone's effort to successfully care for our patients. These staff members, and many others, are all too often the unseen eyes and ears in our department. On more than one occasion, they have provided me with a key piece of data, allowing me to change a treatment plan for the better.

Being at your best especially applies to your years as a resident. Every time you show up for a shift, you are "interviewing" for your next job. This certainly applies to the emergency department you are working in but also includes every other department whose head has a contact at the site you are rotating through.

Emergency medicine is a very small community. Within three phone calls, I can confirm or refute your entire CV. While anyone can look good at an interview, or choose three references that like you, I routinely call and speak to the charge nurse at a candidate's home institution. If I can determine that a candidate doesn't get along with nurses, patients, consultants, or other staff, it is very easy to avoid likely future problems.

Do not lose heart, however. As one of my mentors pointed out, "you are the talent." Being residency-trained in emergency medicine is an extremely sought-after certification. There is a great need for your skills, and you are almost certainly all going to get jobs.

Keep in mind as well that the information sharing process described above is a door that swings both ways. There were plenty of hospitals, or hospital staff, that I "interviewed" with

while rotating though as a resident where I was able to determine that it would be a poor fit for me.

Skilled medical directors realize that the interns of today will be covering the Christmas holidays a few years later. If you run a shop and allow, or perhaps participate in, a malignant culture, these future attendings will be working for your competitors.

Good luck as you embark upon the next stages of your career.



— *Edward J. Ward, MD, MPH, FACEP*  
*ICEP President*

## Resources for Residents

Find the materials referenced in this article:

- "Conflict Resolution," article by David Strauss
- "Resident to Attending: Transitions," PowerPoint slides by Alex Rosenau, MD, FACEP
- Audio podcasts for all Resident Career Day sessions

**Online at [ICEP.org/residentcareer](http://ICEP.org/residentcareer)**

# Thank You to Resident Career Day Exhibitors

Thank you to all of the companies who exhibited at 2013 Resident Career Day. Your support makes this educational program possible.

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**Illinois College of Emergency Physicians**  
3000 Woodcreek Drive, Suite 200  
Downers Grove, IL 60515  
Phone 630.495.6400 Fax 630.495.6404  
[www.icep.org](http://www.icep.org)

**Editor**  
Cai Glushak, MD, FACEP  
**ICEP President**  
Edward J. Ward, MD, MPH, FACEP  
**Executive Director**  
Virginia Kennedy Palys  
**Managing Editor**  
Kate Blackwelder

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# Audio Podcasts from 2013 Resident Career Day Available at ICEPBlog.org

ICEP has again made a valuable career planning resource available online: Podcasts of each of the educational sessions from the 2013 Resident Career Day program.

Whether you were unable to attend Resident Career Day or just want to listen to one of the lectures again, visit [ICEPBlog.org](http://ICEPBlog.org) to get started.

You'll also be able to view the presentation PowerPoints, where applicable, from the site to follow along during the audio recording.

Three lectures and two panel discussions on key topics were presented by expert faculty at the meeting in August and are now available for listening online. Each topic is approximately 15 to 45 minutes in length and puts an emphasis on



real-world advice to help residents prepare for the job search. Topics are:

- ACEP President-Elect Alex Rosenau, DO, FACEP, on transitioning from resident to attending
- William Sullivan, DO, JD, FACEP, on negotiating contracts.
- Matthew Pirotte, MD, on life after residency

- A panel discussion on selecting a practice type, with speakers discussing academic, large community or group, small community or group, and hospital employment options

- A panel discussion on getting involved with your specialty

Recordings from the breakout sessions on medical student planning, fellowship opportunities, and international opportunities are not available.

Log on to [ICEPBlog.org](http://ICEPBlog.org) today to start listening! Podcasts from last year's Resident Career Day are also available on the blog for those looking for more career planning resources.

## Highlights of 2013 Resident Career Day

ICEP's 2nd annual Resident Career Day, on August 29 at Presence Resurrection Medical Center, was a success. More than 260 residents, medical students and attending physicians were in attendance.

The program started with a keynote lecture by Alex Rosenau, DO, FACEP, President-Elect of the American College of Emergency Physicians. Dr. Rosenau's presentation focused on the transition from residency to attending.

Dr. Rosenau examined self-development, the importance of cultivating relationships, and communication tools for success. He offered tips for managing the balance between personal and work life, as well as strategies for optimizing daily procedures in the emergency department.

The Career Fair was busy and productive, as attendees learned about job opportunities from the participating recruiters who moved from

table to table to discuss their companies and open positions.

After the Career Fair, Bill Sullivan, DO, JD, FACEP, presented key information on contracts and negotiation. Dr. Sullivan, who is a practicing emergency physician as well as owner of a law practice, covered key topics such as compensation, contract termination, and malpractice insurance.

He also presented negotiating tactics from both sides, examining strategies employed by the hospitals and strategies the negotiating physician could use to counter.

Matthew Pirotte, MD, who just finished his first year as an attending, gave a short session highlighting the basics of life after residency and his advice for making the most of it.

Two panel discussions tackled

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**TOP:** Board members Dr. John Hafner (left) and Dr. Edward Ward (right) thank Dr. Alex Rosenau (center) for speaking.

**BOTTOM:** Residents explore job opportunities at the Career Fair.



# Start Early to Find Best Jobs After Residency: A Guide for the Perplexed

By Philip Salen, MD

After spending four years in medical school and two years training as emergency physicians, residents entering the final year of training have to think about their future.

The job search process is stressful, exhausting and expensive. Careful planning and appropriate prioritization can make this process tolerable and also markedly increase the likelihood of possessing a satisfying emergency medicine position when residency ends.

## Getting Ready for the Job Hunt

Getting ready for the job hunt should start prior to the beginning of the final year of your residency. When you are choosing your schedule for your final year, select your electives based on when you want to visit and interview for prospective jobs.

It is especially important to start the preparatory process early if you want to work in an area geographically distant from your residency, a highly competitive area of the country, or an academic setting.

In the past, graduating EM residents have benefited from the dearth of trained emergency physicians, but with more than 1,000 EM residents graduating every year, starting early and being organized is crucial.

Getting ready for the job hunt entails preparing several key documents: a curriculum vitae, a personal statement and recommendations. Your curriculum vitae is a crucial document and should be updated throughout the academic year with your new accomplishments.

ED directors will use the CV when deciding whether to invite you for an interview, so your advisers should review it for appearance and content. Because of the high quality of trainees in emergency medicine, many graduating residents have excellent backgrounds and clinical skills to offer their prospective employers.

For highly competitive positions, a personal statement can help distinguish you from other equally qualified candidates. Request recommendations early to ensure they will be ready by interview time.

In addition to references from your residency director and attendings with whom you have a good working relationship, consider having an emergency department nurse manager also write a reference. It will help document that you not only work well with your peers, but other medical staff as well.

## Prioritizing Your Goals

Throughout your residency, reflect on what is most important to you as an emergency physician and what you desire most in your practice. Prioritizing your goals early in the search may save you months of frustration because once you know what you want, you won't waste your time interviewing for jobs that don't offer it.

Take time to talk to your significant other and make sure you know his or her geographic preferences and career needs.

Choosing an emergency medicine position revolves around several key issues: geography, compensation, clinical hours and ED practice.

The best emergency medicine positions are at a place where you will be happy living. Target an area where you would like to live, and chances are you will also enjoy and be happy working there.

Most residents take positions geographically close to where they have trained. If you are looking to relocate to a part of the country that you are not familiar with, plan on job hunting earlier to ensure that you are truly interested in working and living in this particular area.

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# Highlights of Resident Career Day

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similar topics. The first group of panelists discussed determining what type of practice is for you. All panelists agreed that making this decision early in the job search is key to finding a position that makes you happy. John Hafner, MD, MPH, FACEP presented an academic perspective. Chintan Mistry, MD, FACEP presented the perspective of a large community or group setting. Dr. Sullivan and Art Proust, MD, FACEP, discussed the perspective of a small community or group. Dr. Ward presented the perspective of a hospital employee.

A second panel offered strategies for getting involved in your specialty. Dino Rumoro, DO, FACEP, Rebecca Parker, MD, FACEP, and E. Bradshaw Bunney, MD, FACEP shared their own experiences of how involvement can improve your experience and advance your career.

Three breakout sessions were presented at the end of the day. Stacey Chamberlain, MD, MPH, FACEP discussed international opportunities. Mila Felder, MD, MS, FACEP discussed fellowships. Dr. Hafner and Christopher McDowell, MD, MEd, PA, FACEP offered advice for medical student planning.

Audio recordings of all sessions (excluding breakout sessions) are available to listen to at ICEPblog.org.



Participants network with recruiters during the Career Fair breakfast at Resident Career Day.



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# Start Early to Find the Best Jobs After Residency: A Guide for the Perplexed

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Since many career opportunities are not advertised, it is wise to contact all the emergency departments in the geographic regions that interest you. This information is available from the American Hospital Association's Guide to the Health Care Field and lists information on every hospital in the United States.

Compensation and clinical hours are integrally related. Academic positions and those in geographically competitive areas offer lower salaries because there are so many applicants for each available position. Salaries tend to be higher in the Midwest and South and lower in the Northeast and the West.

If compensation is important, make sure prospective jobs offer the ability to pick up extra shifts. If you are more concerned about the time spent outside your job, do not accept a position that requires more than 2,000 clinical hours per year or extra shifts during understaffed times.

However, certain positions will pay a premium or require fewer clinical hours if you work extra night shifts or exclusively overnight.

### Finding the Right Practice

Finding the emergency department practice that best suits your needs revolves around many different issues: academic vs. community practice, urban vs. suburban vs. rural practice, the hospital's financial well being, daily census of pa-

tients, level of trauma care and an independent hospital based group vs. a large multi-hospital group.

Academic positions offer fewer clinical hours but require teaching responsibilities and possibly an active commitment to research. Community emergency medicine practices will require more clinical hours but fewer non-clinical responsibilities and better financial packages.

In this era of managed care, hospitals — particularly those in urban and small rural settings — are under tremendous financial pressures that could affect the staffing of emergency departments. In addition, the availability of “back up” to the emergency physician is another crucial issue to consider. This is especially important if the emergency department provides care to a significant number of trauma patients.

Finally, while some emergency physicians may like the freedom to focus solely on patient care issues that is offered by working for large multi-hospital groups, others may want more control over administrative decisions offered by independent hospital-based groups regardless of the extra non-clinical time commitments.

### Important Resources

The most important resource for residents from the onset of their job search is also the one most easily available: advice from attendings and recently graduated residents.

Job listings are posted in major emergency medicine journals, such as *Annals of Emergency Medicine*, and organizational newsletters such as EMRA's EM Resident and SAEM's Newsletter, which posts many academic job offerings.

Many other resources are available from EMRA. Find out more at EMRA.org.

ACEP's Scientific Assembly is also an excellent resource to start looking for jobs and provides an opportunity for networking. At Scientific Assembly, EMRA has several excellent presentations for residents beginning their searches, such as a Job Reception, a Job and Computer Job Bank and a Career Development Workshop. Additionally, many individuals representing hospital emergency departments, emergency medicine groups and professional placement services are present solely to recruit new physicians.

Plan to spend the proper amount of thought, time and effort in your search for the emergency medicine position best suited to your needs in order to make your efforts completing medical school and residency even more worthwhile.

After all, you are the one who put in the effort to complete medical school and residency. Now it's time to make sure you get the position that's right for you.

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## Find Open Positions at ICEP Career Center

The ICEP Career Center, online at ICEP.org/careercenter, is a valuable tool to search for job opportunities throughout Illinois and nationwide.

The Career Center is a multifunction job board with useful opportunities for physicians looking for a job and for employers looking to fill open positions.

Candidates can use the board in three ways:

- Search or browse the listings of all open positions

- Post a resume for employers to consider
- Sign up for the personalized Job Flash email blast, which sends new job opportunities to your email every other week, based on preferences you select

The Career Center currently has 50 job postings, so it's a great place to get started and see if any might be a good fit.

Groups, emergency department directors, recruiters, and other employers are also encouraged to visit the Career Center to discover the

opportunities for posting job openings.

Employers can post their recruitment ads to the site, browse resumes and profiles that candidates have posted, and opt to place their recruitment ads in the Job Flash email blasts for additional exposure.

The Career Center helps employers fill positions faster and at a lower cost than other job websites by reaching a highly qualified and targeted audience. Visit ICEP.org/careercenter today to get started.



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# Life After Residency: Ask Questions

“The most important question any emergency physician can ask is ‘What am I going to be doing in 20 years?’” said Greg Henry, MD, an ACEP Past President.

“You have to ask yourself ‘What am I going to be doing when I am 50 or 60 — how do I intend to mature in my career?’ You can be a dermatologist until you are 70. You can’t be wrestling drunks when you are 70,” said Dr. Henry.

You have to think long term, Dr. Henry said, and you have to start thinking about your future before you finish your residency. But residents are often ill-prepared when it comes to finding the right job and asking the right questions.

“Residencies are not good at preparing people for life. They do a much better job talking about disease,” he said.

By the time most non-physicians reach their 30s, they know how to look for a job and what questions to ask prospective employers. After all, most people that age have been employed for ten years or so and have had at least one or two jobs. But physicians are different. They don’t start looking for work until they finish residency training, and by that time they are usually in their 30s.

## **Establish A Mission**

Before residents start looking for a job, Dr. Henry suggests that they first look within them-

selves and determine what they want out of their career and their life. “Residents need to establish a mission statement for their life,” Dr. Henry said. “What do I want the elements of my career, my family life, my social life, and my practice to be?”

One of the most important decisions is deciding where you want to live. And before that decision is made, make sure you are aware of all the implications that decision will have — especially on your family.

“Doctors do not move by themselves,” Dr. Henry said. “Eighty-five to 90 percent of doctors in emergency medicine are married so you have family decisions to make. If you take a job and your spouse isn’t happy, how happy are you going to be?”

Dr. Henry suggests you look at a job as one-third of the equation. “When you decide to take a job someplace, the job becomes one-third, the lifestyle it creates becomes one-third, and the milieu it creates for the rest of the family is one-third,” he said.

Your location is also going to have an impact on your compensation and you need to take that into account as well.

## **Be Specific**

“A lot of residents have a general idea of where they want to go and what they want to do. But

to be truly successful they must focus on the specifics,” said Dr. Henry. “It’s the details that make all the difference as to whether you are content or dissatisfied with your job, and ultimately your life.”

And to get to the specifics, you have to ask the right questions.

“For example, [residents] don’t know what questions to ask about malpractice insurance,” said Dr. Henry. “So when they take their first job, they don’t realize that they have financial obligations that extend beyond that work situation.”

Understanding the elements of a contract is another important area.

“Residents need to know what a contract is and where you can go wrong and make a big mistake. This is a legal document and physicians say that as long as it is close to what they want, then it is okay. But that is not the case,” said Dr. Henry.

Emergency physicians should look at a contract the same way they look at marriage, Dr. Henry suggested. “Getting into it is no problem. But getting out of it is horrendously expensive,” he said. Most residents don’t understand what to look for in a contract and what questions to ask.

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Looking for ways to set yourself apart from other candidates as you start the job search?

Hone your skill set with ICEP’s hands-on workshops for emergency medicine ultrasound or emergent procedures.

The Emergent Procedures Simulation Skills Lab will be held November 1, 2013, at the North-Shore Center for Simulation and Innovation at Evanston Hospital. The full-day course is taught hands-on with state-of-the-art simulation equipment in small groups to maximize your practice time. You’ll refine your skills on more than 30 procedures in airway, cardiovascular, pediatric/

obstetric, and ultrasound modules, focusing on procedures that are seldom performed day-to-day in the ED because their clinical presentation is rare.

Find out more about this popular program or register online today at [ICEP.org/sim](http://ICEP.org/sim).

New in 2013, ICEP is offering workshops for physicians on the bedside use of ultrasound to diagnose acute life-threatening conditions, guide invasive procedures, treat emergency medical conditions, and improve the care of emergency department patients. Courses will be held November 21, 2013, and December 5, 2013 at the

ICEP Conference Center in Downers Grove.

The Ultrasound for Emergency Medicine workshops will cover pelvic, gall bladder, AAA, FAST exam, central lines, and peripheral IVs, using live models for most procedures. Each course has two options: the Basic course, which includes lecture and skills, and the Fast Track, which is entirely hands-on skills practice.

Find out more about the Ultrasound courses or register online today at [ICEP.org/ultrasound](http://ICEP.org/ultrasound).

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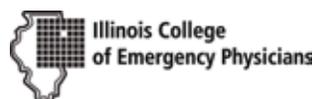
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## ICEP Calendar *of* Events 2013

**September 30, 2013**  
**ICEP Finance Committee**  
 9:30 AM - 10:30 AM  
 ICEP Board Room  
 Downers Grove

**September 30, 2013**  
**ICEP Board of Directors**  
 10:30 AM - 2:30 PM  
 ICEP Board Room  
 Downers Grove

**October 3-7, 2013**  
**Mock Orals Private Tutorials**  
 Chicago O'Hare Marriott  
 Suites, Rosemont

**October 12-13, 2013**  
**ACEP Council Meeting**  
 Seattle, Washington

**October 14-17, 2013**  
**ACEP13**  
 Seattle, Washington

**October 22-25, 2013**  
**Emergency Medicine Board Review Intensive Course for Qualifying & ConCert Prep**  
 ICEP Conference Center  
 Downers Grove

**October 29, 2013**  
**ICEP EMS Committee**  
 11:00 AM - 1:00 PM  
 ICEP Board Room  
 Downers Grove

**October 29, 2013**  
**EMS Forum**  
 1:00 PM - 3:00 PM  
 ICEP Conference Center  
 Downers Grove

**November 1, 2013**  
**Emergent Procedures Simulation Skills Lab**  
 NorthShore Center for Simulation and Innovation  
 Evanston Hospital, Evanston

**November 12, 2013**  
**EM4LIFE 2013 LLSA Article Review Course**  
 ICEP Conference Center  
 Downers Grove

**November 21, 2013**  
**Ultrasound for Emergency Medicine: Basic & Fast Track Courses**  
 ICEP Conference Center  
 Downers Grove

**November 28-29, 2013**  
**Thanksgiving Holiday**  
**ICEP Office Closed**

**December 2, 2013**  
**ICEP Educational Meetings Committee**  
 11:00 AM - 1:00 PM  
 ICEP Board Room  
 Downers Grove

**December 5, 2013**  
**Ultrasound for Emergency Medicine: Basic & Fast Track Courses**  
 ICEP Conference Center  
 Downers Grove

**December 9, 2013**  
**ICEP Finance Committee**  
 9:30 AM - 10:30 AM  
 ICEP Board Room  
 Downers Grove

**December 9, 2013**  
**ICEP Board of Directors**  
 10:30 AM - 2:30 PM  
 ICEP Board Room  
 Downers Grove

**December 24-25, 2013**  
**Christmas Holiday**  
**ICEP Office Closed**

**Register for all courses  
 online at [ICEP.org](http://ICEP.org)!**