

Transcript Details

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Why Look to Locum Tenens to Relieve Burnout

Announcer:

This is ReachMD, and you're listening to Spotlight on Locum Tenens, provided in partnership with Locumstory.com. Here's your host, Dr. Jennifer Caudle.

Dr. Caudle:

After spending countless years practicing medicine, it's not uncommon for physicians to experience burnout. In fact, a recent survey found an overall physician burnout rate of 42%, which is only expected to increase due to the COVID-19 pandemic. But for those affected, locum tenens work may provide a flexible alternative, while giving physicians the opportunity to travel the world, have new experiences, and perhaps most importantly, prevent the devastating effects of burnout. So to learn more, today we're sitting down with a physician to hear about his experiences.

Welcome to Spotlight on Locum Tenens, on ReachMD. I'm your host, Dr. Jennifer Caudle, and here with me today is Dr. Ronald Stiller, former pulmonologist at the University of Pittsburgh. Dr. Stiller, welcome to the program.

Dr. Stiller:

Thank you.

Dr. Caudle:

To start us off, Dr. Stiller, can you share with us a little bit about your career and when you started to experience feelings of burnout?

Dr. Stiller:

Well, career-wise, I graduated from GW Medical School, came to Pittsburgh in 1982, where I started residency, anticipating going elsewhere for fellowship. However, I ended up staying in Pittsburgh for fellowship in pulmonary critical care medicine and was subsequently offered a faculty position, and therefore stayed on even longer. But working from 1982 to 2017 at the same facility, in the same institution, I felt I needed a change. I had an entire career in tertiary care medical centers, academic medical centers, east coast cities. I wanted different, and one opportunity for different was locum tenens.

Dr. Caudle:

So once you started to experience burnout, Dr. Stiller, can you tell us how you responded and how exactly you came to find locum tenens work?

Dr. Stiller:

Well, the feelings that I was having, certainly feeling stale within the same institution really since internship, and so was definitely something that I had considered for a number of years. My children had grown. Sadly, my wife and I separated, and I had, if you will, a new sense of freedom, and therefore wanting change. I grew up in Boston, as I said, in academic medical centers. I wanted different, and I looked to locums to give me different. I ended up choosing Washington state because of my daughter, who is currently a pulmonary critical care fellow at the University of Washington in Seattle. This was an opportunity for me to get closer, but Walla Walla is on the total other side of Washington state, and very much a farm area. And here I had the opportunity to work with people, meet people that were completely different from anything I had worked with before. I admit, I had to prove myself because people were wondering,

you know, “Oh, here comes this hot shot from Pittsburgh. Is he going to drive us crazy?” It worked out very favorably. Had some good, professional relationships, and in the less restrictive environment, I really did feel a sense of rejuvenation. And I’m pretty much along in years. I’m 74, but I don’t feel it, because I love doing what I’m doing, and I think if I had stayed at Pitt, I really would have been struggling more.

Dr. Caudle:

What has your experience with Global Medical Staffing been like? And what kinds of opportunities has it brought you?

Dr. Stiller:

My first recruiter at Global was a guy that I had really developed a good sense about. I was clearly anxious about making this rather dramatic change, but the recruiter, Kip Robinson, who unfortunately doesn’t work for Global anymore, was incredibly reassuring. He was never too busy to answer my questions. Ultimately, we became friends. It’s more than just, you know, “Hi. Here’s where I want to go. This is how much I want to make. And do it for me.” They’re not my medical travel agents. They are friends, they have helped me out. If they ask me to do something extra, I’m more than happy to help them out. In terms of opportunities, they have offered me the world. They have offered me other sites in the U.S. They have asked me about Guam, they have asked me about New Zealand, all of which have been incredibly exciting to me, and given the fact that my kids have grown, and I’m no longer married, I have that freedom.

Dr. Caudle:

Going deeper here, Dr. Stiller, tell us a bit about your medical mission work, and what its impact has been in staving off burnout for you.

Dr. Stiller:

Well, there’s no question that the medical mission has been an enormous addition to my life. I work with an agency called, “Surgi Corps International.” It’s predominantly a plastic surgery group doing also some ortho general surgery, and on rare occasion when possible, dental surgery. How I got involved with this group is a long story, but basically, they are Pittsburgh-based. I met some of the people, and as I indicated earlier, I had some wanderlust, and here was an opportunity to literally see the world while doing medicine. How does a pulmonary critical care doc get involved with a surgical group? I became their internist. I would troubleshoot problems post-operatively, I would deal with patients in the immediate recovery area and the immediate post-op area, help with extubations, and any problems that might arise. So, I think there’s a couple of benefits there. One, obviously, is I continued to do medicine, granted in different cultures, but I have a passion for medicine, and I will do it anywhere, at any time. But additionally, doing something in a different culture – I’ve been to Bhutan five times. I’ve been to Ethiopia. I’ve seen crushing poverty, but it’s an opportunity to help people who have less than nothing, and you give them something. I’ve been to Burma, Myanmar, where we’ve had similar opportunities. And finally, in Vietnam. The opportunity to travel, to immerse yourself, to some extent, in a culture, and to see the good you’re doing for people who have so little is just awesomely, awesomely rewarding.

Dr. Caudle:

For those of you who are just tuning in, you’re listening to Spotlight on Locum Tenens on ReachMD. I’m your host, Dr. Jennifer Caudle, and today I’m speaking with Dr. Ronald Stiller about his experience with burnout and locum tenens work. So, given your experience, Dr. Stiller, what are some of the pros and cons of working as a locum tenens?

Dr. Stiller:

Well, yeah I’m going to have a hard time figuring out the cons. The pros are a willingness to push the envelope and for some, that may be a con. You’re going into somebody else’s environment. You don’t go into a place to tell them how it’s done. I mean, I came from a major academic medical center. Clearly, we did things differently in pulmonary and critical care medicine in Pittsburgh than we do in Walla Walla, Washington. But my goal isn’t to go there and tell them how to be docs and nurses. My goal is to go there and help out. I spend a lot of time with migrant workers now. I’m doing the best I can to improve my Spanish. I could work harder at it, but I’m learning. Working with farmers, it’s different. My goal was different, and I’m just enjoying doing different.

One sort of anecdotal thing: Discussion of code status is always a little bit challenging, and my experience in Pittsburgh is there were times when patients would recognize they’re at the end of life, but with all of the subspecialists, sort of sprinkling their words into the patient, it was a little hard, a little confusing. Code status was a little bit more difficult and circuitous to address. When you talk to a farmer, who has seen birth and death on the farm, they have a different approach. Their moving on to death is just a part of life. I have found it actually to be a very easy group to work with, not only in discussion of code status but just in general. Making suggestions and having them have a conversation with you because a lot of these people have lived incredibly independent lives. And you’re coming to discuss something major with them at a stressful time, and in many cases, it’s a really enlightening give-and-take. I’ve learned a few

things in Walla Walla as well – not only about medicine, because I've had to relearn a lot of general medicine, now that I'm out of the ICU, but also in terms of, if you will, the cultural differences between the rural environment and the urban environment.

Dr. Caudle:

Looking back on your experience with burnout, do you think locum tenens has helped you overcome, or prevent it? And do you think it could help others who are at high risk for burnout as well?

Dr. Stiller:

In a word, for some anyway, absolutely. Admittedly, locum tenens is not for everyone. There is, you know, the inconvenience of living out of a suitcase, the inconvenience of airport crowds and travel, especially now in the era of COVID. But for me it has been absolutely rejuvenating. I've been able to move out of the restrictive academic environment I don't miss the fact that in an academic medical center, among the numerous subspecialists, everybody has their own little pod, or their own little silo, and frequently the silos don't communicate. In a rural, community hospital, we are much more interactive, because we have to be because a lot of things that happen at academic centers don't happen in the smaller hospitals. So there's more interaction, more recommendations to one another, and I have found that to be really, for me, something very special, because, I say this modestly – I think I was a pretty good critical care doc, but working in the ICU, you tend to lose a lot of general medicine/internal medicine skills and knowledge, so I've had to relearn a bunch. And for that, I have been very appreciative and grateful. There's no doubt that it has turned a page in my professional life, and I have been very satisfied with what I have done so far. And I think if people are willing to kind of push the envelope a bit, and take a risk, it may be just the right thing to do.

Dr. Caudle:

Finally, Dr. Stiller, are there any other thoughts or takeaways you'd like to share with our audience, regarding your experience with burnout or locum tenens work?

Dr. Stiller:

Yeah, you have to understand why you want to go into it. Are you doing it for the money? Are you doing it for the fact that you just kind of want to go someplace, do your own thing, and have more time off? None of that is necessarily wrong, but I think if you go in with that attitude, you're going to miss out on so much. As you may have gathered from some of my earlier comments, I'm wanting to look at different cultural approaches to things. Go into it, immerse yourself in the culture you're entering, rub elbows with the people. They may do things differently than you, but work with them, get to know them, gain their confidence, teach them what you can. And more importantly, learn from them what you can.

Dr. Caudle:

Well, I'd like to thank you, Dr. Stiller, for being so open and for sharing your story. Burnout is a very real threat in the healthcare community, and it's great to know that locum tenens work helped you overcome it. Dr. Stiller, it was great having you on the program.

Dr. Stiller:

Thank you very much for having me.

Announcer:

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