



Burnout? How to Manage Stress

The practice of emergency medicine has many subtle yet cumulative stressors, which can lead to job dissatisfaction and burnout over time. This presentation will identify many of the stressors associated with emergency medicine and provide strategies for dealing with them.

- Identify sources of stress that result from scheduling, shift work, malpractice litigation, risk of infectious disease exposure, and death and violence in the emergency department.
- Recognize specific ways to handle the many sources of stress in emergency medicine.

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FACULTY

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BURNOUT? HOW TO MANAGE STRESS

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CASE STUDIES

1. A 46 y/o &EP is becoming increasingly sullen on the job. Regarded previously as cordial and easy-going, she now tends to be pointedly sarcastic, especially when her orders are questioned. Patient complaints to the effect that she is cold and uncaring are becoming frequent. She stops attending her son=s hockey games. When asked by a colleague who finds her dining out alone if all is OK she says AWhy do you ask?≡
2. A 39 y/o &EP in an urban hospital begins to have trouble treating trauma victims. She feels washed out and drained whenever she does so. Since there is double and triple coverage she is able to avoid such cases for a while, but one evening multiple gangland shootings come in and she is forced to manage several of them, doing so competently. Before the last case has gone to surgery she sits down on the floor and begins to cry.
3. A 50 y/o % EP has been calling in sick with increasing frequency when scheduled to work nights. He initially would call a few hours before his shift was to begin, but as the sick calls became more frequent he would give notification up to 16 hours in advance that he is too ill to work that night. His complaints are non-specific, sometimes GI related. When asked by his colleagues to seek medical attention he says that he has done so and that everything should be OK soon. Although scheduled for four shifts in the next seven days, he asks for the week off.
4. A 42 y/o % chief of EM at a small town hospital becomes increasingly hostile after one of his EP=s resigns to move out of state. He is unable to fill the vacancy, and refuses to utilize FP=s part time in the ED even though they are willing to help out. His administrator gives him permission to hire a locum but he never gets around to arranging it. He cancels the upcoming vacation with his girl friend, and is heard to argue with her on the phone while at work. He curses when patients appear for triage, sometimes loud enough for the patients to hear.

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5. A 57 y/o % professor of EM at a teaching hospital begins making rather bizarre statements, saying that medicine doesn't really do any good and that doctors should just let natural selection take its course. He appears for work with his usual punctuality, but residents and colleagues have a hard time tracking him down. He is often out of the ED, and begins to spend much of his time in the doctor=s lounge quoting Nietzsche and Rush Limbaugh. He announces plans to run for mayor.

6. A 41 y/o &EP undergoes a marked personality change after divorcing her husband. Always athletic, she arranges her schedule around marathons and talks of little else for several months. After a while she stops running, claiming a leg injury. She does two bungee jumps. She begins to dress provocatively and flirts actively with younger men, even patients. She has been hanging out in singles bars, and one night is brought into the ED after driving her new sports car into a light pole in a parking lot. Following this, she begins to come in late for work and even misses a couple of shifts. When confronted she denies that she has done anything wrong but says it won't happen again. She comes in early for the next few shifts, then misses two shifts in a row.

BURNOUT SYMPTOMS

- Denial
- Isolation
- Anxiety
- Dread
- Depression
- Anger
- Avoidance
- Dysgusia
- Aesthenia
- Addictions
- Martyrdom
- Overwork
- Risk taking
- Politics

BURNOUT? HOW TO MANAGE STRESS

MANAGING SEVERE BURNOUT

1. **Extended time off (mandatory)**
2. Counseling
3. Identify and deal with stressors (internal and external)
4. Gradual reintroduction to work
5. Limited hours
6. Supportive environment
7. Follow up

MANAGING DAILY STRESS

- # **Sleep**
- # Exercise
- # Nutrition
- # Family and friends
- # Reasonable schedule
- # Regular vacations
- # Solitary fun
- # Group fun
- # Talk
- # Meditation
- #
- #

A Stress can be managed, provided the management itself is not stressful.≡

Exercise