VOICE OVER:

This is Residents in a Room, an official podcast of the American Society of Anesthesiologists, where we go behind the scenes to explore the world from the point of view of anesthesiology residents.

Really going in with the mindset that I want to be the best contributor to the team, because you are still on a team.

Very frequently, being referred to as a physician, you are automatically the leader of the team whether or not you realize that people will look at you for your leadership.

You get to learn new things besides what you’re taught in medical school and make a contribution to the scientific world and to patients.

Seek out those that you consider to be strong leaders in your institution and proactively seek their advice and mentorship.

DR. LISA SOLOMON (HOST):

Welcome back to Residents in a Room, the podcast for residents by residents. I’m Dr. Lisa Solomon, Assistant Professor at Rush University Medical Center, back again with my colleagues to discuss leadership and publication opportunities that can help you advance your career. Welcome back to the show. Please introduce yourself.

DR. DANIELLE LEVIN:
Hi, I'm Danielle Levin, and I'm a CA2, at St. Elizabeth Medical Center in Boston, Massachusetts.

DR. CHRISTINE VO:

I'm Dr. Christine Vo. I'm an Assistant Professor at the University of Oklahoma. I graduated in 2017 and I've stayed on as faculty.

DR. DREW CORNWELL:

I'm Dr. Drew Cornwell. I'm an Interventional and Chronic Pain Management Fellow at Case Western Reserve University Hospitals in Cleveland, Ohio.

DR. HEENA AHMED:

Hi, I'm Dr. Heena Ahmed. I'm an Anesthesia Resident at Baylor College of Medicine in Houston, Texas. I'm currently a CA3.

DR. SOLOMON:

Great. Personally, I think our specialty is unique that we have early career physicians advancing into leadership opportunities. What leadership opportunities have been available to you as you've advanced through medical school and residency?

DR. LEVIN:

In medical school, I was elected to be the Vice President and President of our interest group. My responsibilities included leading executive board meetings and general interest group meetings, organizing talks, clinical workshops. And then when I was also a medical student, the President of the New Jersey State Society of Anesthesiologists invited me to be a Medical Student Representative, and I was the first Medical Student Representative of the society, and I basically served as a liaison between the medical students and the rest of the society. I organized events that helped medical students learn about the field of anesthesia, attended executive committee meetings and helped organize the annual NJSSA, New Jersey Society of Anesthesiologists meeting.

And then I was also nominated to be the ASA Medical Student (sic) Delegate and then the ASA Resident Component Delegate. I now serve as a Co-Chair Elect of the Committee on Resident Fellows Affairs at the Massachusetts Society of
Anesthesiologists. All of this has helped me strengthen my organization, communication and time management skills.

DR. CORNWELL:

A lot of the leadership opportunities that I had are the, the ones that I showed up for or, or sought out to, to become involved in. Kind of interesting kind of transition throughout my training and, and career as a medical student, I really didn't get turned on to the field of anesthesiology until very early of fourth year. And I really didn't have many leadership positions in medical school in general, just because I was trying to focus on not only the, the studies, but I had, I have a couple of kids and, and was trying not to spread myself too thin.

But when I got in, into residency, I felt the desire to be involved in more than just the clinical work throughout my career. And I just began showing up for things, and any time I'd see a, a solicitation in my email for being involved in a committee or, or something in that position, I would reply and, and reach out for it and essentially raise my hand. And that really got me tied into a number of different committees, not only through the ASA, but through other professional societies.

DR. VO:

So at our program, we have an externship in anesthesiology, and I signed up to become the Chief Extern during medical school, and so my responsibilities included direct communication with the anesthesia techs, Program Directors, and the externs, and I also helped with creating the monthly schedule. And so this opportunity helped me with honing my time management skills, organization and mediation skills. It also increased my face time with the program directorship, so that increased my overall interest in anesthesiology. And these skills have definitely come in handy in my administrative role as Assistant Program Director because I continue to utilize these skills I developed early on.

DR. AHMED:

I was also a Medical Student Representative in the House of Delegates with ASA as a medical student and was involved with my student interest groups. I think when I entered residency, I wanted to even do further leadership roles with the ASA, and I think actually, it was a suggestion from a, a mentor I had in medical school to run for the ASA Resident Component Governing Body. And so, intern year I was elected as Junior Editor for the Residents’ Review. That's part of the ASA Monitor. And now I'm currently a Senior Editor, and it was such a great position to have during residency because it
really helped with networking and also just gave me a place where I could keep up my writing because that was an interest I had for, for many years throughout my career, I've been trying to incorporate that into my medical career moving forward. And so that was just a great way to combine the two interests that I had during residency.

DR. SOLOMON:

Dr. Vo spoke about her leadership roles helping her grow as a leader. Can anyone else tell us what has helped you grow as a leader?

DR. CORNWELL:

I think what helped me grow was functioning as a leader. It doesn't take any, there's no specific qualifications that you need to have to have a leadership position, and that can sometimes be a dangerous thing even for yourself. You really can't grasp what it is like until you're doing it, not only whether it's on a, a committee or an organization or, or in my position when I served as Chief Resident this last year. I think the greatest amount comes from living it and then reflecting on, on the interactions that you have as a leader and those improvements as you go on, I think have been the, the strongest emphasis for me.

DR. AHMED:

I agree, I think embracing the responsibility that you get with the position helps you grow as a leader and really going in with the mindset that I want to be the best contributor to the team because you're still on a team, and also as a leader for, for those that I work with. And I think it’s just helped me grow the more opportunities that I seek out in terms of an actual leadership position or just working for teams in any capacity that I can find.

DR. SOLOMON:

Were you given enough leadership training during residency? If not, do you have a sense of what might be a meaningful addition to the curricula when it comes to leadership in anesthesia?

DR. LEVIN:

In my residency program, senior residents get to hold the position of quote unquote pretending, which means that they get to coordinate the board for several days under the supervision of our attending. But besides that, we don't have any official formal training course for residents to become leaders. But if residents want to, they can seek
out their own leadership opportunities at are residency program. For example, I've had several leadership roles by leading quality improvement projects that I had a special interest in and made some changes in our hospital to improve patient care in certain ways.

DR. CORNWELL:

When it comes to leadership, I think you can get lost on a lot of, a lot of residents and medical students, is that leadership doesn't have to include a title, a formal title on a committee or President or Vice President. Very frequently being referred to as a physician, you are automatically the leader of a team, whether or not you realize that people will look at you for your leadership. And so as far as being given leadership roles, we are given a lot. I think a lot, what it really comes down to is our realization that we are in fact, in a leadership role and then utilizing that realization to focus on the characteristics that you should be developing as a leader and realizing that's a situation to develop them.

But as far as a formal curriculum, I did not have one necessarily in residency, really formal said this is your leadership training. But what I think and what I tried to emphasize was giving everyone a responsibility outside of their clinical duties, whether it was the, being on the Social Chair or the Wellness Committee or the Scheduling Committee. Know there's always a, a situation that you can find to use people's skills and, and put them to work to not only better the program, but also to better themselves in, in experiences that are beyond the clinical ones.

DR. VO:

We did not have a formal training course during residency either, but we've worked to incorporate more opportunities to foster those leadership skills for more residents throughout residency. So in essence, we're engaging residents in activities that encourage practicing leadership skills and career management. And these are to emphasize the characteristics of integrity, delegation, effective communication, adaptability, showing respect for each other, and having influence on others. And so, this is done by like, informal, scheduled, many didactic sessions that are led by our senior level residents. We created Chair positions for different departmental committees so our residents can take ownership for their curriculum for the Mentorship Committee, Wellness, Quality Assurance, and Metrics Committees. And then we also have senior and junior level residents working together closely in our longitudinal rotational structure so that opportunity for leadership skills come into play.

DR. SOLOMON:
I liked how you talked about skills associated with leadership. For any additional specific skills that you associate with leadership such as negotiation, listening, networking, and if so, do you feel these skills are something that you possess or are intentionally working to get better at?

DR. CORNWELL:

Dr. Vo mentioned training the residents in those positions to give something to have ownership for. And I think one of the, the major skills associated with leadership is ownership, and even in, in some contexts and books that's been referred to as extreme ownership. And when you take on that mentality and responsibility for what's going on in, in what you're overseeing, it really kind of brings not only you to the next level, but it also pulls those that you are leading to a higher level when they see that you're, you know, willing to metaphorically and maybe even literally run through a wall for them and have their backs in, in situations. And I don't think that's, you know, speaking to that one specifically, I I feel it's one I have, because I focused on it and it's one I'm continually looking to strengthen and grow. I think a lot of these skills are ones that we all may have at different capacities. We just have to identify them and realize which ones we want to develop.

DR. VO:

Yeah, I, I associate a strong leader as someone that is an effective communicator that can potentially influence positive change. So this includes negotiation skills, active listening, being able to engage my audience, and then to also practice what, what I preach to gain the respect and trust of others. So I feel I've been, I've been able to utilize these skills in some capacity throughout my training and career, but I'm definitely looking to intentionally work to improve this constantly.

DR. SOLOMON:

In my experience in learning how to grow my own personal leadership skills, I know that the ASA definitely offers opportunities for residents. There's a Resident Management Seminar that they offer, and that's very helpful. And as you progress in your career as an early career physician, there is the Executive Physician Leadership Program.

Can you tell our listeners about any good resources that can help them learn more about leadership opportunities?

DR. LEVIN:
There are many local and national leadership opportunities for those that are interested. You can reach out on the state level or national level, and I think it's also important to seek out your mentors and see what they have been involved in in the past and what they're currently involved in and see what you might relate with and what you might be interested in to further develop your own leadership skills and opportunities.

DR. AHMED:

I agree. I think starting locally with the attendings that you're around can help lead to a lot of opportunities. I think also starting with the local chapter of the ASA at the state level would be a great place. And then obviously going from there to any opportunity you find.

I think when I was a med student, the way I looked for opportunities was a little different because I hadn't built my network yet. So, I think I kind of really just looked online. You can definitely find a lot of opportunities for students and residents just looking at the ASA website, or even your upperclassmen, too. But that's really how I found my first opportunity in doing a research fellowship. And also, I sent a lot of emails. And I think just reaching out to whoever you can really helps you at least get ideas and then that will lead to more people, or who know someone else, or, or it'll lead to the opportunity itself. And that's I think the way I've looked for opportunities has changed. But still, I think being proactive and reaching out to people has still benefited me today.

DR. VO:

Yeah, seek out those that you consider to be strong leaders in your institution and proactively seek their advice and mentorship. A lot of times they can share their experiences with the resources that have been influential in strengthening their leadership skills, but also keep your eyes and ears open to local and national opportunities for leadership development. My campus has a formal, Multidisciplinary Faculty Leadership Program that I actually stumbled upon when applications for enrollment popped up in my email and I checked it out, and it's been a great opportunity for me to hone my skills.

DR. CORNWELL:

These days, there's really no geographic boundaries to the opportunities you can get involved in. And we recently had a strong push towards everything being done virtually. So you really don't have to be able to travel necessarily anymore to be involved in a lot of these things. And, you know, reading the emails that you might think are spam very
often have opportunities, whether from the ASA or any other society, very frequently are soliciting residents and medical students and fellows as volunteers for committees, and they're always looking for willing hands. Not only to do some work at the moment, but they're, they're always seeking to train the next generation of leaders within the profession.

DR. AHMED:

I also think attending conferences or events, whether that be Zoom these days or, or in person, is really helpful because then you get to network and find opportunities that way.

DR. SOLOMON:

Those are great points. It was the leadership opportunities that I had that really led me to get involved more into publication. I was published in The Monitor, which was part of my own effort to get more involved with advocacy. And that gave me the opportunity to talk about health equity and issues that are important to me.

I wonder if any of you are interested in publication? Have you tried to get published already or is there anything in particular that's holding you back?

DR. LEVIN:

I've had a strong interest in research since high school and have been very fortunate to have found multiple opportunities to get published. I did a distinction research in medical school, where in addition to several retrospective studies, I led two clinical trials that I started from basically scratch. I wrote the protocol, applied for the IRB, enrolled patients, did the statistical analysis, wrote up the manuscript, and then had a first author paper on those clinical trials. It's been an amazing opportunity because you get to learn new things besides what you're taught in medical school or in residency by doing literature analysis, and you get to develop networking skills by working with mentors, with other residents, attendings, medical students, you develop your communication skills. You get to also further develop your writing skills and make a contribution to the scientific world and to patients. You can also go and attend conferences, and I've really enjoyed doing a combination of all that. I look forward to doing it in the future.

DR. VO:

A major aspect of academic medicine is the ability to get published, but I know it's not always easy. I've been fortunate to be involved in publishing a textbook chapter and an
article in The Monitor as well, and contributing to a few online modules and quizzes. But not to say that I haven't been declined either, and those can be disappointing, but also a motivator to refine my abilities.

I've been able to find encouragement and advice from more experienced colleagues, and that's been helpful in keeping me moving forward. And joining the ASA Committee on Young Physicians has also been really great because it gave me an opportunity to collaborate with my peers outside of my institution and overcome that initially intimidating world of publications.

DR. CORNWELL:

You know, I was interested in publishing and, and writing articles because as undergrads and medical students were taught and kind of the culture that you have to publish have to do, write articles. And I was having a hard time getting anything started and, and so kind of tied into our discussion from the previous episode on mentoring. It wasn't really until I got tied in with some mentors that really, that opened doors for me, and gave me opportunities to, you know, try my hand at, at publishing and writing articles. And, and frankly, not to be the voice of dissent, but I actually found that I didn't quite enjoy that work, and they ended up steering me in a different direction that I, I've found much more interested in my individual sense.

DR. AHMED:

In medical school, I did get opportunities through the ASA actually for publication when I did a medical student research fellowship, and that was a great experience for sure, to get me into the world of research and publication. But I think similar to Dr. Cornwell, I didn't find as many topics or projects that I felt personally passionate about for me to continue, and I sought out different opportunities that suited me personally. And that kind of led me to combining writing, with my interest in writing that I already had, and looking for more opportunities that I could use that in medicine. And once I kind of found an avenue in editing, that really opened a lot of doors. I think it's so great that you published in The Monitor because currently, as like a Resident Review Section Editor, I really have found more satisfaction in getting other people to write and editing their work than I had, even in writing a couple of pieces myself.

A lot of residents don't think that they're a writer or they aren't used to writing this kind of format. And so, when you encourage them to write a piece for, for the Residents’ Review, it's just such a great experience to see them grow as a writer and work with them. And when you give them edits, they, they suddenly have a lot of ideas on how their voice should be presented. And, and they're really finding their place as a writer as
well. And so, I think that a lot of people can feel discouraged about publication, but there's a lot of different types of publication, doesn't always have to be research, doesn't have to be a certain topic, and I think that it really does offer a really great opportunity for, or everyone in all kinds of writers.

DR. SOLOMON:

So, it sounds like there's a lot of opportunity and value in being published or getting involved in areas that you're specifically interested in. Thank you for that information.

Is there anything else that you'd like to discuss a bit more about your recommendation for a young anesthesiologist interested in leadership and/or publication opportunities?

DR. CORNWELL:

Well, I would say is that everything that you're going through in this training is a process, and there's a lot of us fixate on the end result. You know, we look, oh, it's how great things are going to be when medical school ends, or how great it's going to be when residency ends or how great it's going to be when I'm attending. But the reality is your training is now, your life is now, you're learning is now. And the process that you go through and the leadership opportunities or the process that you go through in writing articles is, there's a lot to be learned from that. And honestly, what you get from that is, is a lot more beneficial than the ultimate result of, of the work.

DR. AHMED:

I would say really be proactive about finding opportunities that suit you, and that could mean reaching out to the attendings or mentors that you have at your institution or nearby. But it can also mean looking online and applying to an opportunity that you wouldn't have. Maybe you don't think you have the qualifications for, or wasn't something that you had thought about ever trying. And I think just being proactive and giving yourself the opportunity can really open a lot of doors because you probably have a lot more of those leadership qualities that we talked about earlier than you think, and everyone is constantly working on those all the time. And so, I think just looking for those opportunities for publication or leadership in any form, starting small and however you're comfortable and really putting yourself out there, will always benefit you.

DR. LEVIN:

I think working on some quality improvement projects in the hospital that we're all encouraged to do in residency, but some of them, if you become more passionate about
it, you could present them at a local meeting or a national meeting like an ASA, because now there are specific categories for quality improvement projects, and that's a way to get published, get involved and open up your opportunities for other leadership and other research opportunities, if that's what you're interested in.

DR. SOLOMON:

So for our last question, the other resources that you might find helpful, social media, a book, what are your suggestions?

DR. VO:

I think in the world that we live in today with a lot of access to the internet, checking out websites to either the ASA or even subspecialty societies are valuable because they have a whole host of resources there that you can check out to increase your networking opportunities or to engage in different projects that are available for medical students, residents, and faculty. So, I think those are definitely something to check out.

DR. SOLOMON:

I agree, in addition to the ASA content, I also enjoy the Harvard Business Review. There's great books on emotional intelligence and crucial conversations with respect to really building relationship skill sets, so I would definitely recommend that.

DR. CORNWELL:

If you ever have your opportunity to pull yourself away from our heavier academic reading, there's a book that I really enjoyed called The Leadership Challenge that was recommended to me at the start of my year as a Chief Resident and, and reading through that as I went through different experiences through that, you know, I found to be very helpful.

DR. SOLOMON:

So I'd like to thank Dr. Vo, Dr. Cornwell, Dr. Levin and Dr. Ahmed for joining us to discuss about leadership and publication opportunities. Thank you for joining us on Residents in a Room, the podcast for residents by residents.

DR. VO:

Thank you so much for inviting me to join this. This was fun.
DR. LEVIN:

Thank you very much for inviting me as well to join this.

DR. AHMED:

Thank you for having us. This is a great conversation.

DR. CORNWELL:

It's been a lot of fun reflecting on my, my pathway and my journey, so I really appreciate having this conversation.

DR. SOLOMON:

Great job, everyone.

(SOUNDBITE OF MUSIC)

VOICE OVER:

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