



## **Episode 16 - 5 Steps to Becoming a Medical Writer**

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MA: “I think that we would all do ourselves a service and those around us probably too, if we really truly enjoyed what we're doing in life”.

HF: Welcome to The Doctor's Crossing Carpe Diem podcast. If you're questioning your career in medicine, you've come to the right place. I'm Heather Fork, a former dermatologist and founder of The Doctor's Crossing. As a master certified coach, I've helped hundreds of physicians find greater happiness in their career, whether in medicine, a nonclinical job, or something else. I started this podcast to help you discover the career path that's best for you and give you some resources and encouragement to make it happen. You don't need to get stuck at the white coat crossroads. So pull up a chair, my friend, and let's carpe that diem.

Hello, hello. Welcome to the Doctor's Crossing Carpe Diem podcast. You are listening to episode number 16. I am really excited about our guest today, and I know I say that all the time, but it's really true. Her story is so great because it's an example of how you can go from being unhappy in practice with no idea what else you could do to figuring it out and actually finding a career that's your passion.

My guest is a former client, Dr. Mandy Armitage. She specialized in sports medicine, but realized very early on something wasn't right. Fast forward to today, Mandy is a highly successful medical writer who has worked in both the employed and freelance settings. She also helps coach aspiring physician writers and just published a wonderful book entitled “From Clinical Practice to Medical Writing: A Career Transition Guide”.

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However, almost nine years ago, when she first contacted me, she was in her very first year out of her sports medicine fellowship, and things were looking bleak. On our initial call in March of 2012, she said to me, “I've just been practicing for six months and this is not for me. I'm just over it. I enjoy the people I work with and sports medicine, but when my pager goes off, I dread it and I'm having catastrophic thinking and anxiety”.

It seems pretty daunting to think about how to change careers so early on, but Mandy's story is inspiring because not only did she find a new direction, but she was able to reconnect with a passion that was previously dismissed.

In this episode, Mandy will be sharing her story as well as laying out five steps for how you can become a medical writer. Even if you're not considering medical writing, I think you'll find hope and encouragement in her story as it's more proof that you can go from confusion at the crossroads to career fulfillment and happy life. It's my great pleasure to welcome Dr. Mandy Armitage to the podcast. She's joining us from Indiana. Hey Mandy, how are you?

MA: Hi, Heather. I'm good. Thank you for having me. I'm so excited to be on your podcast.

HF: Yeah. Well, we've been talking about this for a bit and I'm glad this moment has come. And I have your book in my hand right here, though. This is going to be fun to talk about it. So, I went back through our notes from coaching and it was really interesting to read them because your story has a lot of great pearls in it for anyone at the crossroads. So, let's dive in, take us back to that time in 2012.

MA: Okay. It feels like ages ago, but I remember it like it was yesterday. So, as you mentioned, I had done residency in physical medicine and rehabilitation, and then went on to do a sports medicine fellowship before I took a job with an orthopedic practice in Florida. And that was my first “real” job.

But I was never one of those people that was truly thrilled about the idea of practicing medicine. And I guess, I didn't know how common or uncommon that was so I just kind of went along with it. As you know in medicine everything's kind of laid out for you, so I just followed the steps. I chose sports medicine because I really gravitated towards musculoskeletal medicine in residency and I really didn't care for a lot of the other stuff.

So, I thought I was on the right path. But as you were saying, about six months into it, I was thinking, “Gosh, I can't, I can't do this long-term. This is just not going to work out”. As you mentioned, I would have a lot of anxiety on procedure days and I was always questioning like, what if I missed something? Or what if something bad happened? I was never involved in a lawsuit. It wasn't anything like that. It was more of just the possibility of that stuff happening. It just didn't feel right to me. I wasn't feeling a whole lot of joy in what I was doing day to day. In other words, I really enjoyed the medicine of it. I just didn't enjoy the practice of it all. If that makes sense.

HF: Yes. It's common when you're a new attending to having anxiety, to even do catastrophe thinking. One of the questions people might be wondering is, “Well, could she have just stayed and worked through that? Or are you just running away from the fear?” How did that go for you?

MA: That's a good question. And I did wrestle with that. Sometimes to this day, I think what if I would've stayed longer, but ultimately, I think I would have arrived at the same decision because looking at the big picture of things, there were other clues that things could continue to be challenging. I kind of saw the direction medicine was going in. You're forced to explain the anatomy, the pathophysiology, the X-rays. You have to explain so much to a patient and then get into why do they need physical therapy, why they don't need surgery, why they don't need the MRI. All of these things, you have to do it all in 15 minutes and really explain all of that stuff to the patient, to get them sort of on the same side, to come up with a treatment plan together. And I just found that was going to be really challenging, trying to cram all these patients into one day and 15-minute time slot. On top of that, you've got all the insurance stuff, reimbursement the RVUs, just all of it. I was like, “Ugh, I don't think I can do it”.

HF: Yeah. And in this process that we went through, it was interesting because even in the very first session, I have highlighted that you had an interest in writing and editing. However, it wasn't just automatic “Oh yeah. Let's do that”. You explored different options, including another clinical job.

MA: That's right, that's right. I was entertaining the possibility of another clinical opportunity. I'm so grateful for my time working with you because I think had it not been for that I wouldn't have gravitated towards writing. Even though looking back on it, I had enjoyed writing projects in undergrad and there was a different project in residency that was involved in that I really liked. And when I was in fellowship, I wrote a book chapter that consumed a lot of my time. I really enjoyed all of those things but I never thought of it as a career possibility. So, I'm so glad we got into that.

HF: Right. It's an interesting thing when you go back and try to piece everything together as "Who is the person who's going to go and pursue that passion, and then who is the one who's going to go and try to make it work?" For physicians, they may actually find that it is a good fit to take care of patients and that's what they're meant to do. So, there's a lot of pieces of information that come in to help inform how you go forward. As we go through these five steps, I want you to continue to share your story of how you made this transition, but let's start with step number one.

MA: If you're interested in medical writing, **step one is to decide if medical writing is right for you.** In other words, you've got to start by doing some research, which I feel is probably true. I mean, you're the expert, but I feel that's probably true for most nonclinical physicians. You got to do the research to see if it sits right with you. And so, in this regard, you can find a lot of information online. You can speak with other medical writers who have clinical backgrounds, reach out to folks on LinkedIn, but basically find out what it's all about and to see if that resonates with you.

In my book, I go into a lot of detail about the skills that you need, because it's not just a love for writing, right? You've got to have attention to detail. You've got to be okay with not having the final say on a lot of things because you're answering to other editors, publishers, whatever it is. So, there are a lot of ins and outs that you really want to familiarize yourself with before you decide if it's right for you.

And then once you get to know about the medical writing landscape, and you understand more about the different types of medical writing, then you can sort of hone your focus on what type of medical writing. And when I say types, I mean things like do you want to write for patients or do you want to write for a clinical audience? Do you want it to be more in scientific or more of

like a storytelling kind of work? And then that will help drive your decision on which way to go next for step number two.

HF: Do you remember if there was a point when you actually felt like, “Yes, I'm all in. I'm going in this direction. I don't know if it's going to work out, but this is for me”?

MA: It was probably around the time that I enrolled in the writing course. So, I made the decision to go forward with medical writing and I gave my notice. And at that point I was seeing fewer and fewer patients in the clinic. And that allowed me to have more time to focus on writing, but I believe it was right around the time I decided to enroll in that particular course, because luckily, you're the one that told me about the course. Thankfully you did. It was geared towards people with advanced degrees who were interested in medical writing. So, in other words, doctors, dentists, Pharm D.s, PhDs. This course was geared towards those folks with advanced degrees who wanted to get into that field. I think that may have been my light bulb moment. Like “My goodness, it's not just me. There's not something wrong with me. Other people want to do this too, so I'm going to do it and I'm going to make the best of it”.

HF: And you had guts too, because you gave your notice pretty early on. We only worked together formerly for about six months and early on in that you gave your notice, like you said, you were taking that course. So, I like how you put that faith in yourself. No guts, no glory.

MA: Right, exactly. No guts, no glory. I'm a little surprised to be honest because I tend to be a worrier. I'm one of those anxious people. So, I'm a little surprised that I just went for it, but it is what it is and it worked out.

HF: Yeah, it did. It did. And I just like to point out here that Mandy is stood out as a type six on the Enneagram, We've talked about that type six which is called the loyal skeptic. Very common for physicians, they make great doctors. However, they can be skeptical and they are fairly risk-averse though. This was something I think in your soul that was talking to you.

MA: Yeah, I knew. I mean, something in me was telling me that, “Look, if you stay in this position, you're just going to continue to be miserable. So, you have to make a change now”.



HF: Great. So, number one was the deciding medical writing is for you. Take us to number two.

MA: Sure. **So, number two.** Once you understand a little bit more about the medical writing landscape, in other words the different types of medical writing, whether it's regulatory writing, CME writing, writing for patient audiences. Once you have identified which way you want to go, **then you can figure out whether or not you need to improve your writing skills.** And unless you've got an undergrad degree in English or something like that, you're probably going to want to beef up your skills in some regard. It doesn't mean you have to go back and get a whole new degree, but you should try to practice your writing and do it in a way where you are receiving instruction, but you're also receiving feedback. So, I really feel that getting real-time feedback on your writing is going to help you improve your writing skills quite a bit.

HF: I liked how you mentioned in the book about writing for patients. And you said, if you think writing for what you mentioned a sixth-grade reading level is easy, just try it. It's not as easy as it sounds.

MA: It's really not. And it's funny because when I was in practice, I started a blog and it was more for my own entertainment than anything, but it was supposed to be somewhat educational in nature. I would write about it. I'd be watching football on Sundays and start writing about concussions or some things like that. And a couple of my patients found it and they were like, "Oh, this is really helpful". But I recently came across some of that old content and I thought I was doing such a good job writing for a patient audience. Oh my gosh, no, it's so high level, no way that would fly now. But that just goes to show the more you write, the better you get.

HF: Exactly, exactly. **So, building your skills and getting feedback was the number two.** What's number three?

MA: **Number three is to start working on a portfolio of your work.** So, any time you are looking for work in medical writing, whether it's on a freelance basis or even an employed position, you're going to need to demonstrate to whoever's hiring you, that you do have good writing skills. So that's where a portfolio comes in handy.



In the course I took, there was some instruction about how to collect these pieces and how to build a website to showcase those pieces. Depending on where you are and what your goals are, you might not necessarily need a website, but I will say there are some really cheap and easy options these days to do that. And again, it's a great way to showcase your writing samples. If you're not quite there and you're not ready to build a website, that's okay. But you do start collecting your writing samples so you have them easily accessible for when you are applying for either gigs or a full-time position, whatever it is.

I just want to emphasize how important this is because these days it's not enough just to have the knowledge in a particular therapeutic area. You need to be able to demonstrate that you can write well.

As a hiring manager I've worked in a couple of situations where I was responsible for building out a team of medical writers and I've sifted through a ton of applications. I will say that I would be very unlikely as a hiring manager to hire someone without seeing any samples of their work. So even if it's something you haven't been paid for, if you want to sit down and you just start writing short pieces on your own, that's better than having nothing at all.

HF: And you make a good point too. In the book you said, "Don't expect to get work based on a certificate".

MA: That's right.

HF: We love certificates. We love taking the courses. And I think what can happen with physician's interest in medical writing as they go on, they pay money, they take this course. And then after the course, when they actually have to sit there and do some writing to potentially make a portfolio or get paid, they discover they don't really like writing as much as they thought they would.

MA: Yeah, that can happen, that can happen. I'm glad you made that point because that supports number two, build your skills. And that's another reason to take a course. If you get halfway through it and you're like, "Oh, I don't want to do this" then now you know. Check it off the list and see what else there is.



HF: Exactly, exactly. There's another thing I like, and you talk so much about just, start writing, to start writing. If someone were to even before they took a course, say, "I'm going to write five articles on something that interests me". If they get through those five articles, then that's some good proof that they might really want to be a writer before they even paid money for a course.

MA: Exactly. Yeah, it is. Again, you can do it on your own just to see if you like it. A lot of folks will write blog posts that they share on Medium or their LinkedIn feed or KevinMD. And those are great. Those are usually physician facing. But if you think you want to write for patients, just sit down and start writing stuff, right?

HF: Yeah, write for your patients. Write some educational handouts for them and see how you like it. And then you have some handouts, that's the worst, you're not wasting your time.

MA: Right, right. You still get use out of them.

HF: All right. So that was number three, create a portfolio. What's number four?

MA: **Number four is networking.** And it's not just networking, it also parlays into how you find the work. When I'm consulting with physicians or the clinicians that want to get into medical writing, that's often one of the biggest questions is "Okay, I'm ready. I'm ready to write. How do I find the work?" And networking plays a big part, and I'll talk about that. I'll try to boil it down as quickly as I can.

Networking is helpful in several aspects. Number one, you want to get on LinkedIn. And I know in the clinical world, most people don't have a great use for LinkedIn and that's fine. But Heather, I'm sure you tell people this all the time, outside of the clinical world, LinkedIn is going to be pretty important, not just in medical writing, right?

HF: Yes, yes, yes. And I'm working on my LinkedIn course right now for you guys though.

MA: Excellent.





HF: It'll be ready before hopefully the late spring.

MA: When I had just gotten started, I had left practice, I had taken the course. I started my freelance medical writing business. I started connecting with people on LinkedIn and I made a couple of connections with other medical writers that were busy enough that they wanted to subcontract some of their work. In other words, they had a lot of work coming in, maybe couldn't meet their timelines. And so, they hired me to do part of that work for them. And again, I found those folks on LinkedIn. That was really helpful.

Also, another resource is the American Medical Writers Association. I highly recommend joining AMWA for anyone who's interested in becoming a medical writer. Not only do they have tons of information on their website and a ton of resources, it's a great way to network and get to know your medical writing colleagues. So that's another way.

An additional perk of AMWA is that they have what's called a freelance directory. So, if you're interested in getting freelance work, you can pay an additional fee to list yourself in their freelance directory. And then clients can essentially search that directory for writers that they need. They can search by their background. So, they can search for editor writers, they can search for physician writers, what have you. They can search by therapeutic area. They can by type of medical writing. So that's a great resource as well.

But in terms of networking, I recommend getting on both LinkedIn and AMWA to try to reach out and talk to other folks. I found it helpful personally when I was getting started. So that's why I recommend it.

HF: Those are really, really great suggestions. AMWA is a really wonderful organization. And I went to their annual conference. This was pre-COVID when it was in San Antonio here. And it was really fun and you do get to meet a lot of writers. The majority were women, but there were some guys there. And a lot of them wore very practical shoes. Writers seem very down to earth, to me, practical people and very interested in helping mentor other writers. Do you have any tips, Mandy, for so many physicians when they hear “network, put yourself out there”, their shoulders droop and they feel really hesitant?



MA: Yeah. I can understand that. You and I have talked about this several times. When you're on a clinical path, everything's sort of laid out for you. You are going to med school, then you do your residency and then you do your fellowship and then you find your job and then it's kind of step-by-step, it's laid out for you. So, it does put people a little bit outside of their comfort zone, but I will tell you, correct me if you disagree with me here Heather, but I would say anything you do outside of the clinical arena will require you to put yourself out there.

HF: Yes. Again, and again, not just once but many, many times.

MA: Exactly. Because at the end of the day, nobody wants this as badly as you do. There are people out there that are very helpful and we'll put you in touch with other people, but at the end of the day, it lands on you to make those connections and make this transition happen.

HF: Yeah. You have to want it. You really do. It's not easy.

MA: Every once in a while, you talk to somebody who was in the right place at the right time or an opportunity kind of landed in their lap, but for the majority of us, we have to work for it.

HF: Yeah. And that's part of the reward. There's something really satisfying about putting yourself out there, challenging yourself, doing things that are scary and having them work out. To me, that's more fulfilling than the money, than status, than any certificate. That really is soul-fulfilling.

MA: Indeed.

HF: All right. So, number four, that was networking. Tell us about number five.

MA: **Number five is finally landing your first job or your first gig. Insert an applause here.** What's great about it in medical writing is that there are so many different avenues you can take it. And I like to break things out into freelance and employed. As a freelance writer, once you get your first gig on your own, it's pretty exciting. Going back to what you were saying, you feel like you've really accomplished something because you won that first gig on your own. And then the key there is to keep your clients, right? That's the best piece of advice that anybody could ever



give a freelance writer. You make your clients happy and then the work will keep coming to you. I will pretend like it's that easy, but that is probably one of the most important aspects of having a successful freelance business. It's just keeping the clients happy. Because not only will they come back to you with more work, they'll also tell their friends, if you will.

When I had just started out with my freelance business, my husband and I had moved to San Francisco because he took a job with a startup company. So, we packed up and moved across the country, but it was great living in San Francisco because that allowed me to cover a lot of medical conferences being in a big desirable city like that. So, when I covered, I think it was an endocrinology conference. And then after that, probably a couple of weeks later, I got an email from an editor from that job saying that that editor had given my name and contact information to one of his colleagues at another publication who wanted somebody to cover another conference in San Francisco. So, because I had done a good job for them and they knew that I was in San Francisco, they had passed my name along, which was just another example of doing a good job for a client and more work will come.

HF: That is the best way to get repeat businesses - Happy satisfying clients.

MA: Yeah, definitely. And I will say too though, when we were in San Francisco, long story short, but I didn't know a lot of people there and I felt very socially isolated. My husband was at work. We were in a new city. I didn't know anybody. The cost of living was dramatically increased. And so, at that point, I decided to take an employed position as a medical writer with a medical communications agency. And in the book, I get into sort of the details of that, what does it mean to work for an agency. But basically, I do just want to point out here that when I applied for this job, I found it on LinkedIn. I'm pretty sure the job description specified as a requirement, one to three years of industry experience. We all see these things and we go, "Oh gosh, how are we going to get the job if we don't have the experience?" But I will tell you, I was able to submit a couple of writing samples from the previous months of freelancing and it did well enough on the initial interviews. They hired me. So, all that to say, don't let this whole experience requirement be a roadblock for you, if you really want something.

HF: Exactly. That's my mantra too. They're looking for someone who can do the job. If you can prove to them or give them enough confidence you can do the job, it doesn't have to be a roadblock.

MA: Exactly.

HF: All right. So that was number five, land your first job. And in the book, you talk more about the difference between freelance and employee positions and that can be researched further because you did both. And I think they both have merit and challenges too. I did want to share something from your book as we're getting close to the end here. Is that okay if I read something?

MA: Yes, please.

HF: Okay. "I fell in love with non-fiction writing in undergrad and even had an instructor encourage me to follow that path. But after my father told me, I wouldn't make any money doing it, that was that. It's weird that I gave up so easily, particularly because I can be quite stubborn. But of course, hindsight is 20-20. I regret not being more thoughtful about pursuing a career in a field that made me truly happy. But in my house that was not encouraged. 'It's called work for a reason', I was told. You find a respectable job, make some money and have a family. Eventually you can retire and do something enjoyable".

So, I read that Mandy, because I'd love to hear from your perspective, any words of advice for those out there who are thinking of dismissing their passion because it's too hard or they feel like it's just a dream.

MA: I would say, if you feel strongly enough about something that you call it your passion, or if you find yourself gravitating towards it and it doesn't feel like work, then do it. Just go for it. I just feel like life is too short to have any regrets and wish that you would've pursued something that made you happy. Because at the end of the day, just because you can do something doesn't mean you should. I mean, obviously I demonstrated that I could go to medical school and I could be a practicing clinician. That doesn't mean I should. I was miserable. So, I don't know. I think that we would all do ourselves a service and those around us probably too, if we really truly enjoyed what we're doing in life.



- HF: Yeah. And we see how that energy is almost like sitting on a volcano underneath. When you can tap into it, it is like a volcano. It will carry you very far. And at the very worst case, if you give yourself a chance to explore it, then you can at least say “I tried” and it won't be a question in your mind anymore.
- MA: Right. No regrets.
- HF: So, this has been so much fun and I wish we could go on even longer, but I would love to have you tell the listeners how they can get in touch with you and where they can find this great new book you have out.
- MA: Sure. So, you can contact me through my website, which is [armitagemedicalwriting.com](http://armitagemedicalwriting.com). And, like I said, there's a contact link on the website that comes directly to my email. You can also find me on LinkedIn. As for the book, you can find all of the purchase options on my website. So, you can purchase from Amazon. And there are a few digital options through Barnes & Noble, Kobo and Amazon as well, and in Apple books too. But rather than tracking those down, you can just find all those links on my website.
- HF: Fantastic. And if you'd like some additional information about medical writing, you can go to [www.doctorscrossing.com/medicalwriting](http://www.doctorscrossing.com/medicalwriting) and there is a freebie you can download. But definitely if you have a strong interest, I highly recommend her book. It's under a hundred pages. And her story is really well told in there. Plus, there's a lot of great information. So, Mandy, this has been so much fun. I'm so glad that we can pick up after that initial conversation and celebrate where you are today, because it's a fantastic story of triumph.
- MA: Well, thank you so much for having me. And again, thank you so much for your help. I'm so glad we've stayed in touch throughout all of these years. And I still say I wouldn't be where I am today without you. So, thank you.
- HF: Well, it was completely my pleasure. I feel like I can only take a little bit of credit because you really took off with those jet engines. I'm really proud of you, and I'll look forward to celebrating your book and recommending it and watching what you do in the coming years.



MA: Thank you so much, Heather.

HF: Okay. Take care. Bye for now.

MA: Bye-bye.

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