



## **EPISODE 141 Leaving Medicine - Should I Stay Or Should I Go? Revisited**

**Dr. Heather Fork**

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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.

HF: Hello and welcome back to the Doctor's Crossing Carpe Diem podcast. You're listening to episode number 141. I'm doing things a little bit differently today, and we are going to revisit the very first episode that I did when the podcast launched back in October of 2020. This first episode was titled "Leaving Medicine: Should I stay or should I go?"

In this shorter episode, I gave three different steps that you can take to help evaluate whether you should stay in medicine or if it's time to find something different. Now, obviously a big decision like this isn't going to be made with just three steps, but if you go through these and take some time and think about your situation, I think it will begin to give you some clarity and answers so you can move forward. I did want to add one additional step before we launch into that podcast, and this is something you can do right now.

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I want you to quantify your current career satisfaction on a scale of zero to 10, with 10 being “I'm happy and I'm fulfilled, things are great”, and zero being “Calgon, take me away.” You're really not happy. We want at least a seven for sustainability. When you start dipping down into the lower numbers five and six, you can do that for a while, but it's really going to start taking a toll on you. If you're at a two or a three, if we were talking about marriage, I would be really concerned about divorce here, unless there was some acute episode, there were things were going to get better. But if you're at a two or three out of a 10, and this is chronic, this definitely needs attention right now because that's not sustainable and it's not healthy at all.

All right, before we get into the podcast, I want to tell you that there is a freebie that you can download that goes with this episode and it's a timeline where you can chart your journey from when you first made that decision to go into medicine and then how things were for you in medical school, residency when you started practice as an attending and your current situation.

I have an example from my own timeline that I did and then a template where you can create your own because it's really helpful to see your journey out in front of you and part of this timeline helps you rate your satisfaction as you're going through the process. So, you can download this timeline at [doctorscrossing.com/timeline](http://doctorscrossing.com/timeline). All right, now without further ado, let's go on to podcast number one, “Leaving Medicine: Should I stay or should I go?”

Hello, hello, I am so excited to have you here for the very first episode of the podcast! Today, we're going to be looking at the million-dollar question that so many of you have right now. Should I stay in medicine or should I leave?

To start answering this question, we're going to look at three things that you can start doing to give you some clarity. The first one is we're going to revisit the story of how you became a doctor. Number two, you're going to ask yourself a key question and number three, you're going to give yourself a permission slip.

How's this going to help? So, obviously, this is a big decision and there are lots of implications and there's not one right answer but there is a right answer for you. And what I've seen from the physicians that I work with, is the best decisions are made when you come from a place of trust and confidence in yourself versus a place of fear and doubt. And this is the principle that I'll be talking about a lot in the podcast because it's so fundamental to so much of what we do.

So, just real briefly, when we're coming from a place of fear, like fear-based thinking, we're more about what are the problems rather than the possibilities? What could go wrong. We have more self-doubt, and we go into negative thinking. We're also looking more externally like, what's expected of me? What should I do? What will other people think? However, when you come from a place of trust in yourself, that trust-based perspective, it's more about what are the possibilities rather than the problems.

What are the things that I believe in myself that are going to help me? You reference all the things you've done in the past to show, yeah you figured out a lot of stuff that you didn't know you could do, and when you're in a trust-based perspective you're going to go in the right direction. It's all about alignment. Let's put that up there as our framework as we look at these three things today.

I want to know also what brings you to the crossroads. Because there are many different reasons why you are here as a physician. Let's just look at some of the common ones that I hear about. Burnout, stress. Healthcare has become a very difficult place. You're a provider. You're an RVU generator. Your nose is in the computer all the time. It just doesn't feel like doctoring. The impact that you wanted to have on patients has just become giving out prescriptions often and feeling like you're not making a difference.

Maybe you've had an illness or an injury that's preventing you from practicing in your specialty. Perhaps you didn't get into your residency. You had a license issue. You were let go. I mean, there are so many things that can happen but it's also not all negative.

I speak with physicians who have had a good career, are happy with patient care, but they may be bored or looking for the next opportunity, another way to use their skills. It



also could be that things are okay, but you've lost that passion. You feel like you're stagnating, your brain's turning to mush. You're not learning new things and it's important for you because you worked so hard to get here that you don't just accept that work is work and nobody likes it and so I should just soldier on.

Alright, let's get started. I want to go back in time with you and hear your story about when you first decided to become a doctor. When was that? Were you five or six and somehow you just knew this is what you wanted to do? And so, everything you did from that point on was to get into medical school and maybe now it's feeling like this isn't what I thought it would be. Or maybe something's getting in the way. Or did you come from a medical family where everyone else was a doctor and that was sort of what was expected of you? Or did you come from one of those families, and I'm not going to mention any names, where you were going to a doctor, a lawyer, or an engineer. Pick one.

Maybe you were artistic, creative, musical. You wanted to be a writer, or a pilot and you were told, 'That's not practical, don't do that. You can do that in your spare time. Go to medical school'. Or maybe nobody told you what you should do but you knew you were good at science, you liked studying, learning and so medical school seemed like the practical thing. It may not have been your passion choice, but it made a lot of sense. Think about that for you. What was your reason? How old were you and how did you make that decision?

The next thing we want to look at in your story is, what was medical school like? Because these things give us clues about who you are, what engages you, what are your natural talents? Because they're going to help inform us when we think about you at the crossroads, who you really are. Now there are some of you who really rocked those first two years. You liked the learning, the book learning, and then there were others of you who couldn't wait to get into the clinical years. Which one? Was one of those you?

Because what can happen sometimes is you're really good at sciences, you study, you do really well, you get into the clinical rotations and you're like, I'm just not loving this patient care for whatever reason. You may be really introverted, or you don't like having

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that responsibility for whatever reason. And then maybe, on the other hand, the book learning wasn't as interesting but once you got on the wards it was like, yeah you were in your element. Or maybe you were doing surgery and your attendee says, *Gosh you have gifted hands, you're really good.* So, it started you thinking about that direction.

Another thing to think about is what were you doing in medical school that you didn't have to do? Maybe you may have been tutoring others and had a real gift for teaching or you started a homeless clinic. Maybe you did some rotations abroad and are really interested in international health. These things will give you clues about your authentic nature. Then I want you to do the same thing for residency. How did you pick your specialty? Was it the burning thing that you wanted to do or was it more a process of elimination? Were you one of the residents who was really engaged and loving, really loving to learn your craft? Or were you maybe feeling that your peers had this enthusiasm that you just didn't have? And maybe you were having doubts and maybe you've had doubts since medical school.

Pay attention to these things, don't judge them but just take them as information. Then the next thing is that pivot from residency or fellowship into being an attending. Because that's the important transition and it can be where you really *kind of get into your groove and like that ownership of being a physician, the doctor.* Or it could be, gosh I loved residency where there was always someone to ask a question or it was the attendee's responsibility if the patient had a complication. And then when the buck stops with you, that creates anxiety and that's hard. You might be in the OR operating on someone's one good eye and you're shaking, and I would be shaking too! So, these are all normal things that can happen and what we want to tease out is, are these fixable situations or is there something more fundamental that's just not working for you, alright?

Then you can look at what's going on in practice. I'm not going to dive too deeply into that but that can be a part of your timeline too, is how much you're enjoying the practice that you're in and what different settings have worked better for you. Now, the timeline I talked about that you can chart this, you can download it at



[doctorscrossing.com/timeline](https://doctorscrossing.com/timeline), and you'll be able to chart these different events over time over your satisfaction and engagement levels. There's something really helpful about seeing it all out on paper in front of you because you might see some patterns.

Now, just briefly I'll tell you a little bit about my story. So my path was I thought I wanted to be a vet ever since I was a kid and then I worked for one and I was just like, No, I love animals but I don't want to do things to them. Then I was like, what do I do? Then I was like, I'm going to be Jane Goodall. Yes, that'll work better! Africa, animals, and then I did some animal behavior research and I was like, no I don't want to be trying to get grant money all the time and this is not quite what I thought it would be.

It wasn't until my third year of medical school when I'd run out of options, and I won't tell you about all the other things I tried, and I just said, alright, I'm going to try pre-med. And I actually liked chemistry and it seemed doable so that's actually how I got into the medical direction. And the second year (of medical school) I fell in love with dermatology, just even the histology of it, and in residency, I loved learning derm and it was really fun to be with other residents and that's how I got into dermatology.

Alright, the next thing that we want to look at, step number two, is you're going to ask yourself a question. Given where you're at right now, what would need to change for you to be happy? That's what needs to change for you to be happy? And an exercise that I have my clients do to see this visually is I have them do a little cartoon drawing. Just a figure, you don't have to be artistic or anything. So you take a piece of paper – you can do it now if you want – divide it in half and on the left side you're going to draw a stick figure that represents you, like on your bad day, your bad week, when you're like, Calgon take me away!

Then on the right side you'll draw a stick figure of when you're having a good week or a good day or just feeling happy. What I often see on the left side is a stick figure that's having a really bad hair day or they're maybe drooped over or just panicky. There may be lots of people around them wanting this, wanting that. They're being interrupted, there are too many patients to see. Patients are waiting, patients are having a lot of expectations and they're just overwhelmed.

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Then on the right side, they may draw themselves in surgery where they're listening to the music they love, and their team is working really well and they're in their happy place. Or they might be in a room with a patient and just actually having enough time to talk to them and really help them and that feels good. Other pictures I've seen on the right side, the good stuff, it might not even be in medicine, it might be you with your kids. Maybe you're doing art, maybe you're being an entrepreneur doing something you always wanted to do. So if you want to draw those two pictures, side A and side B, that can give you a way to tap into your subconscious about what's not working for you and what's working for you, what you need to be happy.

In a more concrete way you can just look at, if I were just working less, maybe this would be fine and some of you have discovered that during the pandemic like, okay, all of a sudden I don't have to see as many patients. If you're not in an ICU or critical care, emergency room, and you were doing telemedicine at home and you're like, oh actually this is much better when I'm not overloaded with patients. It could be changing your schedule, might be changing your work environment, you're in a toxic environment. Getting to do something new or different. Having a voice.

It can also be how you're showing up for your work such as, are you having the boundaries you need to have with your patients? Are they running the show more, making you run over? Are you feeling like you have to say yes to being on committees and taking that extra project? Just being a yes person. So, there's a lot of things you can look at here. I know for me when I realized about halfway through when I was practicing dermatology that I wasn't happy. I made a commitment and I said I'm going to do everything I can to be happier in my practice and if I'm not, after I give it the college try, I'm going to leave.

And so, it was kind of like one of those major overhauls, both in my personal life and my professional life that could have been on a reality makeover show. I made a lot of changes and it was very helpful because one of the reasons why you want to do this is you want things to be as good as they can be if you do decide to leave. Because then you don't leave with regret. And the only caveat I would say here, is this. If you're in a

toxic situation and it's just not right to fix it up, then get out of there and figure out what to do next if you really can't change it.

Now that brings us to the third step which is to give yourself a permission slip. This permission slip could be as simple as permission to just be honest about what you feel and not judge it. Because I know a lot of you out there and you'll say to me, 'Oh I haven't said this to anyone and I feel kind of guilty but I don't really like seeing patients,' you know? And you're not a bad person, there's nothing wrong with you. It could be a whole number of things, but you can start fixing the problem and addressing it if you'll just be honest about it. So that's a permission slip to just not judge yourself.

Another permission slip you could give would be to give yourself the chance to explore options without getting all your knickers in a twist about, what if this, what if that happens, what if I don't make enough money? What if I'm not good at it, what if I don't have transferable skills? Because that's what I see happening is where you start to think about some options and you get a little hopeful but then your brain, that lizard brain, the tail whacks you upside the head and says, Oh no you don't because ... and it creates this scary fantasy where you do something different, you lose your job, you have no money, you are in some shack eating bread crusts and I'm not just making this up. People tell me this. So, I want, you could say, I am going to give myself permission not to indulge in scary fantasies and again to go back to that trust-based thinking we were talking about.

The permission slip that I gave myself, and I wasn't really aware I was doing these things when I did them, I was just kind of going back and seeing the steps that I took, was I said, if you do all these things to try to be happy and you really give it a good try, and you're not happy, you can do something different. That was very, very helpful for me and I want you to be able to have whatever permission you need to look at this question when you're at the crossroads. Because it can really be daunting when you find yourself here. But by definition, you're not at a dead end, and you're not stuck in a cul-de-sac. There are possibilities in different directions and some beautiful landscapes out there.

You get to be the leader of this exploration.

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Give yourself the chance to go on an adventure and discover what is calling you.

Alright, rock on and I'll see you in the next episode.

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