# EPISODE 180 AI in Healthcare - How It's Being Used And Opportunities For Physicians Part 2

## With guest Dr. Ramin Rafie

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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 careers, 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.

        Hi there, and welcome back to the Doctor's Crossing Carpe Diem podcast. I'm your host, Heather Fork, and you're listening to episode number 180. Today, we're diving into part two of our two-part series on AI and healthcare, how it's being used, and opportunities for physicians.

My special guest for both of these episodes is primary care physician Dr. Ramin Rafie. Dr. Rafie developed an early interest in tech and AI, which led to him becoming certified in AI through the American Board of Artificial Intelligence in Medicine. In addition to his clinical work, Dr. Rafie has been leveraging his knowledge of AI in his role advising remote patient monitoring companies in this technology.

Ramin is passionate about keeping abreast of the developments in AI, networking with leaders in the field, and serving as a resource to other physicians interested in this area. As part of his mission to help other physicians who are interested in AI, Dr. Rafie created an AI resource document to accompany this podcast. The freebie will have detailed information from the podcast, including AI courses, leaders in the field, and steps you can take to start exploring this dynamic area.

There will be a link in the show notes where you can download this great resource or simply go to doctorscrossing.com website and hit the freebie tab at the top of the page. It is my true honor and pleasure to welcome Dr. Ramin Rafie back to the podcast. Hi, Ramin. How are you?

RR:     Hi, Heather. Thank you. Thank you very much. Very well. Thank you.

HF:     I'm so excited to continue our discussion in AI.

RR:     Yes. There's plenty to talk about. This is just the tip of the iceberg.

HF:     Yes. Now, one thing I just wanted to start with, which we touched upon last time, was how this search engine, this AI search engine called ChatGPT can really help physicians who have questions about their career or AI. It can also help with their career search.

RR:     Yes. People can use it to find positions out there. It ultimately browses the internet and summarizes the internet in a more in-depth way than perhaps Google does. But a lot of positions out there for physicians in AI are not advertised. And this is the beauty of being

a physician and getting this certification or additional degree knowledge in AI is you can be the master of your career, and you can chart your own course and create your own crossing at the doctor's crossing, as you say.

HF:     Right. And it's such a great resource, and it always blows my mind to see how fast it works. I mentioned on the other podcast about how you can put in your CV or your resume with a job description. It will give you suggestions. It will write a cover letter for you. Obviously, you need to make this your own.

You can also explore nonclinical options by typing in "I am a family medicine physician with this many years out of residency. I'm licensed in this state. What are my opportunities in a nonclinical arena?" And then you can even get more specific. You can say, "What are the jobs in pharma? What might be job titles I could look for as a medical writer? Or what could be my opportunities in public health?" So it's an incredible search engine to find out a lot of information that you'd have to do a lot of digging to find if you're just searching on Google.

RR:     Right. It is a very powerful tool that has a tremendous potential for making life easier if it's done correctly.

HF:     And we're going to be talking about different ways physicians can actually work in AI. So there's using AI to help you in your career and your career transition if you're changing at all, but we can also have a career in AI. So I'd love it if you could start us off with talking about some of the ways physicians are working in AI.

RR:     There's a lot of physicians working in the space. It's a growing area, but there's two examples I wanted to highlight because they show very different areas of where physicians can have a tremendous impact. One of them, his name is Qasim Butt. He's a practicing nephrologist in Texas. And besides being a practicing nephrologist, he actually has a YouTube channel. On his YouTube channel, he explains very simple, basic nephrology concepts that medical students, residents, and attendings can learn from.

But because he has such a large following on social media, this AI company called DeLorean AI actually reached out to him. And DeLorean AI is starting by working in the kidney space. And they reached out to Qasim to help partner with them in AI kidney care.

He still works as a nephrologist. He still has his YouTube channel. And he works as an advisor for DeLorean as one of his sidekicks. So that's a very good example of somebody leveraging not only their clinical knowledge, but their social media presence. And because of their social media presence, they attracted an AI company, and they created a win-win situation for them both.

Another physician I wanted to highlight is a physician by the name of Steven Charlap. He's an MD, MBA and he started a company called SOAP Health. His mission for starting SOAP Health started, in part, because his brother, who was a cardiologist, ended up passing away because of a misdiagnosis. And there's a tremendous amount of mistakes out there because of misdiagnoses for reasons we won't get into here. But medicine is complicated, and the technology sometimes makes it more cumbersome than it needs to be.

But what SOAP Health does is he has basically developed an AI assistant. And he is embedding this AI assistant into EMRs, like AthenaHealth he's partnering with and he is finding other EMRs to embed this AI assistant. And his AI assistant is kind of different than other AI assistants. His AI assistant is actually designed to help ask questions of the patient before they see the doctor. The EMR helps create a template of what the doctor is going to get into before the doctor steps into the room. So the doctor can spend their limited time being more focused on hitting the areas of need.

The AI assistant will also consider pointing out diagnoses that the physician may not consider. The reality is, in three years of your residency or whatever, how many years,

you may not come across all the zebras out there. You may never see a case of metachromatic leukodystrophy or one of these rare metabolic inborn errors of metabolism.

The AI assistant's job is to point out, did you consider this diagnosis or that diagnosis. But ultimately, it's up to the doctor to make the final decision. The AI assistant will not be able to practice medicine. I don't see that happening because ultimately, a human needs to be held accountable.

HF: Right. And it's so helpful to have that kind of accessory brain to help remind you of things that you may not be thinking of. And you're absolutely correct that these zebras and these things that we might only have learned in our training, but never even seen clinically, could walk in our door. And if we have AI to jar our memory of these things, it could make the difference between this patient going to other physicians and delaying diagnosis, which could have severe consequences.

This tool is incredibly powerful. I don't think we need to be afraid of it, but embrace how it can help. But also know that we're always going to be instrumental in this relationship with a human being.

RR: Yes, absolutely. I think the key is to learn how the technology works and to leverage to your benefit.

HF: Thank you for sharing those examples. I have a few that I wanted to share from clients of mine. And one we just featured on the podcast recently, two weeks ago, 178 with Dr. Danielle Torres. And interestingly, when she was in medical school, she responded to a mass email asking if there were any students who wanted to work for an AI company doing annotation. And she responded to this email. And so she started doing annotation from the radiology report. And she said it wasn't a high-level job, but it was fun to do and it got her interested in AI.

Long story short, she decided for a number of different reasons that instead of going on with residency, she wanted to start working in the AI field and help more at a population level, not one-to-one helping patients, but helping them in a broader way. She ended up getting a job with this AI company and she started out doing more of the annotation type work and in the database, but it has evolved to where she's helping with the product development, product strategy, helping to promote products that are currently on the market, and then think about new products that the company can develop.

RR:     Very interesting. It's amazing how because of this new technology people can end up having a whole new career that they never thought of possible. And it goes to show what's available out there.

HF:     I know. And here is a medical student who started working in AI. Another example I have is a physician who decided not to finish residency, and she did a couple of different nonclinical jobs. And then she was hired at an AI company, and she's helping them with their current model, which helps clinicians with better decision-making. So, it's interesting. They have a group of physicians who help out with this, and she's also helping in her role. And they're looking at what AI is coming up with, with these clinical cases, and then where they're not making the best diagnosis, where AI can be improved. And so, they're revisiting the algorithms to improve the accuracy of AI. So, here's an example of a physician who didn't finish residency, who also is playing a very key role in AI and loving her job.

RR:     It's very nice. It's good to hear that. And I think there's more and more people like that, and they sometimes feel like they have very limited options. But that's part of the reason I wanted to do this podcast. Myself, I'm not board-certified. I'm licensed. And one of the things you learn about healthcare is, depending on who's paying you, Medicare does not require board certification. When I go to these nursing homes today, I'm able to do my job because Medicare is the payer of my work. Similarly, when I did the ACO, the ACO was sponsored by Medicare, and Medicare does not require board certification.

HF:     I know. That's such an important point, and I always like to stress to listeners on the podcast, don't feel limited by whatever your circumstances are, because there's always a path forward.

And the last example I wanted to share is a physician who has been in practice for over 10 years, and he's a radiologist. A company reached out to him just based on its LinkedIn platform and asked if he wanted to be an annotator for radiology. And so, what he does is he reads the scans that they give him, and they're comparing what AI gets to this expert in the field.

This is a job many of you in clinical practice can do. If you customize your LinkedIn to show that you're open to doing AI consulting work, you have a better chance of someone reaching out to you from one of these companies to use your expertise.

RR:     And that's actually a great point, Heather. That's how I got involved in the RPM space, is on my LinkedIn profile, I mentioned my work in the ACL, bringing the hospital at home model of care out, and that I was open to advising roles. And one of the two RPM companies I work for, Enlighten AI, the founder actually reached out to me, because he saw my work that I had done, and it aligned with what he wanted to do.

So, that's very important that people mention that on their LinkedIn profile, that they're open to consulting roles or roles in AI, because there are people that are constantly browsing LinkedIn, whether it's industry for finding advisors or things of that sort.

HF:     Right. And it's so interesting, because physicians will tell me when I ask them, "Do you have a LinkedIn profile?" they say, "Well, I'm a private person, I don't really want to put myself out there." But LinkedIn is not Facebook, people don't post about what their dog ate the night before, or what their kid is doing, it's professional. And you don't have to worry about bad things happening to you if you're on LinkedIn.

I'll just take a minute to mention this course that I have, because if you are concerned about how to present yourself on LinkedIn, I have this LinkedIn course for physicians, it has 22 videos which show you how to build your profile out, how to message other contacts, how to apply for jobs, and also how to optimize your profile if you do want certain companies to reach out to you and find you. Because if you're hiding under a privacy blanket, no one's going to find you.

RR: That's right. I think that's a very good point. I have a LinkedIn profile, and I have a Facebook profile, and they're designed for different reasons in different parts of my life. And LinkedIn is all about work, and Facebook is all about my personal life. And I keep the two very separate.

HF: That's right. You can have a Facebook too. And now I didn't mention where you can find this course. So if you're interested, you can go to doctorscrossing.com website, go to the top of the page, and hit the products tab, and you can learn more about the LinkedIn course for physicians. I'll also have a link to it in the show notes. Now, as we're talking a little bit about what physicians can do in AI, I'd love it if you could help us, Ramin, talk about steps physicians can take to move into this space.

RR: I think like a lot of things in life, no matter what industry you're in, the most important thing is networking. Getting to know people and talking to people, whether that's online or in your hospital or in your circle of friends, networking.

The next thing you want to do is maybe find your niche. If you have a certain area of expertise, like you're a hematology oncologist, or you're a neurologist, or you're a neuro-oncologist, whatever that be, you find your niche, and you can find there is an AI company in that niche. More than likely, and if there isn't one if you have the interest, you can actually help start one out. But there are more than likely already AI companies out there, and they're looking for physician advisors.

Another thing worth doing is taking the ABAIM course. I wanted to just clarify that the ABAIM is a nonprofit. They're not designed to make a lot of money. The course that I took was a two-day course. It was virtual. It's in real-time. It's not prerecorded. And every single time they do the course, they learn from their previous ones, and they make it better, like how AI works.

And all their faculty is volunteering. The course only costs $600, which is not a lot of money for what you get out of it. But I understand people maybe are hesitant to do that. There are a lot of free courses out there, and we're going to put a link to what I think are the top free courses on the show notes. Coursera offers a free course in AI and health care.

Likewise, I didn't get into medical school the first time I applied. And back in that day, when you didn't apply to medical school, you were recommended to do research and to do volunteer work. I think today, if people don't get into medical school, you can work in AI divisions. And every hospital is developing an AI division, and you can help do research in that department.

I think those are the most important ways people can go forward if they want to add AI to their careers. There's also an upcoming conference of AI Med in Orlando, Florida, this upcoming May. And I probably will be attending it. It's the first time they're actually going to offer, I believe, 36 CMEs for the three-day conference. So people who are working, if you have an employer and you have a CME allowance, you can use that to help pay for this conference and get your CMEs for the year. And it's a great networking opportunity.

What I've learned from attending the last AI Med conference is the conference is more so designed for industry. These are companies that are trying to sell their software or hardware to hospitals or health systems. But there are small players also at the conference, smaller AI companies that are looking for med tech advisors or physician advisors. So it's just an opportunity to meet a lot of different people.

HF:     I just wanted to mention that the courses that physicians can take, we'll have those in the resource document. That's a freebie. I don't think they'll be in the show notes. So just make sure to download that freebie on AI, which there will be a link for that in the show notes so you can read about the different courses and the other content that Dr. Rafie has prepared.

Now, let's say a physician wants to try to find some jobs or opportunities. How do they actually reach out to someone? This is a little stumbling block for doctors is, "How do I reach out to someone I don't know? What do I even say? If I haven't done anything in AI yet, will anybody be interested in me?"

RR:     Before there was AI, I would talk to a lot of physicians, and some of the physicians I would find locally and some of the physicians I would find online. And I've never met a physician who's not willing to talk to another physician. It's only because I talked to physicians that I learned a lot of how the healthcare system works. I don't have any physicians in my family. I learned about nursing homes and I learned about how board certification is not a requirement to work in these nursing homes.

Chances are if you know a physician, just reach out. If you find a physician that's doing something you're interested in doing, that's a good person to reach out to on LinkedIn. And you can put that in your request that you want to talk to them about their possible fractional role and how they got that. And most physicians I've met who are doing that are more than happy to give you 10 or 15 minutes of their time.

HF:     And you've been very generous with other people and helping them out. I would say that if you do reach out to someone and they may not respond, A, they may not see your message, they may be too busy, and they just may not be able to speak with you even if they want to. So don't take that as a rejection. Just take it as redirection to reach out to somebody else because they're not available and don't take that personally.

RR:     Yeah, I think it's very important. People have a lot of things going on outside of work as well.

HF:     I want to add too that Physician Facebook groups can be very helpful potentially for learning about AI jobs. I was in the physician nonclinical career hunters Facebook group a little while ago and I saw a post where an AI company was looking for an OB-GYN physician with a lot of clinical experience to help their AI project. So you never know where you're going to hear about these jobs and just being open and available looking, Facebook groups are a good opportunity, LinkedIn, as we've mentioned. You can optimize your LinkedIn profile to say that you're open to consulting for AI.

And as Ramin mentioned, reach out to other physicians who are already in AI so you'll have a conversation with them. Because let's say for example they work for a radiology AI company. If there's an opening or a need for a consultant, you'll be top of mind.

RR:     Right, I think that's all very well said.

HF:     Now, are there any other areas that we haven't covered? Anything you want to mention, Ramin, before we wrap up?

RR:     Well, I think burnout is not only a United States issue. Burnout in healthcare unfortunately is a global phenomenon. There are physicians all over the world who are protesting their working conditions and the burnout conditions. There's more than ever a pressing need for there to be a solution and I do think AI can help that. But it all has to be rolled out carefully.

They always say that AI needs guardrails. Well, the practicing physicians are going to be the guardrails of AI and it's going to be an ongoing continuing process. And there's a saying out there that one way to predict the future is to build it. A lot of these hospitals, don't really know how they're going to use AI yet. And if you're looking to perhaps get a leadership position in a hospital or in a health system, you can get the certification in AI

and you can bring it to your leadership and that puts you in a position of power than somebody else that doesn't have that knowledge. And you can help lead a project, you can help lead a department, you can help lead the path because all these hospitals are trying to figure it out.

Just a month ago, it's worth mentioning there was an organization called Coalition for Health AI, CHAI. It was just launched one month ago and it's an umbrella organization where they want physicians to join and they're trying to create a national consortium of physicians that are leveraging AI to the benefit of improving healthcare. And I currently have two employers. One is the nursing home I go to and one is the hospice.

I joined CHAI as a physician for my hospice because I asked my hospice if that would be okay if I was to represent them as a CHAI representative. And I submitted an application and I have yet to hear back. It's a very new organization, but there are definitely opportunities out there.

HF:     Well, we'll make sure to include CHAI in the resource document. That will be the freebie. And I just want to again, thank you so much, Ramin. You have such a big heart for helping physicians. I know it's a mission of yours and you're just such a genuine great guy. So, thank you so much for coming on the podcast and sharing your knowledge.

RR:     Thank you, Heather. I wanted to acknowledge you as well because I think your podcast is a great resource for physicians who are stuck, as you say, in the doctor's crossing. Sometimes people feel like they're stuck in their careers. And it's really good to know that your resource is out there. You provide an invaluable service to physicians out there.

HF:     Well, thank you so much. I really appreciate it. And before I go, my dear listeners, I just wanted to remind you this free resource created by Dr. Ramin Rafie is going to be available in the show notes. And you can also find it at the doctorscrossing.com website under the freebie tab.

If you're interested in the LinkedIn course or the resume kit that I mentioned in the earlier episode, you can find that at the doctorscrossing.com website under the products tab. And as always, don't forget to carpe that diem and I'll see you in the next episode. Bye for now.

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Podcast details

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