**EPISODE #190: Dr. Pooja’s Story: An Inspiring Journey Through Dark Times to Career Happiness.**

**With guest Dr. Pooja**

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DP: “We often tell ourselves we are not good enough, we don't have the right skills, we are too introverted. It doesn't have to be that way. Your skills are always valuable, your education and training are always valuable. And if it is not in a clinical career, there are several other options where you can use your training and education.”

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.

Hey 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 190. Today, we have a very special guest, Dr. Pooja, who faced tremendous challenges, including being let go from two residency programs, and experiencing a very dark period in her life. Despite these obstacles, she found her way forward to a career path where she is using her medical training in a way that she finds very fulfilling and affords her a great work-life balance. We're not using her real name in this episode to protect her privacy.

However, the details of her story are true and a testament to the power of perseverance and our ability to draw upon our inner strength, to face our life situation with courage and agency, even when it feels hopeless.

In addition to hearing Dr. Pooja's story, we will be teasing apart the steps she took to move forward when she was filled with uncertainty and doubt. Her story is especially valuable because it's too easy for us to tell ourselves why we won't be able to make the changes we want. We tell ourselves we don't have the transferable skills, we don't have the required experience, we'll fail at the new job, we're too old, too young, too introverted, too slow, too late, too this, too that.

In hearing how Dr. Pooja moved out of the darkness into finding a path forward, we'll gain insight and concrete steps for making changes when we're feeling challenged and need a roadmap to guide us. Without further ado, it is my distinct honor and pleasure to welcome Dr. Pooja to the podcast. Hi, Pooja. How are you doing?

DP: Hi, Heather. Thank you for having me. It's an honor to be your guest. I've been listening to your podcast for a while now and my only regret is not finding about your resources earlier when I was going through a tough transition to a nonclinical career.

HF: Well, I'm so honored for you to be here and I know your story is going to be incredibly helpful for the listeners. Where would you like to start your story?

DP: I can start when the world started crumbling around me and I was let go from my second residency program. My story has been very unusual and tough but it doesn't have to be that way for people that are in that situation now. And as you say in your podcast, “You don't have to get stuck in on the white coat crossroads”, and there are always options. It might be harder for an international medical graduate but there are still always options.

I think as physicians, our identities are so closely tied to our professional lives that it can feel very challenging when you're making that transition to a nonclinical career and you often question yourself if you wasted all that time on your medical education, on your training until that point but there are ways to salvage your education and training. There are ways forward. There are several options out there.

HF: Yes, and I love your positive spirit and we're going to mostly be spending this episode about how to go forward when you're feeling that you're really not qualified and you're having a lot of doubts, but to give a little summary of what happened to you in the residency programs, would you like to just give whatever details you're comfortable sharing so we can have a little bit of an understanding of that?

DP: Yes, absolutely. In retrospect, what I think happened in both the residency programs is I did not advocate for myself early enough and fiercely enough. I come from a culture where standing up to authority is not generally acceptable or not generally taught. And that might not be the case in the US. I found myself in a position where I had to not only advocate for myself but also keep my head above the water and perform professionally and make sure that my license and my credentials were not affected.

And that's something on a personal level I did not feel comfortable doing. I have developed that insight after a lot of work, after many years of introspecting into what happened and in hindsight it might be easy to point and say this is what I would have done differently but when you're in that situation it does feel like the world around you is coming to an end and everything is crumbling down, everything you had worked for until that point is going to be lost essentially but it doesn't have to be that way.

And you mentioned at the beginning of the podcast, we often tell ourselves we are not good enough, we don't have the right skills, we are too introverted. It doesn't have to be that way. Your skills are always valuable, your education and training are always valuable and if it is not in a clinical career there are other options where you can use your training and education.

HF: I will definitely be getting into how you went forward to figure out how to use your skills. But just going a little bit back to the residency situation, could you tell us what was the initial residency and what was the basic issue and then how did it end up happening in a second residency?

DP: I think in both of the residency programs the common theme that I see is not advocating for myself. When somebody complained about the lack of documentation or in lack of communication, maybe I should have stepped up and spoken up for myself more and done a better job of coming forward with the facts and telling them “Here's what I'm doing and here's how I'm doing it”, and also navigating the politics of the whole situation.

I think some people tend to have more influence in a program and as a resident, as an individual, it can be tough to stand up against the system. But you have to protect yourself I think as an individual and salvage your career and I think you should have no shame about that.

If you need help from a lawyer or say an advocate who will speak up for yourself, a mentor, somebody outside the program, seek all that help. That's what I would have done differently. And find out ways to salvage your skills, to salvage all the training to receive credit for it.

I think what I would have done differently is approach it a little less emotional, on a less emotional level. It's very intense when you're in the middle of it but just taking a step back and understanding that you're valuable and one person's opinion of you or a few people's opinions of you shouldn't affect who you are and there's always ways to move forward.

HF: Now, obviously there's always two sides to a story. They say no matter how thin you make a pancake there are always two sides. Do you feel like there was anything that when they were having issues with your performance could have been done better remedied or maybe if you would add some support that things could have turned out differently?

DP: Yeah, I think it's really important to build your support network even within the program. As unfair as it seems, having attendings speak up for you and showcasing your work, not being afraid to really go out there and vouch for yourself which can be hard for somebody who's an introvert, who doesn't like conflict, who doesn't like to be a salesman of your skills and sometimes that's what is needed. You have to present yourself and be more intentional about showcasing what you have done so far and your achievements which I did have quite a lot of attending supporting me but I wish it was early enough and I wish I had done that soon enough in both the situations.

HF: And how long did you end up spending in the first residency and the second residency, Pooja?

DP: The first one was just a year and I received credit for the entire year. The second one was the full three years but unfortunately the program did not give me credit for all three years.

HF: You were actually finishing that second residency and you were really close to being able to move on and then you didn't get credit for it?

DP: That's correct, yes. And one thing I have also realized is a lot depends on your program director and the GME. If you are moving from one program to the other they do have, there is subjectivity in terms of how much credit they will give you and that's something I realized the hard way, but there's always ways to work with the program and to really understand how you can get maximum credit for the work you have done.

HF: Well, that must have been incredibly devastating to have now put all this time into these residency programs and not achieve the ability to go on and practice at the position. So can you tell us what you were feeling and what kinds of thoughts were going through your mind when this became a reality?

DP: Oh, it was absolutely devastating and I was completely heartbroken with medicine. This is something I had dreamed of for years and the two years that followed were really the darkest period of my life both personally and professionally. I was a new mom, so the only positive thing happening for me was that I was able to spend time with my child which probably I wouldn't have had enough time if I was a practicing physician.

But yeah, those were the deepest and darkest times of my life. And what kept me going is a belief in myself that my skills are valuable and just a few people's opinion about me doesn't have to change the course of my life. And also that sometimes things don't work out because there is something better out there for you and this might not be a good fit.

I think one thing that I have realized also is if things are not going well maybe take stock of things and reflect on maybe this is not a good fit and there should be no shame in doing that. And as I mentioned earlier, our identities as physicians are so closely tied to our profession. We've spent a decade in school and in training and there's nothing else that we can think of except practicing medicine, but it doesn't have to be that way. Unusual situations can happen in anybody's life and there's always a way out.

HF: I'm curious did you have that faith in yourself that you have valuable skills and you could figure this out when you're going through the dark time or did you hit a point where you just felt really helpless?

DP: Yes, I absolutely did feel helpless. I felt like I had wasted all this time and money and resources until that point and I would never be able to do anything professionally. When I was in the middle of it, it did feel like a hopeless situation. But over the years, it has taken time and a lot of work both, personally introspecting and professionally networking, talking to other physicians who pivoted to nonclinical careers, looking at resources like your podcast or resources that are freely available to understand what other options are there. But during the time when I was going through this that was absolutely the darkest period of my life.

HF: Now, you mentioned a lot of things that are positive constructive behaviors and actions that we take as we start moving forward and we'll be talking about those, but can you remember, Pooja, what was the turning point when you shifted, when you hit rock bottom and then you started to come up? Can you remember what was the turning point for you or what shifted things?

DP: That's a great question. I think what the turning point for me was my first nonclinical job. I found that through networking. It was a consulting job at a telemedicine company where I was reviewing documents for them and they valued me so much. They treated me so well that I realized that my skills are valuable. And I felt validated for all the education, training, skills that I was bringing to the table. And in fact, I was awarded employee of the month a couple of times. Even that external validation helped a lot and I think that was my turning point. I just wanted to stay busy professionally, do something worthwhile and not waste my training until that point. But when I got that validation externally and also internally by that point I had started to realize that there are other options. That was the turning point and then there was no looking back.

HF: That does really help but there was also some things you had to do to actually get that job so I want to back up a little bit. And also if it's okay with you for me to share that your personal life was also being challenged at that time because you had a new baby and I think you shared with me that your marriage was suffering too from all that had happened. So it wasn't just your professional situation, you also had something in your personal life that was huge that was something you had to deal with.

DP: Yes, absolutely. Yes, that was a very challenging time personally as well, but I think what has carried me through that time is unshakable faith. I'm a religious person. I have a lot of faith that guides me in tough times and that's what really kept me grounded in that time and I gave myself no option. I told myself I have to make it work and I didn't come this far to not do anything professionally or to let my personal life break apart and it took a lot of work to get back on my feet and that's what kept me going I think my faith.

HF: Well, that is important and there are different ways we can reference faith, and I'm curious because when we're in this kind of situation we can feel a lot of shame. And that shame causes us to often hide, they call it the cave of shame. And we can literally not be able to open that door of that cave to get out but you have to get out in order to change things. What steps did you take to move forward that allowed you to even get this first consulting job and steps can be mindset steps and it can also be concrete action steps.

DP: Yeah, I think it all starts with the mindset if you ask me, Heather. And you have to allow yourself to be open to different possibilities when something this devastating happens in your life and it starts with the mindset. You have to tell yourself, "There is a way out. There is light at the end of the tunnel. I can make things work." And every day, that's the message I gave myself when I woke up in the morning. “There is a way out, there are possibilities. I'm not the first person that's facing something this challenging and I will figure a way out.”

HF: That is golden, Pooja, because it's so true that that negative self-talk that we have that I mentioned in the intro literally creates a reality. What we say we tend to believe, so I loved how you said I had to change what I was saying to myself. And that really started everything, and that is absolutely 100% true and there's nothing that we can say can stop us from changing our mind but our mind. So you began to create in your mind and your relationship to yourself what you actually wanted to be true. And so then what happened? How did you find this first job?

DP: This first job was through a networking event I was looking for nonclinical career options. I was reading books related to that. I was attending as many conferences as I could and I was lucky that I was in Boston which is a hub for biomedical innovation so there's always something going on, always some events or conferences. And I met this hiring manager who was really looking for a physician to come in and review materials for medical and scientific accuracy for his telemedicine company. I had a conversation with him during this event and he decided to hire me. And I stayed at that company for about a couple of years.

That's how I found my first role and I learned that there are a number of different ways you can be a consultant as a physician. You can work for a medical education company, you could work for a test prep company like Kaplan's, you could be a medical writer, you could work in a medical device or a biopharma company.

There are a number of ways to be a knowledge consultant and that's what I pursued after this role as well. And from there on I have moved on to different roles which are not consulting roles but that's really how the nonclinical journey began

HF: And when you were speaking to this person who ended up hiring you, did he ask questions about the past and what happened and do you feel like he was skeptical that things could turn out well if he hired you?

DP: That's a great question. He did ask me some questions but what really helped was that he was a physician himself and he had transitioned over to a nonclinical career in entrepreneurship. He had his telemedicine company so he understood the journey, he understood some of the shame and lack of confidence that physicians sometimes are faced with when they think of not practicing medicine or switching to an alternative career. So he understood that and he didn't probe too much into what had happened, but he realized the value that I could bring as a physician. And so, I think that was really helpful.

HF: Excellent. You worked at this job for a couple years, Pooja, and then you obviously were gaining new skills and a different feeling about yourself. What happened next?

DP: Yes, I was not only gaining skills but I realized that life doesn't have to be very tough. You can have a great work-life balance and still earn close to a physician's salary and be able to enjoy other things like your family life. And I wanted to keep going, but I also realized that there are a different set of skills that you need to be in a successful nonclinical career.

And my path, I ended up pursuing a health sector management MBA to fill those gaps, but you don't have to. And I learned a lot of valuable skills about how businesses are run, how strategy is thought of at a top level. Even basic accounting and finance, those were completely new topics to me. I learned a lot of those hard skills as well about business.

And it was an eye-opening experience because there were a number of other options that I learned through my MBA program like medical devices or say, biopharma. Physicians can easily, I wouldn't say easily, but physicians have that option to speak when they are at the crossroads.

HF: Did you do your MBA while you were working at this other job?

DP: No. I quit my other job to pursue this MBA full-time. I definitely came in contact with people that were working full-time, but as a young mom, I did not think I could handle both at the same time so I pursued this MBA program full-time.

HF: All right. We're going to take a short break here so I can share a resource and then we'll come back and talk a little bit more about advice you have for physicians who may be feeling like it's still hard for them to go forward. So don't go away. We'll be right back.

All right, my dear listeners. I wanted to let you know about my starter kit. This is a hefty PDF that you can get for free at the Doctors Crossing website under the freebie tab. The starter kit is great if you're at the crossroads and you have a lot of questions about “Should I stay in medicine, should I go, what are my options, should I do an MBA, not an MBA?”

If you're interested in having a great resource to get started, you can go to doctorscrossing.com. And at the freebie tab at the top and you'll see the starter kit plus a bunch of other freebies.

I wanted to also let you know that I'm working on a new freebie that's going to be coming out probably in about six weeks or so. It's going to be a quiz that you can take when you're at the crossroads to get some guidance about your situation. I just want to let you know there is a quiz coming soon and I'll keep you updated.

All right, we are back here with my wonderful guest, Dr. Pooja, and we're talking about her amazing story from feeling lost and hopeless to having a career that she really loves and works for her and her life and family.

Pooja, now we have not a lot of time left and a lot I'd still like to cover. If a physician is listening to this and still thinking I don't know how to put myself out there when I have these doubts, do you have any way to help them think about the language? Say they're talking to someone at a networking event or they want to get help and they're just like “How do I even explain my story when I'm embarrassed about my story?” And so they don't send that email or they don't make that call or they don't go to a networking event.

DP: Yes, absolutely. First thing as we talked about is mindset, focus on the positive. I would try to take an inventory of the valuable skills that you bring and also what works for your personality type. Some people they are outgoing, they love meeting people. They love to be on the road and a career like an MSL or a career in field might work great for them. Other people are more analytical and they prefer to be in a desk job. Really making a list of the options that are out there and seeing what works for your personality.

And also analyzing some job descriptions. I would say you have to analyze at least 50 job descriptions to tease out the common trends that are there and every company they word their titles a little differently. So what might be a medical director at one company might be a scientific advisor or a clinical scientist at another. But when you look through the job descriptions is when you will realize what they are actually looking for and what you will be doing on a day-to-day basis.

And then go out there to networking events and ask questions. I set up a lot of informational interview calls during this period. I talked to physicians who were either getting close to retirement and thinking of a nonclinical option or physicians who had made the switch intentionally and were happy with their nonclinical careers. So talking to people will also help you understand some of these career paths better. Taking copious notes, that's what I did. Taking lots of notes, understanding what that organizational structure looks like, what they do and where they see themselves in 5 years or 10 years.

HF: You hit so many highlights here. And the long of the short of it is that when we think about it we have a bridge we have to cross over. We start on one side where we really don't know a lot about these options, and there's a lot that needs to happen in order to really educate ourselves to become informed and also see what's a good fit. I like how you mentioned we have to go through an assessment phase of our personality type and what skills do we want to use and what we want our work environment to be like. So just understand that it makes total sense to be confused and not know how to go forward because there's a lot that has to be done but there's a logical process to gaining this information and going across that bridge.

I just wanted to stop here for a second, mention that there are many different things that physicians can do because we often wonder, “Well, what am I able to do if I didn't finish residency?” And you've mentioned consulting and you've mentioned pharma and writing and teaching and working for companies like helping them with their educational programs and their marketing. We've had physicians on the podcast who have gone into artificial intelligence without finishing a residency and medical communications and you can work in public health, you can work for the FDA.

So, don't feel limited. Instead there's actually everything you can do from when you graduated from college and then a lot more because you did do medical school and often a fair amount of training and residency too. So, don't be limited and saying “Well, I can't practice as a clinician”, that's just one thing, when it’s one of many.

Now, one thing I wanted to ask you, are you able to speak a little bit, Pooja, about compensation because physicians may be telling themselves, “Well, if I didn't finish residency, I'm never going to make what I could make.”

DP: Absolutely, yes. So compensation, my current role it pays very well and I would say it's very close to what a physician would make. I've started off at the bottom of the rung but it doesn't have to be that way. It helps if you have more training on your side and there are options for physicians that are closer to completing their residency or have a board certification. The transition might be easier for them, but there's definitely, you can progress through these careers and definitely make close to what a physician is making.

HF: Where did you start off at if you don't mind my asking?

DP: I started I would say about half of what I'm making right now and it's taken me five years to get to the point where I am right now. But as I said, there are careers out there. Don't undersell yourself. Your skills are valuable and you just have to educate yourself on how much they are worth and what the talent pool looks like, what the market looks like. And there's always options to make as much as the physician is making.

HF: Well, I'm proud of you. Before we wrap up, would you like to give us just a little description of what you're doing currently and what your work-life balance is?

DP: Yes. I'm currently in a clinical development role, and that essentially means taking stock of what trials are ongoing in the company and what the competition is doing, and advising them on the strategy of the assets that I'm currently working on. Work-life balance has been amazing. With each role that I have pursued, I have only found greater work-life balance so I couldn't be happier about that.

HF: Well, congratulations to you, and again, thank you so much for coming on the podcast to share your story. I'm sure just like when you heard Dr. Usman's story it was helpful to you that this will be helpful to other physicians who are feeling like for some reason they can't do this, and they absolutely can. So thank you again.

DP: Thank you for having me, Heather.

HF: All right, my dear listeners, I appreciate you being here. I'd love it as always if you can share this podcast with one person who you think could benefit from it. It really helps us to spread the word. And if you haven't already rated the podcast, it only takes two seconds to go in there and show some love if you feel it's worthy of five stars. Thank you so much in advance.

And just a reminder, if you're interested in the starter kit or other free resources that we have you can find these at doctorscrossing.com under the freebie tab. There will be a link in the show notes and we're working on a quiz for you coming down the pipe. 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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