Staying mindful:

Time management tips for residents

Are you overwhelmed by hundreds of unread email and a mountain of incomplete forms? Dr. Derek Puddester generously provides some valuable tips on how to avoid burnout.

What strategies should residents implement to prioritize their daily schedule?

One of the most important things residents can do is look at what those in front of them are doing. So, for example, medical students should be studying what the junior residents are doing; junior residents should be learning from the seniors; seniors should be learning from the Fellows; and Fellows learning from staff. And I think if they just keep their eyes and ears open to how others are managing their daily responsibilities, they’re going to learn a lot. So, that’s rule number one.

Rule number two is to think about what their educational objectives are for that particular rotation; if, for example, someone is on a general internal medicine CTU rotation. One of the rotation specific objectives may be related to cardiology. They want to make sure they build time into their daily responsibilities to ensure that that particular objective has been covered in a measured fashion, and that their supervising staff are aware of it.

The third thing is going to be related to clinical care, so we always put our patients first and the priority that they have. So, particularly after things like rounds or intake or handover, the resident and the rest of the daytime staff ought to be able to prioritize what patients require and then triage the rest of their day around those levels of urgency.

And, last, and this is the hard part, is make sure that they build in time to their day to take care of themselves. They need to look very carefully and thoughtfully at their daily routines and think about: “Okay, when am I going to have a five minute break? When am I going to have time to attend to things like hydration and nutrition? When am I going to get a time to
think If I’m going to be on call, calling home and saying goodnight to my kids. Making sure I have decent, nutritious supper.”

If they think of those four priorities, that ought to help them manage their day.

**In the event a resident is unable to efficiently organize his/her calendar of commitments and burnout does take hold, what do you advise he/she do to regain control of his/her time and energy?**

The bottom line: I think if we have a trainee who’s dealing with symptoms of burnout, the number one thing they need to do is to reach out to their program director, their housestaff association, their family physician, and any other local, on-the-ground resources immediately, because they’re going to need to address that as a priority issue.

**You also mentioned that technology can be a significant and helpful part of a resident’s time management tool kit. Are there any new useful Apps or online programs you’ve discovered?**

I don’t think there’s anything new that I’ve come across in that past four to six months. I’ve come across some great distracters but the real things they need to be looking for aren’t the new and the flashy. What they really need is quick and dirty, well-established Apps that will help them run their day. They need to know how to monitor and regulate the calendar. I don’t care if that’s an App from three years ago or last week. It’s the same; it’s a calendar. And it’s going to need them to manage it, the same thing with to-do lists. They should have a good calendar and to-do list program, a really great e-mail program that they’re comfortable using. And then, all of the things we use in clinical practice: Best Updates, etc. Those sorts of apps ought to be fine.

**A note on to-do lists...**

To-do lists can irritate a lot of people because they don’t manage them well and they feel guilty about them. I don’t use to-do lists, never have, but I know people who swear by them, so I do think there’s a bit of subjectivity in that if people aren’t using a to-do list, they want to stay mindful of how they’re staying on top of their task list. In my case, it’s
embedded into my calendar. So long as they’re doing something that works for them, helps them achieve that goal, staying on top of their task list, it’s good.

**Achieving balance is perhaps the most challenging time management skill.**

Ensuring that family, career and friends are being allotted an equal portion of the pie takes constant monitoring and adjustment. What is the most effective way for residents to create and maintain balance in their lives?

Actually, I don’t believe in balance. I think that’s something that we do. I think when we come into this career, most of us do so appreciating that it’s going to be a lifelong practice of juggling commitments and responsibilities. A lot of our time will not be spent in a harmonious balance and I’m not saying that’s a bad thing. Residency is a particularly difficult time in our professional development. To expect that there’s going to be balance arising out of that is probably not a healthy construct to teach trainees. For a lot of the faculty members that I work with through the faculty wellness program, they’re now dealing with elder care issues. While that’s going to throw their lives off balance, in some ways that’s appropriate, that’s a significant phase of life issues they’re going to need to manage.

What I really try to conceptualize is you only have so much energy and time in your day and you’re going to be constantly shifting your priorities, and manage competing demands.

Now, some things aren’t going to change. You’re going to need to take care of your body or it will get sick. You’re going to need to take care of your mind or it will become ill. You’re going to need to take care of your family or they’ll leave. Those are some things that will be constants, but there’s going to be an ebb and flow to the time that you’re going to be able to give.

So, I would say to folks: aim for quality. Aim for really good date nights if you’re in relationships. If you have children, make sure that they always have the sense that they’re coming first, but, be brutally honest if there are going to be times when patients are going to pull you away from meeting that criteria. So, when you’re with them, you’re with them. You’re not with your laptop or with your Blackberry or watching a movie or watching a soccer game. You’re with them.

Same thing with your friends: If you’re going to commit to spending time with your friends, then invest in it, book it, protect it and enjoy it, and be incredibly present. And just keep an
eye on things as you move through different phases, and if it’s not going well, then figure out if you’re doing too much.

This is hard for residents because they’re contractual employees and they’re university students. They can’t really get rid of much but faculty can. Faculty can make choices about what they’ve committed to you and they might be able to make some changes and dial things down. I often say to the residents that you’ll have way more flexibility when you stop than you do right now.