

LETTER FROM THE EDITOR-IN-CHIEF

The Only Constant is Change



As I contemplate my own professional transition, from an academic megahospital to a private urgent care venture, I have been through the usual roller-coaster of emotions that accompany any major life change:

- Stress (physical, mental, and emotional): Change requires simultaneously managing the process you are changing from and the process you are changing to. That's double the work. In a complex profession like ours, I think everyone will agree there's enough stress managing just one.
- Anxiety: Change causes much uncertainty, leaving one feeling vulnerable and anxious. Fear of what's on the "other side" of change is the most common reason we resist change.
- Guilt: When change involves leaving a job, you are leaving behind your "job family." If you have nurtured those relationships, especially over long periods of time, there is a sense of abandonment when you leave.
- Sadness: Change inevitably results in a spiritual and physical "loss." When we experience a loss, we grieve.
- Excitement: Yes, there are positive emotions that can result from change. Change creates opportunity, and opportunity can be very energizing.

In a profession like medicine, there exists what I'll call a "change paradox."

On the one hand, medicine is a practice of repetition: fund of knowledge, formulas, algorithms, policies and procedures, protocols, standards, guidelines, and routines. These fundamentals of practice allow us to ensure patient safety, reproducible outcomes, and a little sanity. Repetition is critical in the chaotic, high-risk practice conditions in which we work.

On the other hand, the practice of medicine requires aptitude at managing change: science changes, best practices change, disease states change, technology changes, insurance changes, regulatory environments change, and laws change. That's a lot of change—dizzying, really!

Physicians are notoriously resistant to change. It penetrates and threatens what little control and security they have left in their practices and personal lives. Most physicians feel they are at the tipping point—"One more change and I'll collapse."

It reminds me of the popular family game Jenga. You build a solid tower of wood blocks and each player takes a turn pulling out a block, one at a time, until the tower falls. There is tremendous uncertainty and anxiety about whether the next "change" will cause the tower to collapse.

"Life-long learning requires a commitment to managing change."

However, as physicians, we have made a commitment to life-long learning, and life-long learning requires a commitment to managing change. So, here are a few things you can do to help yourself:

- Don't forget to see the "opportunity." Focusing on, or complaining about, what you lose in the change process is an obstacle to fully embracing a chance to grow both personally and professionally, and shows an unwillingness to learn.
- Accept a little uncertainty. Informed decision making is prudent, but perseverating over decisions is a major hurdle to change. Doctors like to do this; don't!
- Trust yourself. You didn't get to where you are because of incompetence. You can handle more than you think.

Exercise, eat right, and nurture yourself and your personal relationships. Nothing breeds more confidence in the face of major life changes than being of sound mind, body and spirit.

Are you ready? ■

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