Special Report

Personal Diary: Reflections of a Newly Appointed Section Chief¹

David M. Yousem, MD

It certainly seems different looking in from the other side. I was a member of the neuroradiology section of an academic radiology department for 8 years under the direction of a very effective section chief. When I accepted my current position as chief of neuroradiology at another academic department just 110 miles away, I assumed that life would continue in a similar fashion, with similar priorities. I expected that my clinical responsibilities and research interests would remain intact as I assumed a greater administrative role. I understood that the mentoring of junior faculty would be one of the new emphases of my career. I looked forward to tackling that role.

I have been at the job for just 4 months now as of this writing. My life is not what I expected! As section chief, I have become the lightning rod for all issues in the fields of patient care, research, equity among staff, and education, as well as departmental issues ranging from missing radiographs to delayed dictations. As a member of a section, I felt in control of my immediate universe and I could make changes that immediately affected my lifestyle and employment. As section chief, I realize that my success depends more on "others" than myself, on ever-increasing layers of physicians, trainees, technologists, and support staff. I must somehow mobilize all of them to be effective. I am judged by the film librarians, technologists, nurses, secretaries, and physicians working with me, because the quotidian affairs of the section do not get bumped up to the chairman. As a member of a section, I was judged by my own capabilities, shielded from such widespread liabilities. I was finite. Now it seems I have expanded exponentially. It was easier when I was more narrowly delineated.

PRIORITIZING

For better or for worse, I believe that my first priority as a new section chief is to improve patient service. This requires instituting new rules and guidelines for patient care, service to clinicians, promptness of reporting studies, and mechanisms for dealing with unhappy referring physicians. In the end, we are physicians taking care of patients even in the most lofty academic centers. If we don't perform that role well, our local, regional, or national reputation will suffer. In some ways this means investing in and upgrading equipment and modernizing our information technology systems, but it also means changing attitudes.

I have been fortunate in that the research structure at my new institution is so strong that it does not demand much of my immediate attention. The groundwork was laid by previous chiefs, and, therefore, my role has been to fine-tune and prioritize research goals that had already been established. The neuroradiology research program does not need me as a researcher; it really only needs me as a director, mentor, and facilitator, with a heavy emphasis on facilitation.

Building the teaching program for the fellows has also required my input and has been very gratifying. All parties involved, from faculty members to fellows to researchers, have enthusiastically supported the renewed emphasis on training of our junior colleagues. I have found that my work within my microenvironment (setting up a teaching program for the fellows) has been much more effective than my dealings at the residency or medical school training level. It is much harder to integrate priorities within the larger whole of the department and the medical school.

Acad Radiol 1999; 6:752-755

¹ From the Department of Radiology, Johns Hopkins Hospital, 600 N Wolfe St, Houck B-112, Baltimore, MD 21287. Received April 7, 1999; accepted July 27. Address reprint requests to the author.

© AUR, 1999
Although I would agree with John Donne that “no man is an island,” managing an island is easier than managing an archipelago.

**REMITENESS**

Patients are my first priority. I never forget that, but in the role of section chief, I seem very remote from hands-on patient care. When I am on clinical service, I crave the gratification of touching the patient. While I have never had aspirations of being a primary caregiver, it is amazing how valuable the daily aliquots of physician–patient interactions are in a radiology department if you must reduce it by several-fold when moving to an administrative capacity. I could use more patient “meetings” and fewer executive committee meetings. I find myself being more of a patient advocate and more empathetic toward patients when I am on clinical service these days than when I was in my former position. Does absence make the heart grow fonder?

**TIME MANAGEMENT**

I never worried about time management as a staff member. Now, because it seems as if more than 4 hours of each day is spent in administrative meetings, I have to be more efficient with my time. Each meeting generates at least 45 minutes of postmeeting activity, be it writing the minutes, preparing the next agenda, or responding to the meeting’s directives. I devoted the first few months of my stewardship of neuroradiology to an open-door policy whereby any member of the hospital who needed to speak with me about any particular issue could see me within 24 hours. I subsequently found that I rarely had a 2-hour block of time to sit and consider such lofty goals as developing a simple research project. Initially I cut back the appointments to 4 hours per day. However, because they were spaced throughout the day, I was still unable to find blocks of quality time with which to pursue my academic interests. I then directed my secretary to schedule all 4 hours of meetings either in the morning or in the afternoon. This led to 2 weeks where each day of the week was filled with a morning or afternoon of interviews, appointments, and orientation sessions. After adding the 2 hours of post- or preprocessing time for the 4 hours of meetings and 30 minutes for lunch, my 11-hour days were cut to less than 5. I next directed my secretary to leave 1 day a week free from appointments. Invariably, this day was designated as one of my days on clinical service.

Given a light load and an efficient neuroradiology fellow or resident, I am now able to have time to myself. It’s ironic that I get most of my academic work done on the days I have clinical duties—my “free days” are shot. This wasn’t what I expected. I cannot lock myself in my office, free from interruption, except on Saturdays and Sundays. Family time has suffered, and, with that, stress levels have risen. I’ve been to see a neurologist for increased frequency of migraine headaches. I now make my own schedule so I have no one to blame but myself for this predicament.

**EFFICIENCY**

I am trying to use technology to improve my efficiency. I have heeded my brother’s advice to always carry a dictaphone (I dictated this article while driving home in my manual transmission Honda Civic—a dangerous proposition on Maryland interstates, especially with cell phone calls to answer!). I carry that cell phone with me religiously, calling people as I walk from one appointment to the next. I have tried using a Palm Pilot hand-held computer, but it does not seem to help; it is faster to jot notes on Post-it removable notes than to have to deliberately scribble on my Pilot. Linking to my computer at work from home is an option that is obviated by my 1-gigabyte external drive cartridge that I use to transport work back and forth; it’s just that by the time I put my 5- and 7-year-old children to bed, my capacity to read and write is limited. Nevertheless, I still bring work home in the hopes that I’ll get a second wind, particularly since the amount of work I bring home continues to grow. As a result, my briefcase is getting heavier and heavier. I have developed neck strain and require massage therapy.

**AGENDAS**

In my previous life, my personal agenda dominated my considerations at work. My goals are sectional now. But where shall I place the section’s agenda with respect to the departmental agenda? Portions of the sectional agenda are manageable and can be effected in a reasonable time frame. In a department of over 100 faculty members, however, the departmental agenda is diffuse and requires a considerable amount of time to implement. Placing my sectional agenda within the greater whole commits me to this slower timetable with a broader scrutiny of its content by financial, bureaucratic, and administrative oversight. I feel “hamstrung” by the weight of the larger
unit. I have found certain techniques to work within this greater structure to achieve the goals of my unit. By volunteering to be the test case, prioritizing the areas where sectional goals meet departmental goals, and committing to the concept of “think globally, act locally,” I have been able to work within the timetable of the department. I try to stay current on technologic issues and to be perceived as an idea person who can be relied on to bring issues to closure. Still, I have made a personal commitment to go it alone on subjects critical to my section’s health.

THE ROLE OF THE ROLE MODEL

While I have always been comfortable with my personal work ethic, I am much more likely to scrutinize how I am perceived by my staff members in my new position than previously. Can I handle the pressure of setting examples on a daily basis? I need to serve this role not just for the physicians working with me but for the technologists, secretaries, support personnel, and referring physicians. I strive to have the best report turnaround time, the lowest rate of complications in procedures, the highest “home run rate” at conferences, the fastest e-mail turnaround time, and so on. I have, however, carved out certain niches devoted to myself. I have never been a suit-and-tie man and will never serve as a role model for work attire; I insist on wearing scrubs in the office, angiography day or not. It makes me feel more like a doctor and less like a suit. Yet I must be a role model of decorum. I look back on the occasional off-color or inappropriate comment that would slip from my mouth in bantering with my colleagues, secretaries, and technologists while at my previous job. As a section chief, I view myself in a more dominant role in which such flippant remarks could be viewed as harassing. A person of power must be more wary of the implications of sidebar commentary. In some ways, this has improved my character, since such recklessness belies thoughtlessness.

THE POWER OF PRAISE

Too often, the work environment is run on the concept of “seldom is heard an encouraging word.” Fortunately, my current chairman has demonstrated to me the power of praise. It is rare that I have an interaction with him in which he doesn’t have a word of encouragement for some idea or concept we have discussed. It makes me feel good. I have taken his example and implemented it to great effect within my own section. For every complaint there should be a compliment. I do believe there are more smiles and better feelings of self-worth since I began commending people for their work. I have found that the power of the position lends greater weight to the praise. I do it sincerely, and I am more expressive of my feelings toward my co-workers. For years my wife has wanted me to open up more emotionally, and it took a job promotion to achieve it! How ironic. I should praise more at home, I guess.

ENVIRONMENT

I am much more concerned with my local physical environment as the section chief. I find myself picking up trash in the hallways, ordering better signage, demanding carpet maintenance, and trying to maintain the sanitary quality of the bathroom outside my office. In some ways, this reflects on aesthetics and attention to detail. I now understand one of my predecessors’ concerns over wall hangings, color schemes, and lighting in patient areas. My environment affects and reflects on me. I spend more waking hours here than with my family; it is my other home, and my home should be my castle. I redecorated and reoriented my office on innumerable occasions before settling on its current design. What is unusual is that I have two large desks perpendicular to each other: One is my work desk with stacks of work binders, folders, and computer equipment; the other is my appointment desk, free of clutter, polished, and (I hope) presenting an appearance of an organized mind. As a staff member, my desk was always cluttered and disheveled, and in fact my back faced the door. Now I face the door, ready to greet and entreat as people walk in. I put my best face forward.

ACCESS

I spent much of my energy as a staff member trying to avoid being called to the chairman’s office. I subscribed to a policy of patient care first, never say no without a better alternative, and always try to put on a happy, optimistic face. To a great extent I was successful in avoiding unrequested appointments with the chairman. Now, as section chief, I can never seem to get enough of my chairman’s time. As if his appointment schedule isn’t a thousand times worse than mine! While I believe that in my current position I hold greater sway over my destiny, and the destiny of others, I now realize why my former section chief often pleaded powerlessness. I need to consult my chairman frequently on policy issues. Initially I was calling meetings with the chairman to better define my goals and gain
authorization for the steps needed to achieve them. My chairman has encouraged me to handle problems and policy issues on my own, and my own restlessness has discouraged me from the expected delays before being able to get in to see him on an elective basis. I see things from the standpoint of days to weeks rather than months to years.

**SOCIAL CONCERNS**

In my previous position, I felt that my co-workers were my closest friends. How can I breed that feeling here? Is it appropriate to ask my staff about problems at home or stresses outside the office? Does my relative youth make my paternalistic tendencies appear inappropriate, particularly with faculty members who may be older than myself? I would love to play the role of the godfather like my former chairman, but who would accept it?

Don’t get me wrong. I love my job. It feels wonderful to be able to implement some of the pie-in-the-sky ideas that I had as a Monday morning quarterback in my former section. I enjoy prioritizing the needs of my section colleagues ahead of my own personal career goals and linking my success to theirs. I will be judged on their achievements, not my own. At the end of the day I go home happy. I have fun with my colleagues, the administration, the staff, and the environment. The job has required more work and introspection than I expected, but every day I believe that I can have a positive impact on other people's lives.