

How to plan for a sabbatical

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The continuing education of physicians is one of the most important problems in medical education today. Physicians need time to think, to get away, to renew themselves. There may be many who are disillusioned, disappointed and depressed about the state of affairs in the health care field and, in particular, their role in it.

When one has such doubts about the practice of medicine, it is time to take a sabbatical. A sabbatical gets the academic juices flowing again. Being in a new environment, with new ideas from students, house staff and teachers, is a stimulus for thought and learning. Taking time away from the job allows one to plan "think time".

A sabbatical has been part of the contract in academic fields other than medicine. It has also been introduced in business and industry where executives are encouraged to return as visiting fellows in business schools. Business and industry have recognized the benefits of time away from the daily job to revitalize one's capabilities.

A sabbatical denotes a period of rest that occurs at regular intervals. It is a pause in one's career which allows time to reflect on the past and plan the future. Professional expertise can be enhanced; existing skills can be maintained or new techniques can be learned; individuals can sort out their personal priorities, renew their enthusiasm for life and job and continue their education.

Sabbaticals can be structured or unstructured. The structured sabbatical implies that the time is pre-planned. If returning to a teaching hospital or graduate school, you

should develop a specific project, either a reading, writing or research program outlined in advance. This is for the mutual benefit of you and the host institution. The host teaching hospital will be more likely to accept you for this period of courtesy training in that it may gain a person for research, data collection, or a potential publication.

Some specific objectives of a sabbatical are:

- To learn a new technique.
- To review and write-up a specific topic.

In 1978 one physician in our group took a 6-month sabbatical and received \$2400 from each of us.

- To complete a specific project from back home.
- To study a new field such as medical education, administration, biostatistics, delivery of health care and the like. The latter concept may apply to an individual who is planning a midcareer modification.

In our group of six cardiologists, one person spent 6 months at Hammersmith Hospital in London, England, studying cardiomyopathies, one person studied echocardiography for 3 months at Stanford University in California, one person learned coronary angioplasty during a 3-month sabbatical in Geneva and another studied echocardiography and spent 6 months writing at Har-

vard University in Boston. Two other physicians are awaiting their turn.

An unstructured or freelance sabbatical may let you travel. The freelancer may use the time for relaxation, sports or recreational activities. When special studies, reading or research are combined with travel, this can be both a meaningful experience and a benefit to the home, community and hospital.

Dr. John A. Boone, a fellow cardiologist in our group, came up with the idea for our sabbatical structure. In 1978, he took a 6-month sabbatical and received \$2400 from each of us in our group. We signed a contract and agreed that each associated physician could take a 3-month to 12-month sabbatical in the future. The total remuneration would be fixed, regardless of the duration of the sabbatical, although the gross amount would be adjusted each year in relation to the percentage fee increase from the Medical Services Plan of British Columbia. In 1982, for instance, this was \$3800 from each associate. We also agreed that any debt or credit would be settled if an individual moved, died or decided not to participate in the future.

We are private practice cardiologists and although we have university clinical appointments, there was no university financial support. Three of us each received \$2000 from the H.K. Detweiler travel fellowship of the Royal College of Physicians and Surgeons of Canada.

Here is a list of possible resources for financial support while on sabbatical:

- A system of support and reciprocity patterned on our system.
- A specialty organization such as the Royal College of Physicians and Surgeons of Canada, the American College of Physicians or the American College of Surgeons.
- Hospital or department travel funds.
- University funds (contact your dean's office).

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● If you are planning a specific research project, contact your provincial or state specialty medical foundation such as heart, diabetic, cancer, or arthritis associations. In Canada, contact the Heritage Foundation in the province of Alberta or the provincial lottery foundations.

● Plan ahead and use a special registered retirement savings plan designated for your sabbatical. This may also be a time when you plan to cash in other assets such as stocks, bonds or real estate.

As for practice responsibilities, we participate in a system of sharing on-call duties and holiday coverage throughout the year. One person is the on-call cardiologist each week. Therefore, each practice is covered on a rotational basis while one person is away. However, physicians in solo practice could arrange a locum tenens for continuity of their practice. As well, this could provide additional financial support and keep your office personnel busy and employed.

You may be able to retain your secretary full-time or part-time, or arrange for her to have a leave of absence. A physician may be willing to use your office facilities and share the overhead. For 6 months prior to your leaving, let your patients know that you will be temporarily away. Reassure them of the mode of coverage so that they do not feel neglected or rejected. Give written notification to your hospital administration and department head. A brief letter

explaining your sabbatical absence, coverage for your patients and referrals, and date of return should be sent to referring and associate doctors. You should give a relative, accountant, lawyer or professional associate the power of attorney for signing your bank cheques. Alternatively, the cheques for office expenses and fixed liabilities can be mailed to you monthly for your signature and returned. However, there may be unexpected mail delays if your destination is outside of Canada.

Choosing an appropriate location for your sabbatical depends upon your scientific objective. Choose a teaching hospital other than that at which you originally trained, in order to maximize exposure to new ideas. The location and city can have particular interest for one's spouse and family. They may also enjoy, grow and learn from the sabbatical experience. Some cities offer cultural, academic and sporting attractions. This is an opportunity to learn local and national history and to cultivate hobbies.

Check with the host hospital women's league, university housing bureau, and faculty club for housing information. Also check local newspapers and real estate companies, but be aware that the latter may charge a commission. You may wish to offer your house as an exchange to another visiting faculty member. It is helpful to visit your sabbatical site ahead of time to

prepare housing for you and your family.

There are some possible negative aspects to taking a sabbatical. There is financial loss, for instance, but this is more than offset by the total sabbatical experience. By saving, planning ahead, and drawing on your resources, you can manage through the financially inert leave. And some physicians may be concerned that there will be a loss of patients and practice. With adequate planning and coverage, this does not occur. You will be back on the professional treadmill within 1 month of your return. There may be problems with your office staff. Be prepared for possible recruitment of new secretarial, research or administrative staff when you return. And there are problems of re-entry within the medical system after being away. Do not become impatient or frustrated if you are unable to modify existing methodology or old ways when you return. The above negative aspects are not unfamiliar or unsurpassable. They all existed when we started practice and all were overcome.

If a field is fallow every seventh year, its production will be maintained, otherwise with continued use the production will diminish. An analogy may be drawn to a physician, educator or administrator. The sabbatical time is one of revitalization which should yield increased creativity, productivity, and satisfaction in future years. ■


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IN ANGINA AND
HYPERTENSION,

Corgard (nadolol)

ONCE A DAY

because
renal blood flow
is important

 SQUIBB

Getting personal with patients

Remembering personal details about your patients can be difficult when you see twenty or thirty people every day. Try using a patient information sheet attached inside the chart to jot down patient hobbies, jobs, special interests and notes of family members. A quick scan of these notes before you see the patient will jog your memory. Patients will be pleased by this show of special interest in them as individuals.