Success as a medical resident is far from instantaneous. That having been said, residents can put themselves in a position to succeed early on.

Nate Miller, MD, is a hospitalist at Avera McKennan Hospital & University Health Center, clinical vice president of the Avera Medical Group Hospitalist Service Line and academic assistant professor at Sanford School of Medicine at the University of South Dakota. Having worked with residents as an attending physician for the past seven years, Dr. Miller shed some light on his expectations and how residents can meet them early in their training.

**When you don’t know, speak up**

There’s nothing wrong with asking questions. In fact, Dr. Miller points out that even the most seasoned physicians will seek advice.

“The most common mistake I see is, residents not speaking up when they’re afraid of being wrong,” Dr. Miller said. “It’s not necessarily a mistake on patient care. It’s an unwillingness to admit they don’t know something. If residents are afraid of speaking up because they are afraid of being wrong on an answer or not necessarily providing the correct information, they’ll never speak up when they are right and that will stifle their ability to grow as physicians.

“We’re never going to know it all. You have to know when to ask for help,” he added. “That’s the mark between a good physician and a great physician—knowing your limits and when it is time to ask another colleague or a specialist or a subspecialist to weigh in on the clinical situation.”

**Learn ABCs of the EHR**
As a first-year resident, you will spend significant time on documentation. A recent study found first year-residents spent an average of 112 hours per month on 206 electronic patient record encounters. Dr. Miller says that the more proficient you are in your hospital’s electronic health record system the more time you can devote to other aspects of your learning.

“[New residents] will need to become experts in whatever electronic medical record they are working in,” he said. “That’s one thing that I’m sure a lot will find surprising. ... Before we can get into real detail with the clinical aspects, that electronic medical record needs to be explored, and they need to manipulate it and know how to use it. That’s another tool that if we don’t know how to use, we won’t be able to give patients the care they need. So that slows the learning curve initially.”

Keep case presentations short and sweet

The basics of giving an effective case presentation should have been covered in medical school. Dr. Miller advises new residents to remember those basics as they refine and continue to work on their presentation skills.

“Every specialty will have different requirements regarding presentations; the key is for residents to know what that specialty needs. Ideally they know that within the first few weeks of their residency. The reason for this is a clear, concise presentation tells us the resident knows the story and knows the patient.”

Show you care

You don’t end up pursuing a career in medicine without a passion for helping others. Demonstrating that to both your patients and colleagues will go a long ways toward earning trust.

“You have to approach patients the way you would want your family members approached,” Dr. Miller said. “When you are telling a [patient and their] family a plan, don’t tell them the plan as you would tell it to your attending physician. Break it down so they understand what is going on.”

“We can’t always completely cure patients, but we can help them heal,” Dr. Miller concluded. “By healing that doesn’t mean they no longer have disease but we can heal them mentally, physically and emotionally, and for us to do that, we have to show that we care. That’s the most important thing.”