

Terms every doctor should know about physician burnout

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Unfortunately, doctors know all too well about physician burnout and its impact on medicine. With most American physicians experiencing some sign of burnout, it is a condition that affects all specialties and all practice settings.

While you've most certainly heard of physician burnout, what other terms are important to know? Here is a convenient glossary to help guide you through different aspects of physician burnout and how the AMA is fighting to improve the well-being of doctors in a broken system.

Reducing physician burnout is a critical component of the AMA Recovery Plan for America's Physicians.

Far too many American physicians experience burnout. That's why the AMA develops resources that prioritize well-being and highlight workflow changes so physicians can focus on what matters—patient care.

At the height of the pandemic, the physician burnout rate rose to 63% among doctors in the U.S., according to the latest research co-written by experts at the AMA. And while burnout rates are dropping again, more work still needs to be done.

Physician burnout

A long-term stress reaction characterized by depersonalization. This can include:

- Cynical or negative attitudes toward patients.
- Emotional exhaustion.
- A feeling of decreased personal achievement.
- Lack of empathy for patients.

Emotional exhaustion

Defined as a state of feeling worn-out and drained from an accumulation of stress from personal or work lives, or a combination of both, emotional exhaustion is a leading sign of burnout.

While no one is expected to be upbeat all the time, there is a big difference between being tired at work and being exhausted by your profession. It is important that physicians feel comfortable asking for help or speaking with their family, other doctors or even seeking professional help.

Professional fulfillment

This refers to a sense of satisfaction and enjoyment that comes from work. When people experience professional fulfillment, they are more likely to feel engaged and motivated, which serves as a buffer against burnout.

In contrast, when people do not find their work fulfilling or meaningful, they may become disengaged, which can lead to burnout over time. Burnout can also negatively impact professional fulfillment by creating a cycle of exhaustion, cynicism and reduced productivity, contributing to decreased satisfaction and fulfillment in work.

Depersonalization

As part of physician burnout, depersonalization is a lack of empathy for or negative attitudes toward patients. It can also occur when physicians develop a negative attitude toward their colleagues and profession. Depersonalization can have a negative impact on the quality of care that physicians provide, as well as their own well-being and job satisfaction.

Work-life integration

This is defined as blending both work and personal life into one entity while work-life balance aims to create an ideal state where work and life coexist and thrive separately. Compared to other U.S. workers, physicians are less likely to be satisfied with their work-life integration. Working parents—regardless of gender—were more likely to encounter work-life integration issues both before and during the pandemic.

Struggles with work-life integration create work-home conflicts, which can also increase the risk of burnout. These conflicts can be reduced when better alignment is created between work schedules and personal life needs.

“Imposter phenomenon”

If you are a physician who is feeling as though your accomplishments are inadequate and your successes are undeserved or due to chance rather than personal effort, skill, ability and competence, you are not alone. It’s called the imposter phenomenon and research shows physicians are more likely to experience it than other professionals.

Nearly one in four physicians report frequent or intense experiences with it, according to a study published in *Mayo Clinic Proceedings*. Perhaps more importantly, the study found that the imposter phenomenon in physicians is associated with higher odds of both burnout and suicidal ideation. Physicians experiencing imposter phenomenon also have increased odds of lower professional fulfillment.

Work overload

It occurs when the demands of work exceed a person’s capacity to perform their duties efficiently and effectively. Work overload can lead to stress, burnout, decreased productivity and other negative outcomes, which has contributed to workforce turnover. And it can impact all health professionals, signaling the need to address the well-being of multiple role types to reduce burnout and staffing shortages.

Intent to leave

Over the past three years, intentions to leave an organization within two years have steadily increased. On top of that, as feelings of value decrease, intentions to leave increase. This is a key finding for many health systems that raises concerns about physician retention.

Organizational Biopsy

Through the AMA Organizational Biopsy™, the AMA offers a set of services for health systems and organizations. This includes a well-being assessment tool developed to support holistically measuring and taking action to improve well-being in an organization.

The Organizational Biopsy helps assess progress in four domains:

- Organizational culture such as leadership, teamwork and trust.
- Practice efficiency, which includes workflows and team structure and stability.
- Self-care such as managing post-traumatic stress, post-traumatic growth and work-life balance.
- Retention, which means keeping physicians in practice.

Learn more about the AMA's organizational well-being assessment (PDF) work or email practice.transformation@ama-assn.org for more information.

Chief wellness officer

Health systems need to prioritize the well-being of physicians and other health professionals by developing an executive-level champion position: chief wellness officer (CWO). Appointing a CWO helps to convey that well-being is of equal importance to that of quality, informatics and data in the sustainability and success of the organization.

Vanguard organizations are creating this new C-level executive position to develop an organizational strategy and guide system-level and system-wide efforts to improve professional fulfillment. Creating a chief wellness officer position paves the way for organizations to improve not only care team well-being, but also patient experience, health outcomes, retention of key personnel and a strong financial position.

“Pajama time”

On average, family physicians spend 86 minutes doing administrative work after hours or at home, which is commonly known as pajama time with the EHR. This playful-sounding term is caused by more than just the between-visit work on the EHR.

It includes receiving, sorting, organizing and responding to all information flowing into the practice from email, phone calls, faxes, postal mail, forms and the EHR. The unclear or undefined workflows add to the dreaded pajama time. This means physicians need to trust their teams to help balance their workload.

The “stupid stuff”

Have you ever performed a daily task and thought, “Why do I even bother to do this?” If you have, then you are not alone. Increasing administrative tasks for physicians means they have less time to focus on what is important, such as interacting with patients and delivering care.

This is where “getting rid of stupid stuff” comes into play. “Getting rid of stupid stuff” means sending time-wasting EHR activities straight to the chopping block. To tackle physician administrative burdens, eliminate “stupid stuff” to free up time for doctors and other health professionals.

Clerical burdens

The biggest drivers of physician burnout are clerical burdens, which are heavily influenced by EHRs. Clerical burdens include hours finishing notes, documenting phone calls, ordering tests, reviewing results, responding to patient requests, prescribing medications and communicating with staff. And while it is easy to heap blame on EHR vendors for clerical burdens associated with their products, there are others to shine the spotlight on too.

Unnecessary documentation

In addition to some vendors’ poor product design, payers, lawmakers and regulatory bodies have all had a hand in creating a situation that leaves too many physicians feeling like documentation drones instead of doctors.

Health care organizations also play a role through their decisions affecting governance, resource allocation, and EHR implementation and training. The AMA is committed to making technology an asset in the delivery of health care, not a burden.

Regulatory myths

There are a series of commonly misunderstood regulatory guidelines on pressing clinical topics. The AMA’s regulatory myths series provides physicians and their care teams with resources to reduce guesswork and administrative burdens.

This helps shift the focus back on streamlining clinical workflow processes, improving patient outcomes and increasing physician satisfaction. Some regulatory myths include pain assessments, medical student documentation and computerized provider order entry.

Moral distress

When a physician or other health professional feels the ethically correct action to take is different from what they are tasked with doing, it can cause moral distress. Policies and procedures that prevent a physician from doing what they think is right can also lead to moral distress.

Medical students, residents and physicians must navigate conflicts between their own aspirations for patient care and the requirements of technology, administrative rules and other external factors. The AMA developed resources to help medical professionals assess and address emotional and psychological distress.

Engagement scores

To assess well-being, a health system may look at engagement scores, which is a measure of interaction and interest in an organization. Engagement scores are often used as a proxy for overall well-being because higher levels of engagement are associated with greater satisfaction and positive emotions. One strategy for an organization to improve engagement scores is going through the AMA Joy in Medicine™ Health Recognition Program.