Why one doctor’s burnout story shows that systemic changes matter

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Like many physicians, Reena Patel, MD, had a demanding job before the COVID-19 pandemic hit. But she would not have defined herself as burned out. She wouldn’t even place herself in that category during the first year of the pandemic because she didn’t feel alone.

She knew that SARS-CoV-2 was a threat to her on the job and that she had the potential to infect her family because of her risky work environment. But there was camaraderie among her colleagues at the hospital and with other emergency physicians across the country. The priority was to stay alive, and it brought the community together.

But the burnout hit her in 2021.

“A year later and we were still in this mess and there are no clear signs of things getting better,” Dr. Patel said during the AMA STEPS Forward® podcast episode “Physician Burnout: One Doctor’s Story.” Things were just getting worse, she added.
Reducing physician burnout is a critical component of the AMA Recovery Plan for America’s Physicians. You took care of the nation. It’s time for the nation to take care of you. It’s time to rebuild. And the AMA is ready.

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.

While the AMA STEPS Forward podcasts typically explore solutions, this one took a step back to talk to one of the doctors on the ground that these solutions would benefit. Dr. Patel’s story is a common one among physicians experiencing burnout. You can listen on Apple Podcasts or Spotify.

**When burnout hit**

By mid-2021, volumes picked back up to pre-pandemic levels in Dr. Patel’s emergency department. And the patients coming in were more acute, leading to performing more procedures than ever before.

At the same time, the staffing company had cut the hours for Dr. Patel and other physicians because of lost revenue in 2020 when patient volumes were down. Like many emergency physicians, Dr. Patel is an hourly contractor. So, lost hours meant a significant pay cut.

Scribes were also taken away, leaving physicians to do their own charting. Continuing medical education funding was cut as well. Nurses who Dr. Patel had worked with for years were quitting to take contract positions that paid better, leaving her with new staff members that didn’t anticipate what she would order the way her long-time colleagues had.

And, as Delta and Omicron SARS-CoV-2 variants surged, more than half of the people in the community where Dr. Patel works had not been—and were not getting—vaccinated against COVID-19.

“When I started feeling the burnout, I have to say it was because of people not getting vaccinated for COVID,” Dr. Patel said. “People had access to vaccines, and they don’t want it and that’s when you kind of realize that this is going to go on for years because the population just doesn’t believe in the vaccines.”

She and her colleagues were back to using BiPAP machines to help patients breathe. Unvaccinated patients, including young people, were coming in and asking for antibiotics or other treatments for COVID-19.
“We can’t say it, but we are all shouting in our minds: ‘You should have gotten the vaccine,” Dr. Patel said. “There were a lot of young people who just didn’t think it was going to be them and they come in and they are what we call ‘happy hypoxic’—patients who are not in distress, but their oxygen saturations are less than 50% and they are not fazed by it.

“They’re on BiPAP texting and they still don’t understand how sick they are and chances are they probably won’t make it out of the hospital,” she added.

A physician’s wish list

Dr. Patel briefly considered moving to take a job in Montana for a change of scenery. But she ultimately stayed at her hospital because she enjoys the patients who she takes care of.

With the nation in its third year of the pandemic, Dr. Patel hopes there will be changes that bring back some of the joy in medicine. The first is becoming a hospital employee who has more standard benefits.

She also hopes for a steadier staff environment that allows her to work with the same nurses and X-ray technicians. Lastly, Dr. Patel wishes for more set hours for physicians to work rather than seeing their shift hours sometimes change weekly.