DR.BILL

STEP-BY-STEP

Guide to Having a Successful First Year of Practice

Ontario Edition

Transition into Practice ToolKit

Congratulations on completing your residency and getting ready to move into the next phase of your career; this is an exciting time! Along with your eagerness to start you also probably feel a tad overwhelmed as there's plenty to do to get ready for your independent practice. It's difficult to know exactly where to begin and what's expected.

To help you, we've put together this toolkit that walks you through each step and offers advice and suggestions along the way. There's probably lots you already know, but it's worth reading over once in its entirety to make sure you've got all your ducks in a row.

Each chapter takes you a step deeper into your independent practice. We recommend using this page as a quick reference to tick off the things you've already completed so it's visually clear what you still need to do. This will help you stay organized, feel more prepared and lay the groundwork for a seamless transition.

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Chapter 1
Start the Job Hunt

Before you finish your final examinations and graduate you should start thinking about what type of job you'd like, what's available to you, and then start applying. Now is the time to reach out, make connections and see what's out there. As a new grad, you are in demand, even though you may not always feel like it. We spoke to some of the top Canadian recruiters and recent grads and everyone agreed that there's no shortage of jobs.

It's also quite common to feel imposter syndrome, as if you don't have the abilities or the right experience to get the job you want. This is not true, don't doubt yourself. Use this chapter to set your standards high and get an overview of what's available.

Discover:

a) How to Figure out What Your Ideal Job is

b) To Locum or not

c) Canadian Payment Schemes

d) Target your CV

e) Where to Find Jobs

f) The Interview

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Remember why you chose a career in medicine and take the time to go through the different opportunities out there and find something you're amped up for!

a) How to Figure Out What Your Ideal Job Is

Even though there's a lot of jobs out there that doesn't mean that all of them are desirable, so it's really important to create a list of what you really want. You don't have to write it out on a full page – a sticky note can be enough -, just make sure you outline what you want.

As a new doctor you might feel like you have to take the first opportunity that's handed to you but this is actually far from the truth. Doctors are in demand and there are a lot of different opportunities, so knowing what's most important to you will help you land the job of your dreams. Plus, more than half of our lives are spent at work so you really want to keep that in mind and remember that this is a bigger decision than you may initially think. To some degree it really determines your quality of life for both you and your family.

It's easy to figure out what you want, just write down all the characteristics of your dream job. For example:

- How many patients do you want to see weekly
- Where do you want to work (hospital, clinic, etc.)
- How many hours a week
- In a small, large, or big organization?
- Are you willing to Locum? (a substitute-doctor)

The more details you can add, the better. It might change over time but the idea is that you use this list throughout the application process and don't waste your time applying for something you don't want.

Use your 'ideal list' as a way to quickly decide if:

A) the job is worth applying for or

B) the offer is worth taking.

Take the time to find something worthy. In the words of the popular Netflix star "Tidying up with Marie Kondo," ask yourself "**does this spark joy**?"

b) To Locum or Not

Locuming is when you temporarily substitute, to either replace a specific physician (like a substitute teacher), or to help with patient overflow. Locum tenens is the latin phrase that literally means "to hold the place of".

Why should I consider a locum position?

There are a lot of reasons why you should consider starting your career as a locum. Conventionally, locums are quite common for physicians who are in their first 5 years of practice, or for physicians who are near retirement. But this mindset is

changing and many physicians are locuming for a better work-life balance. It's great for new families, offers more unique practice experiences and the ability to choose when and what type of work you'd like to do (demand is high)!

Specifically, as a new grad, here are some of **the best benefits**:

- It's the best way to trial out a practice before committing to a permanent position
- You are a "freelance" doctor and have flexibility and control over your schedule. So you can be as busy or as free as you want to be. If you need 2 weeks off, you just block them off on your calendar!
- Minimal administration – you do not have any of the responsibilities that come with running a practice (hiring/firing MOAs, ordering supplies, etc.).
- Can be a way to see the country/travel while working

Obviously, there are some downsides, like constantly seeing patients that are unknown to you, which means it will take extra time to familiarize yourself with the patient during a visit. Or having to familiarize yourself with new office staff, new workflows, and potentially a new EMR.

Understandably, a lot of physicians fear the aspect of constantly looking for new gigs and moving around but there's no shortage of jobs. When we spoke Haneen, one of the co-founders of Locumunity (a popular job site for locum work), she told us that the demand for locum work is so high a physician can practically book themselves two years in advance!

Her main advice: Know how to negotiate. Here's her list of things you absolutely must ask before you accept an offer:

- Dates/hours of coverage, and whether it includes any hospital patients or on-call.
- Rate of compensation, may vary for different types of work (e.g. private forms vs. patient visits).
- Have a contract that clearly documents the above, and clearly states the clinic is responsible for any follow up necessary on tests/referrals made while you are there.

If this is something you can picture yourself doing, check out Locumunity. They have a centralized database of jobs and streamline your applications. All Jobs are pre-negotiated so they only post the crème de la crème.

c) Canadian Payment Schemes

Canadian doctors get compensated in a variety of different ways. Depending on how you practice medicine (and where), your income may be variable and complex.

For example, about 70% of doctors in Canada work under a fee-for-service (FFS) model. Some may receive a salary, while others get reimbursed under new alternative plans. These models can also differ between provinces and territories. Knowing how you'll be paid as a physician is important as you weigh your career and practice options.

Below we cover four common payment models for healthcare services in Canada:

Salary

Some doctors receive a regular salary, which is usually paid in 'time-based payments'. These can vary from simple annual salaries to shift stipends, sessional payments or hourly rates. Physicians at academic institutions, community health centres or hospitals may work under this model. Although in general, only a small number of physicians work under a fixed salary.

Alternative payment plans (APP)

Some provinces are now using other ways to compensate physicians. Increasingly popular are the various alternative payment plan (APP) models. They may also be referred to as "alternative funding plans" or "new payment models".

While they vary widely, APPs are generally made up of a combination of:

- Fees for clinical services
- Time-based payments
- Rewards for participation in specific clinical initiatives
- Population or capitation funding
- Payment for admin costs
- Bonuses for achieving specific targets

Fee-for-service (FFS)

In a traditional fee-for-service model, a doctor is essentially a small business. They operate as a self-employed professional and submit 'invoices' of who they saw and what they did for payment.

A province's ministry of health then reimburses them through the provincial health insurance plan. Worker's compensation boards and federal government departments pay for their related insured services.

- Ultimately though, the general process is similar: a doctor sees a patient, performs a service,
- then submits a claim to the government in order to get paid.

While fee-for-service works in a similar way across the country, each province has a different list of fees for services.

In Ontario, the list of insured services is provided and paid by the Ontario Health Insurance Plan (OHIP). Each medical service is given a specific code and a fixed dollar amount that the government has agreed to pay you for that service.

For example, if you're a GP and you see a patient for a visit you can submit a claim with the fee code A005 (Consultation). This fee code has a value of $77.20, which is how much OHIP would reimburse you for.

Most provinces and territories offer bonuses to the existing fee-for-service fee schedule. These enhancements include extra incentives for services like complex and chronic disease management, work in rural areas, overtime/night shifts and providing care to special-needs populations.

The OHIP schedule of benefits was created by the Ontario Ministry of Health and outlines each fee code for each speciality, along with its rules and when you can use it.

How are claims submitted?

After you choose your fee code, you'll have to actually submit a claim in order to get paid. OHIP Claims get submitted through an electronic data system known as the medical claims electronic data transfer (MC EDT) system. It's is a secure web service that allows third-party software providers to submit claims to OHIP on your behalf.

It allows:

- Secure user authentication;
- Designation to admin staff or third party agents to submit and reconcile claims on your behalf;
- Electronic reports (Claims Error Reports, Remittance Advice Reports, etc).

MC EDT is the only system used to transfers claims to the Ontario Health ministry. Chapter 2 gives you more information on how to choose a billing service, while chapter 4 outlines how to sign up/register with a billing service and general billing tips are given in Chapter 5.

Working FFS may initially sound like more work but it's the most popular payment model in Canada and it gives you more control over your earnings and your schedule. For example, you don't necessarily have to put in 8-hour days to earn the same amount you would on a full-time salary.

d) Target your CV

Studying medicine means you're CV could extend a number of pages. However, this is really inconvenient for the hiring manager and won't make your resume stand out, especially if they've got a whole stack to go through. They don't need to know everything you've done, so figure out what's the most valuable and highlight your qualifications and experience but make it short and sweet.

In fact, co-founder Haneen from locumunity warned us that not a lot of people ask for resumes and that there's such a high demand for both locum work and permanent practice that focusing too much time on your resume is unnecessary.

That being said, it doesn't hurt to be a little prepared. We talked to several recruiting agencies across Canada and they agreed that there's a lot of jobs out there but that you should still target your CV as one size does not fit all. Every resume needs to be customized to the job posting.

Best Resume tips:

- Adjust the keywords on your resume to the keywords used on the job posting so that it's immediately clear to the hiring manager you're qualified.
- Get into the habit of asking yourself, what have I done or studied that would make me useful to this employer? Then, highlight that at the top of your application or throughout your cover letter.

Best Format tips:

- Lead with your education and professional qualifications (exams and certification). Recruiters look for these elements first when reviewing potential applicants.
- Use bullet points,
- Try not to extend past 2 pages,
- Make sure the format and font all match.

- Use resume/CV templates as a guideline only. Your resume is meant to reflect you. For example, use the following headlines and fill in your information briefly in point form:
  - Objective
  - Post-Graduate Medical Education
  - Education Certification
  - Professional Qualification
  - Professional Associations and Memberships
  - Awards and Honours
  - Research/Publications/Presentations
  - Medical Leadership
  - Languages

Applying tips: Batching

This next tip comes directly from The Bagg Group, a Toronto-based agency (but it applies nationwide) that suggests breaking down your job hunt by separating different tasks into batches of the same activity.

Here's what that might look like:

Monday: Find job postings to apply to. Remember to reflect on your ideal list and save links to jobs you really think you might enjoy.

Tuesday: Spend a block of time going through all the job postings you found to weed out ones that aren't actually a good fit.

Wednesday: Tweak your resume and cover letter. Today is customizing day. Use the tips we mentioned above and go through and tweak both your resume and cover letter so it uses the same keywords as the job posting and highlights the qualifications they are looking for that you have.

Thursday: Restart the process.

Using the "batching" method helps improve focus and productivity by completing one task instead of just multitasking. A great way to treat the job hunt is to treat it as a job. Organize your days and limit the amount of time you spend on looking for and applying to jobs so you stay motivated.

e) Where to Find Jobs

There are a ton of job boards, agencies and services that will help you with your job hunt, so many in fact, that it might be overwhelming or daunting. We suggest taking a look at the resources below and save links to the sites that you find the easiest to navigate through.

It's up to you if you'd prefer to use an agency, or apply directly. The main thing to remember is to only apply for jobs that really spark your interest. Remember, wherever you end up working is going to determine a lot about your overall progress, stress and work-life balance during your first year as a doctor; so think twice before applying and a third time before accepting a job offer.

Here are some popular recruitment sites across Canada:

Nationwide

MD Work

MD Search

Dr. Careers

CASPR Public Job Board

Alberta Recruitment Sites

Doctor Jobs Alberta

Alberta Doctors Job Board

APL Jobs

BC Recruitment Sites

Health Match BC

Physician Jobs Interior Health

Divisions BC – Vancouver

Ontario Recruitment Sites

Health Force Ontario Jobs

The Bagg Group

For Locums:

Locumunity

Locums

Don't forget about…

Word of Mouth

Word of mouth and networking are still very popular ways to find out about new job opportunities. If you've enjoyed the places you've already worked or volunteered at, ask about current job opportunities or future positions. If there's nothing available go ahead and ask for a referral, recommendation or some good old-fashioned advice. Talking to people about what you're looking for and what type of work you'd love to do is a great way to start networking and getting feelers for what's out there.

LinkedIn

LinkedIn is a great job board to search both in detail or for broad results across the country. Not only can you use it for applying to specific jobs but you can follow hospitals, clinics or workplaces you'd like to work at and try to connect. There are numerous medical groups and networking resources that will help you advertise yourself. Just make sure your profile is up to date and use it actively; you never know who might stumble across it.

f) The Interview

Once you've got an interview lined up, this is mostly likely when your nerves really set in, especially if you're following tip number 1 and have made your ideal list. This means your interview is for a job you really want.

Being nervous is natural and expected, in saying that, don't fall into the impostor syndrome trap: remember that you're in **demand and you have all the qualifications to successfully complete the job**.

Besides the obvious tips like dress nice, have references available and don't be late (we're guessing you know all that), make sure you remember all the great things you've already done and all the things you still want to do. This is also your time to evaluate them and see if what they're offering matches your expectations.

If you want to make sure you're ready consider writing down what you specifically want to mention about your skills and what you really want to know about the job. A lot of people think they shouldn't bring this into the interview, but it's only going to make you look prepared and recruiters we spoke to said **it's not shunned upon**.

It's important to set the ground for what you want and not be shy to follow through with specific questions you might have. For example:

Tell them about:

- Your hospital/clinic training and what interests you about their facility/the role.
- Your leadership/teaching roles or any achievements you're most proud of.
- Your specialty and your philosophy of medicine.

Be ready to talk about:

- Parts of the job that you don't like.
- Working in teams, alone and how you react to opinions that are different than yours.

- A difficult time (such as a misdiagnosis, stressful situation, etc.)

Make sure to ask:

- Why they have an opening?
- What will your schedule look like? What is the volume of patients you can expect to see?
- What are the goals of the facility and how can your role help towards this?
- If the position is in a group, association or department, what will you be responsible for? What workload will be expected? What will the on-call responsibilities be?
- What is the decision-making process?
- Ask about compensation and what payment model you'll be on, benefits, and contract start/end times.

When speaking to recent Internal Medicine grad, Mino Mitri, he said to remember that it can be flattering to feel wanted and that sometimes the interview may go really well and it might sound very exciting **but** to remember that a lot of places need extra help so things might sound better than they are.

It's important to evaluate the position after the interview by making notes about the pros and cons of the job. If it's something you're still excited about, Mino says you should ask around to see what other doctors have to say about it or try contacting someone who works there to get their personal feedback. He says most people are honest and will be able to give you valuable information. If after that, you're still interested, send a follow up email expressing your interest and openness to meet or chat again.

g) Contract Negotiation

Once you're given a contract the next step is to go over it and see if there are any areas you might want to negotiate, like operating room time, research time, on-call expectations, etc. You are allowed to negotiate and its common practice so we highly recommend getting a lawyer to go over any contract before you sign it (check out Chapter 2 for more reasons to find a lawyer).

Every recruiter and doctor we spoke to emphasised that you're in demand, to remember to ask for what you want, and that **everything is negotiable**.

So remember, you don't need to say yes to the first job offer you get. Set your own grounds for the type of work you want and evaluate your options before rushing into anything. You have the ability to create your own schedule and positions are flexible, so ask about the things you want to see that aren't on the contract before signing.

Chapter 2

Financial Wellness – Things You Should Think About

Part of transitioning into practice is making sure you create financial wellness. In order to do this, you're going to need a team of professionals that are experts in their area to help guide and educate you through the business side of your career.

Building this team of professionals will help you cover gaps in your own expertise, make smarter decisions, protect yourself and your family, and plan for the future. Here are some of our recommendations for finding professional help at the start of your independent practice journey and some extra things to think about in order to optimize your practice:

a) Should I Incorporate?
b) Find a Lawyer
c) Find an Accountant
d) Find a Financial Planner
e) Choose a Billing Service

a) Should I Incorporate?

As you transition out of residency and into practice you might be wondering if, or why, you should incorporate. Incorporation depends on a lot of personal circumstances and various factors. In saying that, this isn't a decision you should take lightly and it isn't for everyone. If you're considering incorporating we suggest running it by a lawyer, as well as someone who has personally been through the experience.

In a nutshell though, incorporation is a separate legal "person" from yourself. This means that you'd run your medical practice through a separate name and all expenses and revenues would be generated and recorded through that name.

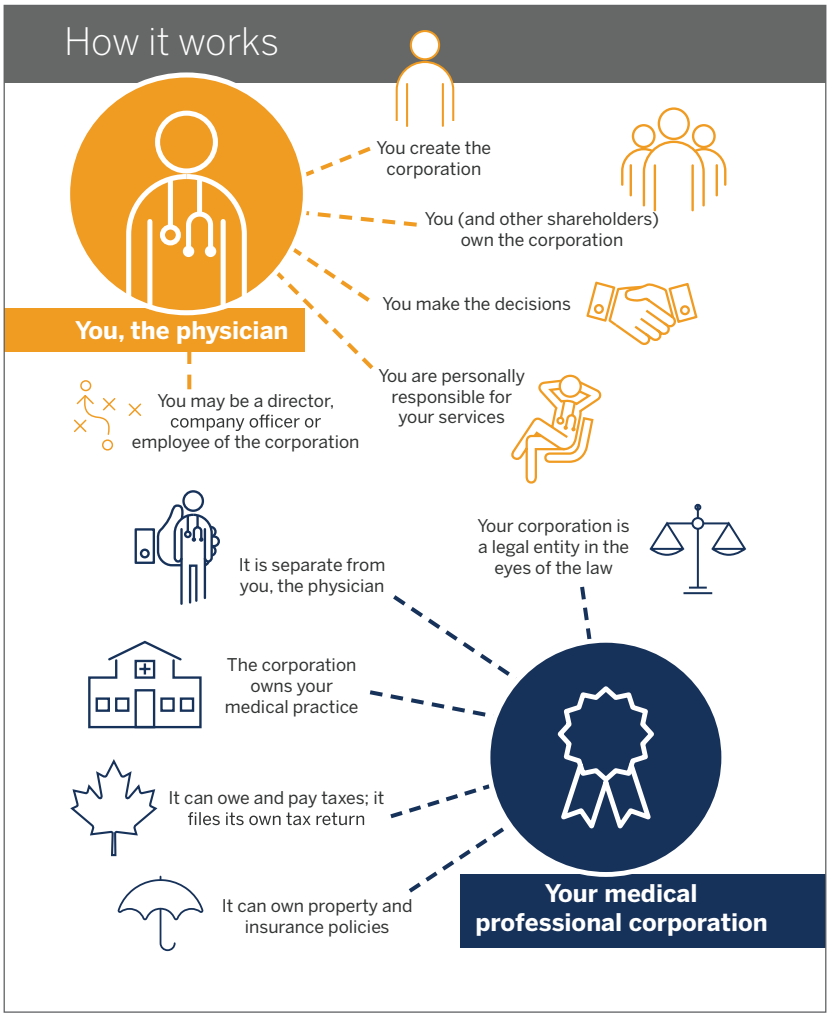
Typically, being incorporated is done for tax benefits. Two of the big tax benefits are:

- Tax Deferral – Low Corporation Tax Rate – (A corporation pays around 13.5% compared to an individual at around 45%).
- Income Splitting (the allocation of income from a high-income person (in a high tax bracket) to a low income person (in a low tax bracket). For example, this can be done by hiring a family member as a MOA or through dividends.

If you aren't incorporated then everything will be run through your personal name and you'll be liable for everything (furniture, equipment, debt, etc.). The disadvantages of incorporating are the initial costs to get started and the lengthy paperwork, not only at the beginning, but all year round. You'll have more legal, accounting and tax filing fees.

Note: in medicine, being incorporated only affects assets but you would still be personally responsible for any malpractice or misconduct.

Here's a great comparison from MD Management, of two different ways you can incorporate:



General Steps to incorporate in Ontario:

- Find a lawyer to submit and legalize your application – this is mandatory per the College requirements and you cannot be incorporated without the help of a lawyer (est. cost $3000-$4000).
- Pick a corporate name – your lawyer will make sure no one else is incorporated under that name through the Corporate Registry. This can take up to 10-15 business days. You can usually pay more to have a 24-hour turnaround.
- Have your lawyer submit the "Certificate of Authorization for Corporation to Practice Medicine" and any other pending incorporation documents to the College of Physicians and Surgeons for a Medical Corporation in Ontario (CPSO). This can take anywhere from 4 weeks to 6 months.

If you are leaning towards incorporating, reach out to a lawyer for advice and a financial planner. A lawyer is mandatory during the application process and a financial planner will help you decide if it's the best time to incorporate. Typically, the best time to incorporate is when the **reduced taxes would be greater than the additional cost** of being incorporated.

b) Find a Lawyer

Before you begin working, you'll need to set up an employment contract, and navigating through this is much easier with professional help. Remember from Chapter 1, it's really important to have a lawyer go over your contract **with you** before signing it.

A good lawyer can review agreements, **help you negotiate better**, and make sure you're protected and staying within the limits of the law. Many practices have established legal representation, but it's still a good idea to find a lawyer to support you individually, whether that means making sure you're staying compliant, protecting your from liability, or helping you review employment and insurance contracts.

Physician employment and working environments are highly regulated and must follow specific legal requirements; general lawyers likely won't be able to help you the way a health lawyer will. Malpractice law, in particular, is highly specialized and complex.

In short, you'll save time and money and reduce your risk by finding someone who specializes in health law, and preferably someone with experience with your specific specialty or practice environment. It's best to ask around and get recommendations from doctors or colleagues in your area who have someone they can personally recommend to you.

c) Find an Accountant

An accountant can perform a variety of services to help you prepare for independent practice financially.

The most obvious area where an accountant can help you is with taxes. A good accountant will help you reduce your tax burden and track tax-deductible activities from conference travel to ongoing education, office supplies, lab equipment, scrubs, professional dues, and other potential credits and deductions.

Like with legal support, choosing a medical accountant with specific expertise in helping physicians will also help you stay on top of changing legal obligations and the financial regulations which affects physicians.

They can also help you strategize and decide whether self-employment or incorporated practice structure would be most advantageous for you.

Once you find an accountant, find out how they would like you to track your expenses and income (some use a specific system while others just prefer spreadsheets). Either way, you should get into the habit of tracking everything and keeping your receipts so that tax season is not a nightmare. This will help your financial wellness because you'll be able to see exactly how much money is coming in and how much money is going out.

d) Find a Financial Planner

Transitioning to practice also means learning to manage your income and future money differently. A financial planner will help you manage debt, invest wisely, and keep track of your cash flow.

They can also help you save for large purchases and future goals like home ownership or your kids' education and will help you identify and plan for your broader retirement and financial goals.

Financial planners often also assist with estate planning, life insurance, and other insurance contracts to ensure you and your family are protected.

Both in the short and long term, a good financial planner sets you up to meet your financial goals.

e) Choose a Billing Service

If you're working Fee For Service (FFS) you're going to need to choose a billing service to submit claims for you (re-read chapter one to see exactly how claim submission works).

When choosing a billing service make sure it:

• Supports New Grads

Billing isn't taught in medical school and there is a bit of a learning curve so make sure you don't just choose a software but a service too. You want to be able to ask questions and get help whenever you need it.

• Offers Mobile Billing

Being able to submit claims to OHIP from your phone will not only save you a lot of time but make it easi

er to incorporate it into your patient care. For example, after you see a patient you can pull out your phone and submit a claim immediately. Forget about pen & paper, index cards and clunky software, billing on your phone makes the process fast and easy.

• Has Rejection Management

What's a rejection? In certain circumstances, OHIP may reject, reduce or refuse payment on a claim you submitted. Unfortunately, there is no single answer to why claims get rejected. Sometimes it's because you selected the wrong fee code, other times it might be because the limit for the number of units on that fee code has been reached; and the list goes on.

Which is why, as a new grad, you can expect rejections. However, the worst thing you can do is to waste time trying to figure out why your claim was rejected and how to fix it. We suggest making sure your **billing service offers rejections management**. For example, at Dr. Bill, our billing agents will automatically go through and fix/resubmit your rejections. We've actually been able to recover up to 96% of all rejections for our clients!

Out-Sourcing

Some practitioners outsource their billing to a third-party service that manually processes their claims. The downside is that you lose the ability to directly see what's going on with their billings. Without 24/7 live reporting, your income becomes a black box. What's the status on my recent claims? Is there an issue with my patient's information? What claims are being rejected? What kind of premiums are available? These questions will, unfortunately, go unanswered.

In summary, choose a billing service that is easy to use and offers support. Remember, you're looking for a service not only a software. For more on billing, Chapter 4 outlines how to register with a billing service to submit claims and Chapter 5 outlines some basic billing guidelines.

Find Professional Support

It's almost always also worth asking around to get advice and practical tips from others who were recently in your situation. Referrals and networking are often the best way to locate help.

You can also try simple Google searches to look for reputable firms or individual professionals with good reviews and solid track records in the field.

Licensing agencies and professional organizations also often have databases of professionals organized by region. For example, the Canadian Bar Association (CBA) has a search feature which you can use to find a licensed health lawyer and filter by specialty and region.

Finding additional support is often overlooked, even though it's crucial during the first few years of independent practice. Taking the time to make sure you're in good hands will lead to fewer headaches, less time wasted and more money in your pocket.

Chapter 3

Register for Your Independent Practice License

Before you start your independent practice, you need to make sure your fully licensed to legally practice unsupervised medicine in Canada. This step is very similar within all Canadian provinces but it does change slightly so make sure you follow the requirements based on province you'll be working in.

Generally, it's best to apply at least 3 months before you start working in order to make sure you receive your license in time. For example, for a July 1st start date submit your application on May 6th.

How to Apply for Your Independent Practice Licence

Having your independent practice license is what allows you to diagnose and treat patients, order investigations, obtain and write prescriptions and essentially practice unsupervised.

The license is a 5-digit number that registers you with the College of Physicians and Surgeons of Ontario (CPSO).

You need to make sure you meet the following (non-negotiable) requirements:

- A medical degree from an accredited Canadian or US medical school (or from an acceptable international medical school).
- Successful completion of Parts 1 and 2 of the Medical Council of Canada Qualifying Examination (MCCQE) or an acceptable alternative examination.
- Certification by examination by either the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC).
- Completion of one year of postgraduate training or active medical practice in Canada, or completion of a full clinical clerkship at an accredited Canadian medical school.
- Canadian Citizenship or permanent resident status.

Most university programs will help you with this step, but many doctors (especially those switching between provinces) find it complicated. Therefore, if you'd like to double check you'll got everything in line, make sure you've completed ALL the steps below (in the order that they appear).

Step 1: Create a 'PhysiciansApply' Account

Create an account with physiciansapply and make sure you add your personal contact information.

Step 2: Request Access

Once you have an account, email inquiries@cpso.on.ca to request access to the application. In the email you'll need to attach a 'review of qualifications' form along with your CV.

Important Reminder: In order to receive an invitation, you need to have a physiciansapply account and you need to have at least 1 document uploaded (so that the CPSO can view your account information and add the application). When you're finished your application it will be sent electronically to the CPSO.

Step 3: Upload Supporting Documents + Apply

Your information will be reviewed by the CPSO staff (generally within 3 business days) in order to determine if you're eligible to apply. If you are eligible, you'll receive an email from the College granting you access to the online application (the application will show up in your physiciansapply account). The email will include more details about timelines, fees and supporting documents.

Typical documents include:

- Complete an online orientation (instructions will be given in the email)
- Medical Education
- 3 Notarized ID documents (passport, driver's licence, medical degree)
- Resume
- Three reference letters (one has to be from your site director)
- Copy of medical degree

Step 4

Once you get approval you'll receive an acceptance email detailing licensure fees and how you can make payments. Approval takes anywhere from 4-7 weeks.

Chapter 4
Registration

You've got your Independent practice license and a job offer, yeah! But, now what? Unsure where to start with the confusing and overwhelming registration process? Worry no more, this chapter outlines everything you legally need to have in order to start working as a doctor in Ontario.

This is of course, by far, the most tedious part of your transition but you cannot legally practice medicine without being properly certified and enrolled in certain programs.

Follow this step-by-step guide with detailed information on what you need and how to enroll. You're required to:

a) Join the Canadian Medical Protective Association *(Mandatory)*

b) Apply for an OHIP Billing Number

c) Go Secure & MC EDT Account

d) Designate a Billing Service

e) Register for Health Card Validation (HCV) services

f) Register with WSIB

g) Apply for Hospital Privileges

h) Join the Ontario Medical Association (OMA)

NOTE: You need to have your Independent Practice License in order to complete steps *a)* through *f).*

Registration for steps *b)* through *e)* requires that you already have a job lined up as you'll need to use the business address when applying.

a) Join the Canadian Medical Protective Association *(Mandatory)*

Once you're licensed with the CPSO, you must apply for medical liability protection. This is a mandatory requirement of Ontario and must be completed prior to granting clinical privileges.

You can get medical insurance by joining the Canadian Medical Protective Association (CMPA). They offer various membership options and are the most commonly used medical insurance in Canada. It is possible to get insurance from a private medical insurance company, although this will likely take much longer and cost more.

How to Get Medical Liability Protection through the CMPA

In order to get medical liability protection through CMPA you need to request membership by completing and submitting a Membership Application.

Complete the online application here: Begin Application

You can also print the application and send it by fax (613-725-1300) or send it by email to inquiries@cmpa.org.

An FYI: Upon receiving your application you will need to provide:

- Licensing/Registration number and effective date if available
- Banking information from a Canadian bank account (cannot be a line of credit or a credit card).
- Addresses, telephone and fax numbers at work and home in Canada (if applicable)
- Details of training program or short description of type of work (if applicable)
- Information on past insurers or organization including periods covered/ protected (if applicable)
- Details of past medical-legal outcomes (if applicable
- MINC (Medical Identification Number of Canada)

General Costs

Costs depend on your specialty and the scope of work you'll be doing. However, when you're transitioning from a postgraduate training program to practice, you can pay the CMPA membership fee for the first 6 months of full practice in 2 installments as described in the Transitioning to Practice payment option.

TIP: Check if your Speciality qualifies for the Medical Liability Protection Reimbursement Program. If so, contact the ministry of health at 1-888-805-9877 or email them at: MLPReimbursement@ontario.ca for more information on how to apply.

b) Apply for an OHIP Billing Number

Once you have your CPSO number you need to register for an OHIP billing number.

In our experience, new grads usually think that their CPSO number is their billing number. These numbers are separate and you cannot submit claims for reimbursement without having both of them.

Getting your OHIP billing number typically takes anywhere from 4-6 weeks, so make sure you do this as soon as you get your CPSO number and have a job offer.

Registration Steps

- Complete and sign the Application for OHIP Billing Number for Health Professionals form
- Attach a copy of a blank cheque with "VOID" written on it (in order to set up direct deposit)
- Attach a copy of a valid Certificate of Registration with a governing body

There are three ways to submit your application, by email, fax or snail mail.

By email: Scan originals and send by email:
MOH-L-SSU-Registration@msgov.gov.on.ca

By fax: Fax originals to: 613-545-5848

By mail:
Ministry of Health and Long-Term Care
Claims Services Branch
Provider Registry Unit
P.O. Box 68
Kingston, ON K7L 5T3

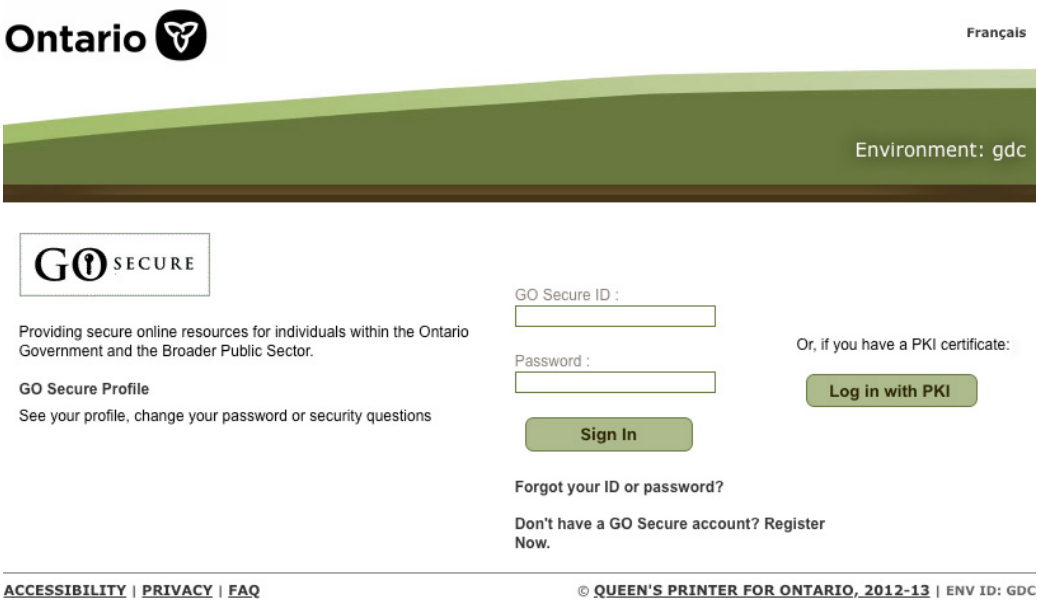
When your application is processed you'll receive a letter from the Ministry of Health that contains your OHIP billing number and details on the next steps – registering for GO Secure, Medical Claims Electronic Data Transfer (MC EDT) and Health Card Validation (HCV) services.

c) Set Up Your "Go Secure" & MC EDT Account

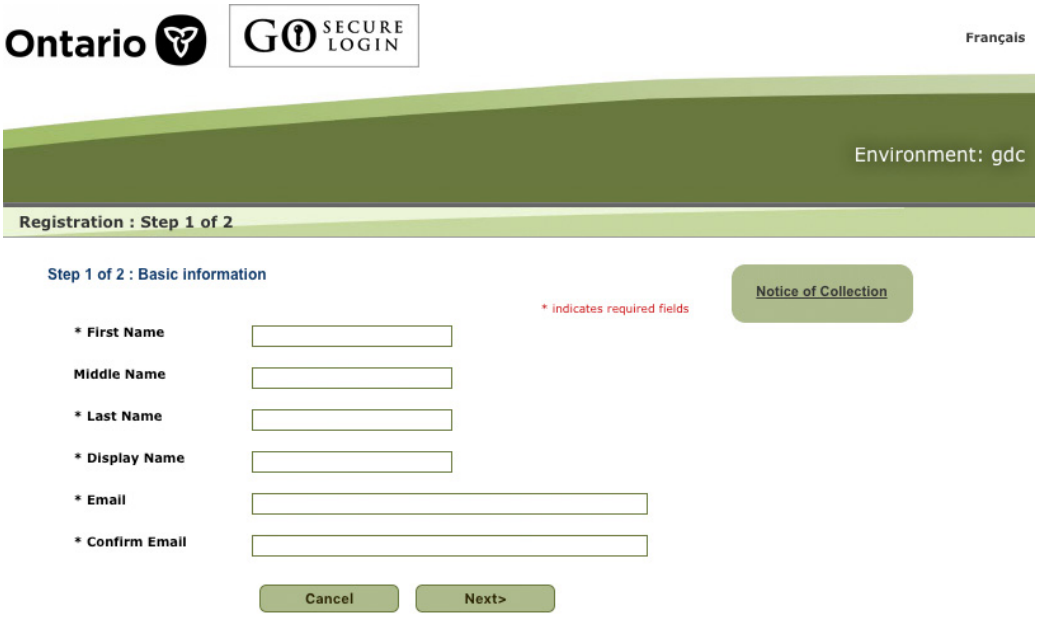
Once you have your letter from OHIP and you're ready to set up your GO Secure account. It is the secure system Ontario uses to access Ontario Public Services online and it's where **you will have access** to the Medical Claims Electronic Data Transfer (MC EDT) system that allows you to share data with the Ministry. **You cannot bill in Ontario with setting up these 2 accounts**.

How to Set Go Secure up:

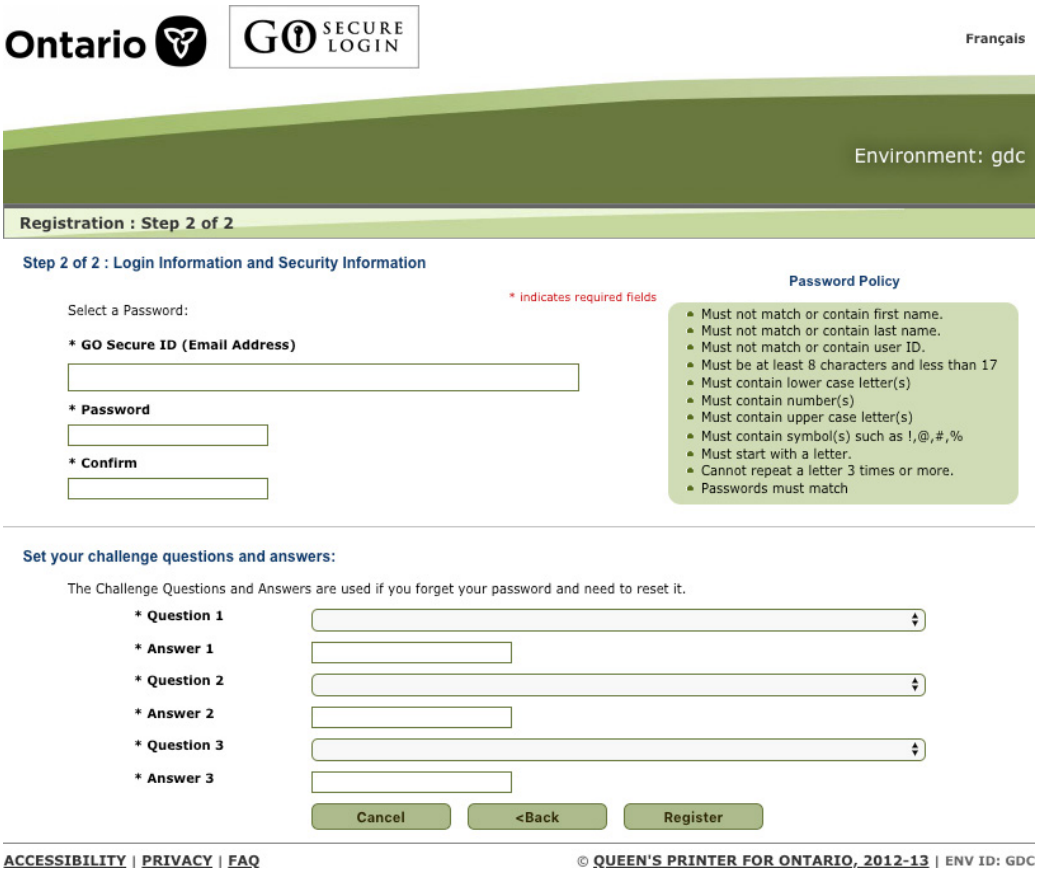
i) Go to the GO Secure login page www.edt.health.gov.on.ca and click 'Don't have a Go Secure account? Register Now'.



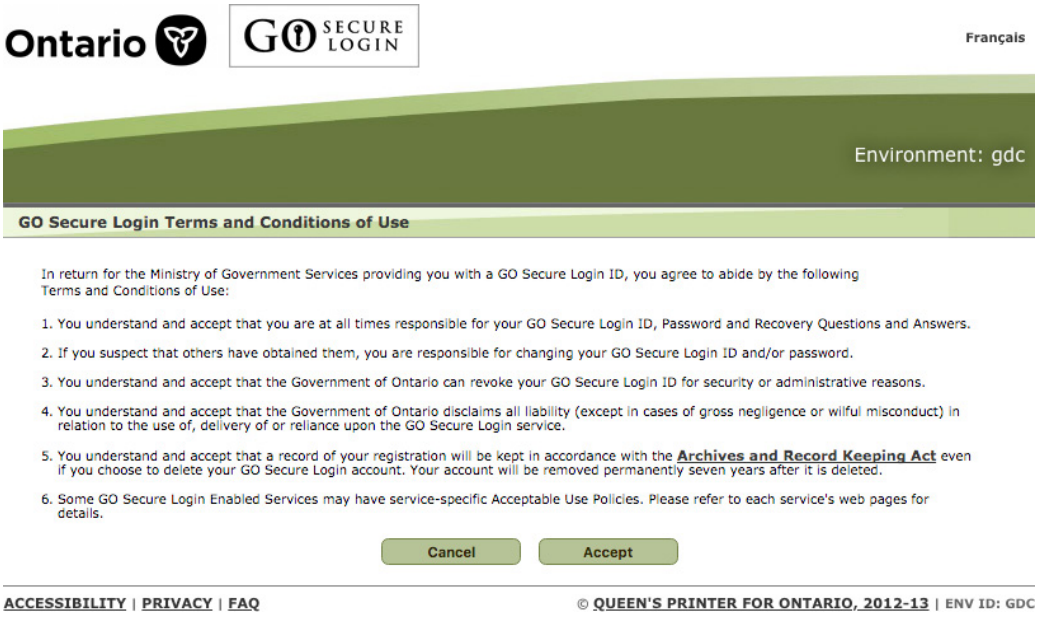
ii) Add Your Personal Details



iii) Create Your Password



iv) Accept the Terms & Conditions

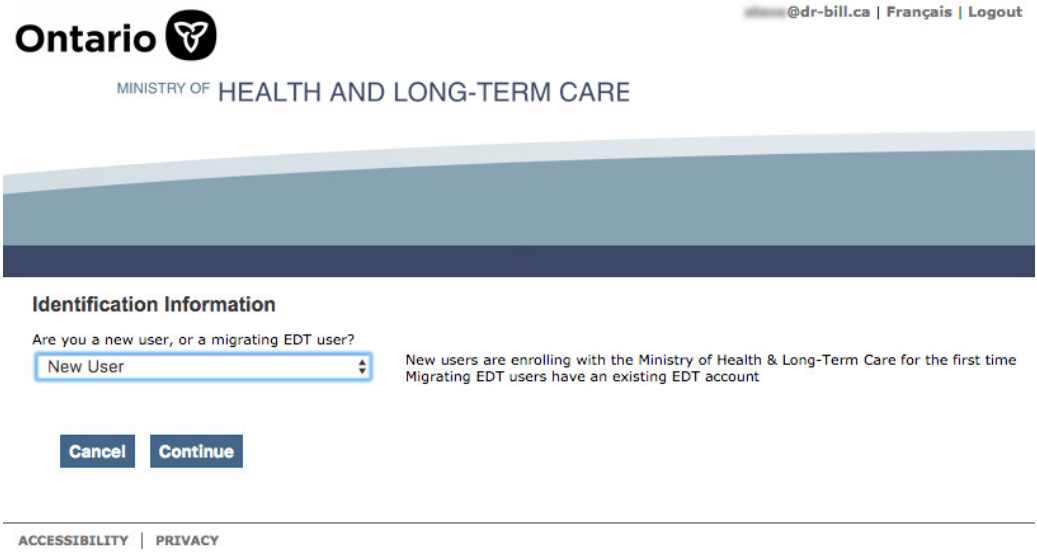


v) Email Confirmation

At this point an email is sent to you. Open the email from Go Secure and click on the link to confirm your email address. You'll be asked to log-in to your Go Secure account. Enter the details you created in the previous step. You'll be asked to validate your email address. Click the link titled 'here'.

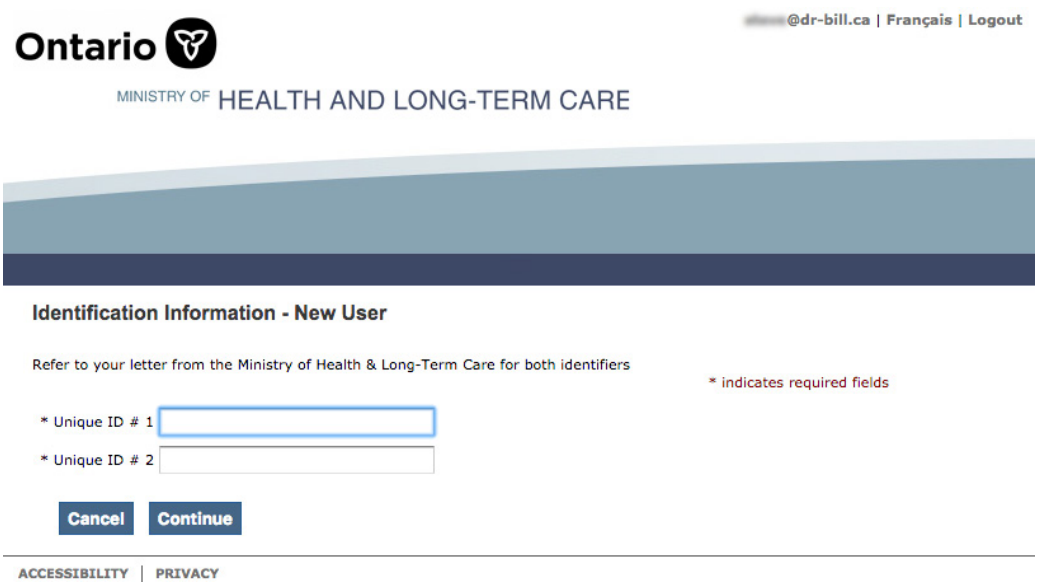
vi) Continue Account Setup for MC EDT

If haven't ever set up a MC EDT account before, leave the selection as 'New User'. If you're migrating from the old MC EDT system, select 'Migrating EDT User'. then continue. In most cases you'll be selecting 'New User'. If you aren't sure, contact us here and we help you.



vii) Enter Your Unique Identifiers

These are contained in the letter that was mailed to you by the Ministry of Health.



viii) Acceptable Use Policy

Click the 'Accept' button to accept the terms of use for the system. Your registration is complete!

d) Designate a Billing Service

Now that you have your OHIP billing number and are registered with Go Secure and MC EDT, you need to connect it a billing software that can upload and submit claims to OHIP's electronic systems. This is a two-step-process:

(if you're using another billing system the steps will be the same, just substitute Dr. Bill for their name)

Part 1: Add Dr. Bill as a Designee on your Go Secure Account

Follow along with screenshots steps *i)* thorugh *iv)*.

Part 2: Authorize Dr. Bill to submit claims on your behalf

Follow along with screenshots steps *v)* and *vi)*.

e) Register for Health Card Validation (HCV) services

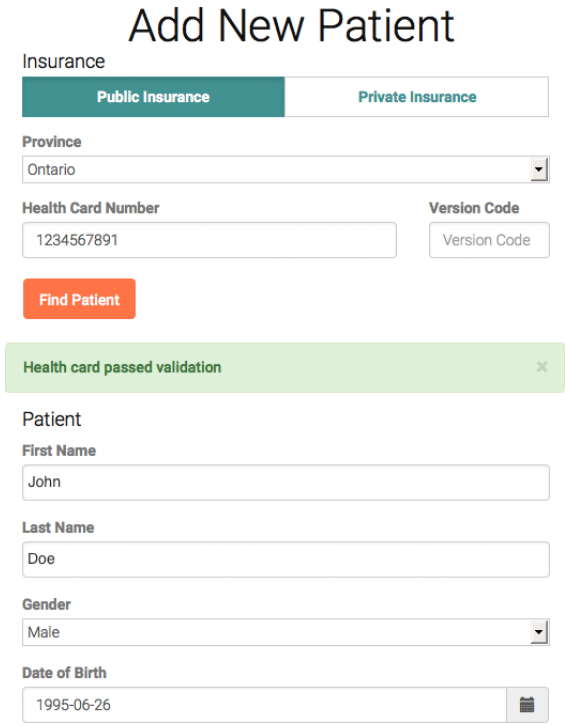
The Heath Card Validation service is a free healthcare validation system provided by the Ministry of Health and Long-Term Care (MOHLTC) that allows you to

automatically check if a patient's health card number is valid.

You are enrolled in HCV when you receive your OHIP Billing number. Enrolment simply means you're given a unique PIN which you can use to call their 1-800 line to verify if your patient's health card is valid. You pin is included in the letter that was sent with instructions on Go Secure and MC EDT registration.

Realistically though, calling a toll-free number every time you see a patient is very time consuming, which is why they integrate with third party software programs. For example, if you're billing with Dr. Bill **we run an eligibility check on each patient you add**. If they're not insured we let you know with an Alert.

We've even taken this a step further so that when you enter a valid Health Card Number and version code, the rest of a patient's demographic information will be automatically filled out.



f) Register with WSIB

The next step is to join The Workplace Safety and Insurance Board (WSIB) in case you treat a patient who has been hurt at work.

How do I bill when I treat an injured/ill worker?

You will get paid for both the insured insurances you provide and for reports, there are two different ways to submit claims:

1. **Insured Services:** Submit a claim to OHIP like you normally would **except** on the claim you'll indicate "WCB." OHIP will then pay you for your services and bill WSIB accordingly.

If you're using Dr. Bill, select WCB at the top of the claim instead of OHIP like this:

2. **WSIB Forms:** When you fill out a form, you bill WSIB. You need to upload these claims directly to WSIB through the online portal Telus Health. These claims have different fee codes than OHIP, which outline **which form you're using**.

WSIB Physician Fee Schedule

How to register:

In order to submit both WCB claims to OHIP and WSIB forms to Telus Health you will need to register with Telus Health here and follow the online instructions.

Whether you're submitting claims through OHIP or you're uploading forms to their online portal, **you need to register first.**

g) Apply for Hospital Privileges

If you are going to be working in a hospital either full time or occasionally, you will need to apply for privileges in accordance with the by-laws of the individual hospital. These bylaws and rules were established to ensure that Ontario hospitals

maintains a high level of care when it comes to the qualifications and competency of its healthcare providers. Having privileges also means you have legal rights to use the hospitals resources and its facility.

Applications for hospital privileges are done directly through the hospital. It's best to call the hospital where you intend to work and ask them about their application process. Typically, a hospital administrator will assist you with the application. Once you apply it will be reviewed by the hospital and on approval, you will have privileges to practise at that hospital.

In general, you'll need to apply with photocopies of the following credentials:

- medical licenses,
- malpractice certificates,
- immunization records,
- CV,
- Certificate of Good Standing
- Certificate of Adult Criminal Convictions

h) Join the Ontario Medical Association (OMA)

The Ontario Medical Association (OMA) represents the political, clinical and economic interests of the province's medical profession. They are the official voice of medical professionals in Ontario and are a division of the Canadian Medical Association.

Membership is mandatory for physicians practicing in Ontario, and you'll receive a discount as a first-year physician. Benefits include practice advice, special rates and discounts.

First year Membership Fee: $670 (or $57.08 monthly payments)

Apply Online Here

Find out more about prices here: 2019 Fee Category Schedule

In Closing...

The registration process at first glance seems daunting as it evolves a lot of different steps to make sure you're completely certified and set up to practice medicine. We recommend using your checklist and ticking off which sections you've already applied for. In addition, if you have questions or would like to clarify anything, our team can help guide you through the licensing and registration procedures.

Chapter 5
Plan Ahead

Now that you've got the job, signed a contract and have completely finished all registration paperwork, it's time to focus on planning. Taking the time to plan and properly prepare yourself for what your daily admin tasks will look like is extremely important in creating a productive and stress-free routine.

For example, Dr. Arlo Green, a GP physician, told us that the biggest challenge as a new doctor is **time management**. As an independent new physician, it is now your responsibility to follow up on all lab work, faxes from pharmacies, billing, calls from community supports and nurses, etc. etc.

So, before you even start your new position, take the time to learn what systems you'll be using and how best to use them. Getting all your IT ducks in a row (logins, passwords, etc.) will help you dive into your practice with more confidence and help put your initial focus on your patients instead of trying to figure out how to operate whatever systems you're using. There's nothing worse than being frustrated with paperwork when you have a full workload.

The best way to prepare is to familiarize yourself with the two most important systems you'll be using for daily admin tasks:

a) Your EMR System

b) Your Billing System

a) Understanding Your EMR System

Using an EMR system is one of the best ways to streamline your daily tasks and keep track of patient care. Depending on where you're working, let's say at a hospital or outpatient care, most likely there's already an EMR system in place. If you're starting your own practice though you might have to decide which one to implement.

Either way, whether you're learning a new EMR system or trying to figure out which one to use, it's not the easiest task. Most systems are complex and offer a variety of different services, which is why we recommend getting familiar with what system you're going to be using before you actually use it.

Some good questions to ask beforehand are:

- What EMR is used?
- Who is the "go-to" person for questions about the EMR in the clinic/in the community?
- Is there a user-group for the EMR in the community?
- Are there built-in forms in the EMR? If so, which ones?
- Are there templates/macros? (for physicals etc.)

Once you know what EMR you're going to be using make sure you:

- Set-up your login credentials
- Walk through the EMR yourself and identify which areas you'll likely use on a daily basis (you won't need to learn every feature of the EMR)
- Then, followed along with a free demo/tutorial (usually offered on their direct website or by typing in the company's name on YouTube).

The idea here is to just get familiar with it before your first day so that you're not stressing over something that could have been easily avoided.

If you are already familiar with the system then we suggest taking this a step further by identifying which features it has that can help you be more productive. For example, a lot of the doctors we've surveyed said setting up your own EMR templates are a great way to stay more organized and make your work more productive by grouping together day to day medical conditions or common scenarios.

Specifically, if you're working as a locum, GP Meghan Ho suggests "having a system to keep all this information organized is essential. I keep notes on my phone for every site I work at with lists of codes, phone extensions, etc. Evernote is also a useful app. There's nothing worse than starting your day not being able to access the EMR!

b) Learn How to Bill

As mentioned in Chapter 1, if you're working Fee for Service, then you're going to have to bill the government in order to get reimbursed for your services. Essentially, you're a small business and will be submitting claims to the Ontario Health Insurance Plan (OHIP).

Billing can get complicated and confusing fast, so we highly recommend setting aside some time to learn the basics before you start. **If there was one tip we hope you take away from this guide, learning how to bill is definitely the one!**

Research by the Canadian Medical Association shows that the average physician fails to bill for at least 5% of the services they provide. This translates to roughly $24,000 per year (or $480,000 over 20 years).

In our experience, recent grads who have taken the time to try and learn how to bill before jumping into it not only feel more equipped but they feel like they're actually being properly paid for the work they're doing. What an awarding feeling right?

If you're following along with this guide you should already have in mind what billing service you'd like to go with (remember, mobile billing and rejection management is key), but now is the time to learn a bit about how to add claims and how to use your billing system to your advantage.

Therefore, in order to help you enter the world of billing on a happier note, we suggest making sure you:

- Understand the Schedule of Benefits and How to use it
- Know OHIP's Payment Schedule
- Attend Billing Webinars
- Learn the Ropes with an OHIP Expert
- Follow These Quick Billing Takeaways

Understand the Schedule of Benefits and How to Use it

What is the Schedule of Benefits? A schedule of benefits is a list of various medical services that doctors are able to bill the government for. Each medical service is given a specific code and a fixed dollar amount that the government has agreed to pay the doctor for that service.

The Ontario schedule of benefits was created by the Ontario Ministry of Health and outlines each fee code for each speciality, along with its rules and when to use it. It's a PDF document and is nearly **740 pages long**.

Unfortunately, being such a huge document (as it lists around 6,000 services various specialities) this makes searching for actual diagnostic codes extremely time-consuming, not to mention that the actual descriptions are, you've guessed it, not the easiest to read.

To make things easier we suggest searching our online version of **OHIP's Schedule of Benefits**. You can search by fee code, speciality or by keyword. It's best if you can get familiar with what fee codes you might be using so that you're not wasting time at the end of a long day trying to find the code for something that doesn't even exist.

Search below by **Speciality, Surgical Procedures** or **Diagnostic & Therapeutic Procedures**

SPECIALITY

- Anaesthesia
- Cardiac surgery
- Cardiology
- Clinical immunology
- Community medicine
- Dermatology
- Diagnostic radiology
- Emergency medicine
- Endocrinology & metabolism
- Family practice & practice in general
- Gastroenterology
- General surgery
- General thoracic surgery
- Genetics
- Geriatrics
- Haematology
- Infectious disease
- Internal and occupational medicine
- Laboratory medicine
- Medical oncology
- Nephrology
- Neurology
- Neurosurgery
- Nuclear medicine
- Obstetrics and gynaecology
- Ophthalmology
- Orthopaedic surgery
- Otolaryngology
- Paediatrics
- Physical medicine & rehabilitation
- Plastic surgery
- Psychiatry
- Radiation oncology
- Respiratory disease
- Rheumatology
- Urology
- Vascular surgery

SURGICAL PROCEDURES

- Integumentary system surgical procedures
- Musculoskeletal system surgical procedures
- Respiratory surgical procedures
- Cardiovascular surgical procedures
- Haematic and lymphatic surgical procedures
- Digestive system surgical procedures
- Urogenital and urinary surgical procedures
- Male genital surgical procedures
- Female genital surgical procedures
- Endocrine surgical procedures
- Neurological surgical procedures
- Ocular and aural surgical procedures
- Spinal surgical procedures

DIAGNOSTIC & THERAPEUTIC PROCEDURES

- Allergy
- Anaesthesia
- Cardiovascular
- Electrocardiography (ecg)
- Non-invasive cardiography
- Echocardiography
- Critical care
- Dermatology
- Dialysis
- Endocrinology and metabolism
- Gastroenterology
- Gynaecology
- Haematology
- Home and self care services
- Injections or infusions
- Laboratory medicine
- Nephrology
- Nerve blocks for acute pain management
- Nerve blocks – interventional pain injections
- Nerve blocks – peripheral/other inections
- Neurology
- Neurosurgery
- Ophthalmology
- Otolaryngology
- Palliative care
- Physical medicine
- Psychiatry and respiratory disease
- Sleep studies
- Urology

OHIP Payment Schedule

OHIP claim submissions run on a monthly cycle. All claims you submit until the 18th of each month will be processed for payment by the 15th of the next month.

(To make sure that you are paid on time, submit your claims before 5pm EST)

Use this downloadable calendar to make sure you never miss a payment date.

Attend OHIP Billing Webinars + Online Tutorials

A great way to learn billing is by attending billing webinars or watching OHIP tutorials. There's a variety of different webinars out there, some target basic billing scenarios while others look at how to maximize claims. Either way, we strongly suggest signing up for something as it's a great way to ask questions and get started in billing:

OHIP Billing Tutorial

Walks you through:

- Billing Cycle
- Getting Started (LabelSnap)
- OHIP Service Code Breakdown
- Keys to Successful Billing
- Schedule of Benefits
- Common Billing Codes
- Hospital Visits and MRP
- Things to Remember...

Schedule a Call with an OHIP Expert

Whether or not you decide to use Dr. Bill as your billing service, every billing service should have an agent available to help you get started. For example, once you've created an account with us you're encouraged to schedule a call with one of our OHIP billing experts. They will be able to give you some clear tips specific to your specialty and walk your through adding a patient, a claim and show you some of our key features that will make billing faster and easier.

Billing doesn't have to be hard, learning a bit before you even start working will help you feel a whole lot less overwhelmed and will make your transition into practice that much smoother. If you'd like to schedule your call or have general questions before signing up, contact our OHIP experts here.

General Billing Tips

Here are a few tips to remember as you start your billing journey:

Don't Forget to Add Premiums

Premiums act like a bonus on top of your regular fee codes. They were first introduced as a way to compensate those doctors who have a specific specialty or subspecialty. However, over time, they've evolved to incorporate working overtime, on holidays, in remote areas and in some cases working with complex care.

Make sure you utilize premiums and other incentives – we always see doctors missing out on these easy extras. Here's a list of some of the top premiums:

OHIP Special Visit Premiums – These can be applied for with non-elective (urgent and emergent) consults and assessments.

OHIP Chronic Disease Premium – This is for those who work with chronic disease, as it typically requires more follow ups. It's a percentage-based premium (which adds an extra 50% onto the fee code) and is payable on certain out-patient assessments.

Always Bill for Telephone Calls and Consultations

We've noticed that most doctors don't bill for telephone follow ups or consultations. The problem is that these can quickly add up to a pretty penny. And by not billing for them, you're essentially losing money. As a new physician, you need to know that there's a ton of activities you can bill for when it comes to managing a patient's care.

Some Examples:

Physician to Physician Telephone Consultations
(K730, K731, K734, K735)

Criticall Telephone Consultation
(K732 , K733, K736, K737)

Comprehensive Consultation
(K001)

Eliminate Submission Errors

Submission errors are claims that have not passed the pre-edit approval process by OHIP (which means you won't get paid for them)!

Common Scenarios to Watch Out For:

- Wrong use of SLI code
- There's a fee code conflict – so assessment is required
- Invalid use of Premiums
- No Referring Physician
- Patient doesn't have insurance

If you do get a submission error, it will be accompanied by a code, **find out what it means here**.

Create Your Own Cheat Sheet

If there's a fee code you know your speciality always uses, write it down. If there's premiums you learned about in a webinar, write them down. Get into the habit of creating your own cheat sheets that will help you maximize your billing. We suggest setting something up like this:

Fee Code	When to Use:	Premiums/ Modifiers	$ Amount

"Take 1/2 an hour and sit down and read the billing guide for your specialty! You can learn to bill from others, but ultimately you are responsible for your own billings if you get audited and should know why/what you're billing."

Meghan Ho (Internal Medicine)

Specific Dr. Bill Tips

How to Add a Patient

Try The Label Snap Feature!

How to Add a Claim

Billing on the Dr. Bill app will automatically pop up any eligible premiums, or modifiers, so you won't need to remember any of these.

Creating a List of Favourites

Essentially this is a way you can create your own cheat sheet on the go!

How to Navigate your Claims on the Web App

Track your payments easily

Quick Walk-Through of the App

Check out how the App layout and some simple features!

The Takeaway...

You don't need to spend weeks learning how to bill, you will learn as you go and depending on your billing service you'll have support along the way too, so the really important thing to try and remember is to **understand how it works and how to start**. Just by reading this chapter you should already have a little insight into the world of billing.

Chapter 6

How to Be Productive Daily: Best Practices

After making it through the relentless studying required to get through med school – you likely already have good time management skills. Still, entering a practice setting is a different beast entirely.

Doctors have a notoriously heavy workload, and this is especially true as you get started, even at the best-organized practices. It can feel like you're spending as much time on managing your practice as you are treating patients.

Productivity as a new physician often means both optimizing your daily activities ***and*** learning to create a balance between your professional and personal life. Drawing from a wide range of resources, from electronic tools through crowd-sourced knowledge and lifelong learning, this chapter outlines simple ways to create a productive and fulfilling practice right from the get go.

Find out why you should:

a) Use Electronics to Your Advantage

Electronic tools make your work easier and faster. It's often possible to automate daily tasks with digital tools.

There are also apps available which can help streamline patient communications, referencing and research, patient management, diagnostics, general time management, and medical education.

Here are some example areas where technology can be helpful:

Diagnostic Support:

Rare conditions often require highly specialized expertise – reduce your research time and improve patient care by reaching out over the internet through a physician networking group or other online resource to crowdsource answers.

Replacing PubMed with "the Netflix of medical journal apps" also makes staying up to date on the latest information easier. There are numerous reference apps, including Medscape, Epocrates, Lexicomp, UpToDate, and more.

The best reference for you will vary by specialty, but they all make it possible to extensive medical databases from your phone, on the go, whenever you need it.

Digitizing Your Calendars:

Keep track of daily obligations and optimize your schedule with an online scheduling app like **Evernote**. Looking at your schedule visually will helps make it obvious when you need to delegate or reprioritize.

Taking Prescriptions Digital:

E-prescribing is more accurate and more cost-effective than paper prescription. When possible, online prescribing apps and software provide a faster alternative to traditional prescriptions. You can also use them to build a list of common medications to streamline refill processes.

Every practice has a different flow and different bottlenecks, but leaning on electronic tools – provided you know how to use them and incorporate them deliberately into your daily schedule – can shave key minutes or even hours off of your daily responsibilities.

b) Finish Paperwork Daily

Completing paperwork on the same day, while everything is still fresh on your mind, is a critical step in increasing productivity. Doctors recommend completing lab reviews, billing and callbacks on the same day; otherwise, they tend to pile up quickly.

Dr. Eric Cadesky explains, *"Trying to complete tasks the first time you see them, whether that is signing off on a result or sending a lawyer's request for processing, is important. Some tasks can't be won in the moment, such as calling a patient during reasonable waking hours, but try to complete tasks when they have your attention."*

If you tend to run behind, you can book an extra empty slot every one or two hours to catch up. Another good tip from Dr. Annemarie Falk is to try and figure out your natural peak periods of productivity and energy in the day and then schedule accordingly. For example, schedule patient visits or tackle billing and lab reviews when your energy is high, then take a 5-minute break or grab a snack when your energy is lower.

More Daily Paperwork tips from Doctors themselves:

Chart as You Go and Use Templates:

Dr. Kasandra Harriman recommends that you *"chart as you go, instead of leaving it for the end of the day" in order to save time and reduce the burden of getting all your paperwork done at once. To make the process less onerous, you can also "use typing templates to speed up charting and ensure physical exams and growth and development check-ups are thorough."*

Dr. Anna Nazif has a similar system: *"[I] use a billing sheet that has [the] Patient's name, PHN, and birthdate on it. I record their admitting diagnosis. Then I record the time I see the patient, discuss them with the team, family meetings, and phone calls. Not only does doing this as it happens mean it's more accurate, I remember to actually bill for my time and it saves me time trying to remember what I did during my day,"* which *"saves time and will make you more money!"* She also uses identifying patient labels *"as I go through my day, so I don't have to hunt for information later on. Using [a] label snap on my phone through Dr. Bill makes entering billing really easy."*

Keep Good Billing Records

It's also important to keep records for billing purposes and making sure you get paid: "***Make sure you keep billing notes,"*** recommends Dr. Lalji Halai. *"I put a comment on the ministry/notes section of Dr. Bill to explain why I saw the patient again. For procedures, since I am unable to bill half of the procedure or visit on the same day, I write a note [to] indicate what should be paid [for] half the visit or the procedure."*

For organization, you can also *"Separate your billings into groups – I use the "month" but you can use anything to help you organize; it helps with finding patients later. Then delete groups when you no longer need them to keep your folders manageable. Also, use the notes section – a few words might help you remember a complicated billing,"* explains Dr. Melissa Gillis.

Similarly, Dr. Patricia Gabriel says, *"For OB billings, many patients are new to me and I might only see them once. I snap a picture of the label right away. I also keep a copy on a piece of paper where I write down relevant details. I do all my billing on the train home*

at the end of the day. I keep the paper in a file to check in the future in case there are any issues."

c) Be Prepared & Work *with* Patients

Making a plan at the beginning of the day takes a few minutes, but ultimately saves a lot of time. Starting your day even a few minutes earlier can make the difference in starting the day on the right foot.

Being prepared for each visit is also a crucial element of productivity. The doctors we pooled uniformly agreed that it's important to be as prepared as possible for any patient visit. Clinic staff can help set you up for success here: for example, they can and should screen patients when they call in by phone and check to see if test results are in or need to be reviewed before patients come into an appointment.

Make sure you have these results available too, so you don't waste your patients' time or your own. Many doctors also highlighted the importance of really taking time to listen to your patients and gather correct information about their condition. Don't try to save time by labeling them with their illnesses right off the bat; in the long run, you'll be more efficient – and provide better care – by getting to know them as people.

Rule out significant, but perhaps less common, differential diagnoses; doctors advise not rushing into a diagnosis. As Dr. Katayoun Rahnavardi explains, listening well not reveals good information about your patient's condition, but also provides a deeper picture of their personality and expectations. Once you're ready to formulate your plan and discuss it with that patient, you'll know what and how to say it. You can always break your plan down into steps and include patients in your decision making.

Following this process aligns your expectations with your patients', setting you up to work together towards your common goals. Ultimately, this improves patient experiences, reduces repeat visits, and lowers the chance of patients complaining later on; all of which make your practice more successful and productive.

d) Keep Learning

Productivity also has a lot to do with job satisfaction and fulfillment; make sure you pursue your interests and take advantage of learning opportunities as they arise. Seeking out learning opportunities makes working more rewarding. It can also help you address your weaknesses and areas that make be holding you back and making you less efficient.

Many doctors stress the importance of continuous learning, especially in areas you may be lacking. The majority of the doctors we spoke with said **they'd wished that someone had pointed out the importance of ongoing learning when they first started out**. Attending regular seminars, taking workshops or getting mentoring from seasoned colleagues can all help you identify your problem areas and then figure out how to improve them.

For example, if you're bad at billing, find a good seminar, read fee-code descriptions, make notes, and simply start learning. If you're not the best at time management, invest in an online course, workshop or book. It's hard to go wrong, given the wealth of educational resources out there.

Here are some more ideas to get you going:

"Make use of a cloud service to access reference articles."

Dr. Wilson Li

"I try to keep up to date by reading CFPC articles, there are a lot of good hints for day to day practice in those articles and it takes 5 minutes to read one."

Dr. Mahshid Gharedaghi

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*"Use a "push" type of service to get new evidence-based medicine information, and just read the things that interest you; I like "**InfoPOEMs**" via the CMA, the **Clinical Correlations** "Primecuts" blog, the **Therapeutics Initiative Letter**, and the **BS Medicine Podcast**."*

Dr. Jessica Otte

Productivity Is About Both You AND Your Work: Take Some Time for Yourself

Finally, productivity is about what you can get done, but it's also about you as a person outside of your profession. While limiting your work time might sound counterproductive or impossible, it's also often the key to improving your productivity and avoiding burnout.

Taking the time to get adequate sleep and time off is an essential skill for physicians at every stage. But especially when you're starting out, building habits and skills ***now*** will continue to make an impact for you throughout your career.

Chapter 7
Have a Support System

Like any life change, the transition from residency to serving patients independently can be overwhelming. There's a lot to learn and a lot to do.

In saying that, the transition often isn't as much of a shock as new grads expect.

In fact, first-year physicians are often surprised by the amount of help available. As you transition into practice, it's important to trust yourself to draw on your training and skills, but also to lean on the support and resources out there to help you manage stress and your transition smoothly.

Build your own community support system by:

a) Learning how to ask for help,

b) Creating a trusted network of peers both on and off-line, and

c) Finding mentors to help guide you

This will help you build a solid safety net as you learn the ropes during your first few years of independent practice and create a motivating environment that will help accelerate your growth.

a) Learning How to Ask for Help

Doctors, as a rule, are driven, self-motivated people, but the same traits that make you good at your job can also lead to stress, burnout, and depression.

Medicine is also a field in which there is always more to know; best practices change over time, and most practice environments are incredibly variable. On top of that, there's a steep learning curve, and many aspects of practicing independently for the first time will be new.

Reaching out to people around you – from nurses and medical staff – to your peers and supervisors – will be the key to success.

Dr. Susan Horsfall, a fellow GP, says that creating solid relationships and having open and frequent communication has a direct impact on how effectively you provide care to your patients. "When we create a culture whereby we are inter-dependent and feel obligated to support each other, it makes us as individuals and the entire system run more effectively."

Therefore, it's probably not even as difficult as you think it will be to ask for support, but learning how to do this – and more importantly, when to do this – is critical.

Who to Ask

Your social network outside of work may actually be one of your best resources when it comes to finding help during your transition. It's ok to occasionally lean on your family and friends to help manage the rigorous demands of a busy medical career on top of daily living obligations.

At work, your medical staff will likely know more than you; humility goes a long way at the beginning of your independent career.

Nurses, PAs, administrators, receptionists, and other staff all likely have substantially more experience in the fine arts of managing patients, running a practice, and collaborating with doctors and each other. Being open to new ideas and asking these colleagues for their input both gives you important information and helps to establish relationships at your practice.

Your peers, either in online groups or social settings, are also an important source of advice, empathy, and support, especially since they are going through the same things right alongside you.

Finally, established physicians have a wealth of knowledge, and most enjoy sharing this with emerging doctors. Other physicians have all been there before (and someday, ***you*** will be the one new doctors are turning to for help). Specialists in your field are especially valuable resources to seek out and cultivate during your first few years of practice.

When to Ask

It's normal to feel apprehensive when it comes to admitting you need help or that you don't know something. Fearing that asking for advice will make you seen ignorant, incompetent, or weak is very common.

But, you can't know everything, and won't know everything, especially at first. You will only waste others' time if you ask bad questions and don't bother to try to find your own answers before reaching out.

In fact, everyone from you to your colleagues, to your patients, benefits when you can get hands-on experiential learning. If you are lucky enough to work with knowledgeable physicians, you'd be doing yourself (and your patients) a disservice by not taking advantage of that knowledge base.

How to Ask

Most people are happy to be asked for advice. It's gratifying to be asked to provide your opinion, consultation, or help.

That said, people are busy. Asking **specific, targeted questions** saves everyone time and respects the effort and time needed to help you. For example, when you call for a consult, explain the patient's symptoms thoroughly.

The Internet is a valuable resource; use it before asking questions, but also keep in mind that in-person learning is hard to replicate; after you do your own resource, it's time to look for ways to observe and learn in-person.

Cultivate Curiosity

Being a doctor is not just about your school and training – it's also a promise to continue learning throughout your career. Medicine isn't static;, you will never be able to stop learning as new advances reshape the entire practice.

Flexible Thinking, with genuine curiosity, allows you to recognize what you don't already know and then ask the right people the right questions.

Part of the transition to becoming a doctor is learning to think flexibly and orient yourself towards growth and learning. This takes time and effort, but can potentially be the most rewarding part of beginning an independent practice.

Asking for help can be hard, and that's ok

It's normal to feel a little vulnerable when admitting that you need support or don't already know something. Being a doctor requires vast knowledge, and it's impossible to know it all, especially when you are just beginning to build your own practice.

Learning how to ask for assistance helps create an environment in which you can get meaningful feedback and perspective. In the end, this will make you a better doctor: your training will serve you well, but embracing your fallibility and learning how to lean on the knowledge and experience out there will serve your patients even better.

b) Find & Join Online Groups

The internet offers practically unlimited opportunities to connect – both with your peers and with more established professionals.

Networking, social, and informative groups can be a powerful source of expert advice and information, as well as the kind of support you can only get from people going through the same things as you.

What Can an Online Group Offer?

The best online groups connect you with a collective 'hive mind' of physicians all around the world.

If you need to vent, you can find an understanding audience. If you have a specialized question you can't ask the people around you, you can get answers there too.

Some online groups cater exclusively to young career professionals, focusing on the unique experiences and challenges of the first few years after your residency.

Others focus on a specific element of life as a practicing physician such as the complexities of running an independent practice or balancing a busy practice with parenting or your social life. Still, others offer crowd-sourced answers to medical questions.

Some groups are built around a specific specialty or region. It can also be helpful to look further afield; international groups often add a valuable breadth of experiences and perspectives.

How to Find the Right Online Group

Your medical school is often a good place to start when it comes to looking for online groups; many offer networking opportunities and online resources and forums which can connect you with people from your alma mater or in your specialty area.

Here's a breakdown of other ways to look for online communities to join:

Public and Non-Profit Networks

National and province-based societies often organize regional meetups, conferences, and offer many resources. Most of these organizations have either a formal or an informal mechanism to connect new and transitioning physicians with more experienced peers.

Here are some example non-profit/public networks and resources to give you some ideas (though since there are so many, it's worth doing a search specific to your school, province, type of practice, and/or specialty area):

- The College of Family Physicians of Canada (CFPC) started an initiative called the "First Five Years in Practice" which offers a number of resources for new family physicians.
- The Canadian Medical Association network includes doctors of all specialties all over the country, and includes retired physicians as well, for wealth and depth of knowledge that's hard to match.
- The Canadian Medical Protective Association (CMPA) is a not-for-profit association, which provides physician-physician support for medical-legal issues.
- Canadian Women in Medicine group offers a number of resources and has an annual networking conference for female medical professionals.
- Region or province-specific groups offer family support, confidential assistance with personal health issues, and online discussion boards. One example is the Alberta Doctors Services, which provides social networking services and promotes "health and well-being for the medical profession that cares for all Albertans".

Medical Social Networking Sites

There are multiple social networks exclusive to physicians; these networks offer a semi-private, secure source of on-the-job education and social connection for doctors around the world. Here are a few examples:

SERMO: SERMO began in the U.S., but is now the largest international social network for physicians. Nearly a fifth of the Canadian physician community is on SERMO, which offers medical crowdsourcing, treatment and medication reviews, and knowledge sharing.

Daily Rounds: On the academic side, daily rounds offers the chance to consult with experts around the world to reference studies, find info on rare and unique cases, and exchange information.

Among Doctors similarly offers a job board, social network, and discussion boards, linking physicians all over the world). It also offers the option of creating private, smaller groups by area and specialty.

MomMD: MomMD is the largest network of female medical professionals, and also offers extensive forum discussions, newsletters, information, and conferences.

Facebook Groups:

Facebook is still the biggest social network of all time – several billion people use it each month, and it links virtually every community on the planet.

While it's wise to be cautious about using Facebook for anything that could veer into confidential information or medical advice territory, Facebook groups offer a varied and easy-to-access personal connection with those in your field.

Here's a sampling of Facebook groups with active posters which may be relevant to you:

- Physician Financial Independence (Canada) offers financial advice for Canadian physicians of all specialties and backgrounds
- New-in-Practice Physicians – Canada (All specialties) offers networking with new-in-practice Canadian physicians, with regular questions about incorporation, referrals, hospital work, clinic work, and other daily realities.
- Canadian Early Career Physicians also offers advice, venting support, and other exchanges for those early in practice.
- The Canadian Doctors Lounge offers a closed, physician-only group as an informal location to share patient presentations, discuss ongoing changes in healthcare, and come together as doctors.
- First 5 Years in Family Practice – Canada is an off-shoot of the website mentioned above, and is also one of the most active groups on this list, with several hundred questions posted each month. They also have an offshoot "journal club" which discusses current medical news and recently published studies.
- Ottawa Valley Physicians Interest Group (OVPIG) and other region-specific groups offer localized information, more chances for in-person networking, childcare tips, and more. This is just one example of many regionally-focused Facebook groups.

Reddit Forums

Reddit is an international site, with most of the posters based in the U.S. People share questions or news posts, and the most upvoted responses and comments rise to the top.

Since it involves only a username, it can be a great choice when you want to vent or discuss healthcare events and issues (semi)anonymously. Here are some of the largest, most active subreddits which may be helpful or relevant to you; their titles are largely self-explanatory:

- International Medical Graduates
- Medicine
- Residency
- Doctors

LinkedIn Groups

As a professional networking site, the tone of LinkedIn groups is often different than what you can find on sites that are explicitly geared towards socializing.

As briefly mentioned in Chapter 1, many of these groups are designed to provide job support, professional networks, and business connections. It's also a location with lots of practicing doctors, and particularly useful if you're looking for a job.

Here are some example LinkedIn groups which may be useful during your transition to practice:

- Medical Doctor (MD) Network has over 50,000 members, ad connects physicians to discuss best practices for all elements of healthcare, ranging from legal and financial advice through personal support.
- Medical Doctor Authority Network focuses on licensed, practicing physicians who are seeking to expand their practices and grow
- Medical Group Management Association (MGMA) shares best practices for managing a medical group, supporting best practices for both management and patient care
- Healthcare Physician Practice Management also offers a wealth of practical advice on managing a practice independently.

These groups are just a small sample of what's out there.

As the world of medicine changes, online groups like these can help you stay on the cutting edge of your field.

Perhaps more importantly, they are also a way to find people who can support you across your transition. And eventually, they are a way to contribute to your community of practicing physicians.

This list just barely scratches the surface of what's out there: no matter who you are, there's probably an online group that will fit your needs.

c) Finding Mentors

If you ask mid-career physicians about how they found their way to satisfying practice careers, most will point out the people who helped guide them on that path.

When you're establishing your career, having someone who already knows what they're doing in your corner is critical, both practically and psychologically.

However, knowing how to find a mentor and approach them to ask for guidance can be challenging or intimidating. Here's a quick guide to:

- Why having a mentor is helpful
- Who makes the best mentor
- How to find and approach the right person
- How to create positive and fulfilling mentoring relationships

How does a mentor actually help?

Ideally, mentorship is a mutually beneficial, a one-on-one relationship between an early-career provider and a more experienced mentor.

Your mentor might provide advice, connect you with other physicians, or just lend an encouraging ear during your first few years of independent practice.

A mentor can't solve all your problems for you, but will likely have exactly the perspective you need to get you up to speed, make educated decisions about your future, and strengthen your skills.

Finding the right guidance is invaluable during your first few years of practice. Studies have consistently shown doctors who can locate at least one mentor are more successful and satisfied in their careers. This is especially true for women and minorities in medicine.

Do I need to find an in-person mentor? Can I get mentoring online?

Online guidance is helpful, and it's becoming more common to look for everything online for a reason. It is often less convenient to make time and space for face-to-face gatherings than it is to pull up a browser.

However, the speed and structure of the internet don't always support the kind of honest, vulnerable conversations that make up the most successful mentoring relationships. There is still no substitute for genuine, face-to-face interaction.

Who makes a good mentor?

The ideal mentor is someone who is already a few steps down the path you want to travel.

For transitioning physicians, connecting with colleagues who completed their training 5-10 years ago is often the easiest bet, but anyone from peers in your class through retired physicians in your specialty can act as mentors.

And of course, you don't have to limit yourself to just one person. Many people benefit from guidance from multiple people, who offer different approaches and perspectives on different elements of your career.

Many of the best mentorship relationships are mutually beneficial; choosing the right person is as much about personality fit as career success. Look for those who have the experiences or skills you want to cultivate in yourself.

How do I find a mentor?

Not all mentor-mentee relationships are formal; many spring naturally out of organic connections you make on the job.

Nevertheless, don't wait for a mentor to approach you. To make a productive mentoring relationship, you will need to go out of your way to set up the kind of relationship you want. Most people are happy and excited to be asked to help young physicians, but they're also busy, and won't just appear out of nowhere.

It's often easiest to start with your existing networks. You can start your search at your practice or hospital, either by networking with your peers or from the comfort of your own laptop. Local interest groups, your organization's directory, and online groups can all be places to find mentors. This can be as simple as observing how others work around you or looking up someone whose research you admire and reaching out to them.

It takes time to create these connections, especially given the hectic daily obligations of most doctors. It's ok to start slow and test out connections to see if they might grow naturally into a mentoring relationship.

How do I approach a potential mentor?

Most people remember the guidance they received and want to help others in return. It's flattering to be asked for advice, and it's not a coincidence that research has indicated that people like you more after you ask them for advice.

On the other hand, doctors are not exactly known for their abundance of free time; the key to asking someone to mentor you is to respect their time, boundaries, and expectations.

Some people have the most success with formally structuring a request, and laying out expectations from the beginning. Others find that a casual, friendly approach works better, but it's still a good idea to officially ask if they would serve as a mentor for you once you've established a personal connection.

Ingredients of a Good Mentorship

• Mutual Benefit & Respect

In the beginning, a mentoring relationship may be somewhat one-sided, but it doesn't have to be subservient.

Unless your relationship is also gratifying to your mentors, they won't have a reason to continue offering their support. You want to nurture your relationship so it will grow over time.

Be careful not to waste their time with vague questions or ones you could google, and don't expect them to solve your problems.

• Clear Expectations

Everyone has comparative strengths and weaknesses; this is one of the reasons having multiple mentor figures is helpful. Outlining what you both expect to get out of the relationships helps establish structure and meet both of your goals.

It doesn't have to be a formal agreement, but in the beginning, it is helpful to make the expectations somewhat explicit from the start. For example, after your first meeting, you can suggest a possible future meeting schedule, and then follow up based on that agreement.

- **Honesty**

In some ways, the mentoring relationship is almost like a marriage – if you don't click with your mentor, early on, it's ok to look for someone else. You want someone who will be invested in your success, but also provide the guidance you need to overcome roadblocks.

Complete candor is an important component of successful mentor-mentee relationships.

Asking for feedback regularly, and sharing both what is going well or mistakes you've made is key to building trust and getting the guidance you need.

It's important to look for mentors who can connect with you as an individual, who can encourage you and lift you up, who will inspire you, and maybe even give you a firm (and honest) nudge in the right direction when needed.

Paying it Forward

Even if you're just beginning your independent medical career, you already have a wealth of knowledge and experience to offer those who are behind you on the same path. Along with developing good relationships with your mentor(s), paying it forward by offering advice to others can also be both helpful and rewarding.

The Takeaway...

Identifying mentors, approaching them, and ultimately thriving through those connections takes time and effort.

However, when done well, mentoring makes the difference between a stressful transition and a smooth one; thoughtfully considered career decisions, and hasty ones.

There's no single way to find a mentor, but building connections, and building your mentor-mentee relationship with mutual respect leads to valuable knowledge, advice, and encouragement that is vital during the transitional years of your career.

Chapter 8
Finding Balance

As a new physician, there's no doubt that at times you might find it difficult to maintain a perfect work-life balance; and it makes sense, there's lives at stake and countless people, responsibilities, and charts competing for your attention. Combine that with the demands of your job, taking care of your family, and maintaining an active social life, and it's easy to see why physician burnout is on the rise.

Research shows that having poor work-life balance has a variety of negative outcomes including poor physical and mental health, stressful personal and professional relationships, and inadequate patient care.

So, what is the perfect work-life balance? While it differs from one person to the next, it's a combination of achievement and happiness, which is why it will likely take a while to figure out what exactly that means for you. Although achieving an adequate work-life balance may seem like an unattainable task, the fact that you're reading this and being mindful of it now; all while going into your first year as a physician, definitely means you're thinking ahead!

To help nudge you in the right direction, this chapter outlines how to:

a) Figure out How You Can Relax Instantly

b) Create a Schedule Based on Your Priorities, then Schedule Appropriately

c) Set Aside Personal Time

d) Stay Positive

e) Delegate Tasks When Possible

f) Re-evaluating and Resetting

g) Always Remind Yourself Why You Chose to Be a Physician

Check out the suggestions below that have helped other doctors unwind and stay sane. Try to choose a few things you can really picture yourself doing and remember to incorporate these within your first few months. This will really help you create better habits and overall a better work-life balance.

a) Figure Out How You Can Relax Instantly

With a hectic schedule, you may not have much time to rest, so learning how to instantly relax can help you get through a long day. Here are some quick relaxation fixes:

- Take deep breaths. For example, set a timer for 3-5 minutes and breathe in through your nose and out through your mouth. The longer the breath, the better.
- Massage your hands with soothing hand lotion.
- Try acupressure – use your thumb to apply pressure to the area between your thumb and index finger on the opposite hand.
- Inhale an essential oil, such as lavender or citrus.
- Stretch it out – pull your chin towards your chest and roll it slowly from one shoulder to the other. Lift your arms up over your head then stretch them down in front of you.
- Visualize something that makes you happy (maybe it's your dog, your favourite beach, etc.).
- Choose a mantra that works for you, which you can then use throughout the day. For example, "Relax, release, ease", "I always feel better when I pause in response to stress," or, "Great Noble Tara" (which is a meditation chant used to overcome anxiety and fear).
- Enjoy a hot cup of coffee or tea.

b) Create a Schedule Based on Your Priorities, then Schedule Appropriately

This may seem obvious, but it can be hard to follow through on. At the start of your career, you have some control over your work-life balance, so try to keep it that way. During your first year as a physician, identify your top priorities, and base your schedule around them – don't try to take on too much. Keep in mind that

you're not obliged to say "yes" to everything. Learning to say "no" is difficult, but when you already have a schedule in place, it's easier to say no to less critical tasks and events.

This means learning how to schedule (which basically means don't overbook yourself)! You want to listen to your patients rather than rush them out the door – you never know, they may impart some wisdom on you!

While you're at it, schedule in some breaks, 10 to 15 minutes, throughout the day can help you relax and reset. Sometimes you may need to schedule back-to-back patient appointments, but it's not maintainable in the long run. Moving from one patient to the next continuously throughout the day can be draining, especially when combined with follow-up, paperwork, and other tasks you need to schedule on a daily basis.

c) Set Aside Personal Time

Personal time is crucial to experience a better work-life balance, because you aren't benefiting anybody if you're always tired, and low on energy, patience, mental acuity, or empathy. Schedule some personal time, and learn how to focus on yourself.

This means turning off your cell phone and avoiding distractions. Whatever it is you choose to do, make sure it's something you truly enjoy. Here are some ideas to take better care of *yourself*:

- Go for a walk outside – it's amazing what some fresh air can do for you!
- Get in a quick workout – even if it's only 10 minutes a day.
- Take time to meditate. New to Meditation? Try one of these apps – The Mindfulness App, Headspace, or Calm.
- Listen to an ASMR (Autonomous Sensory Meridian Response) video.
- Schedule a massage at the end of a hectic week to unwind.
- Improve your posture – not only will it help with aches and pains, it will also boost your self-esteem. Try this: BetterBack or these simple postural exercises.
- Take in a tourist attraction (especially if you've relocated for work).
- Do something creative – painting, drawing, dancing, etc.
- Read non-work-related books or magazines.
- Treat yourself every once in a while.

- Keep your weekends free to enjoy them (don't try to "catch up" on work).
- Try something new – a cooking class, book club, etc.
- Speak to a therapist – especially when you're going through a rough patch.

In addition to taking some personal time to focus on yourself, it's also important to set aside some time to spend with friends and family as they are your biggest support system.

Dr. Selena Faiers reminds us "It's easy to get swept up at work and being needed and making a difference in other people's lives. Take the time to regularly check in with yourself about what matters the most and make sure that you continue to create space in your life for that, family dinners, walks on the beach. I cannot stress how important it is to have the balance in your life because medicine will eat you up. If you are not in balance, and living life with some satisfaction then you cannot serve fully or as well."

d) Stay Positive

Focusing on the good things in your life will help you be grateful for your career and put things into perspective. A simple thing to do is to write down 3 good things that happened at the end of each day.

Remember:

- Don't take things personally.
- Stressful times give you the opportunity to grow and figure out what you don't like.

e) Delegate Tasks When Possible

You may think that you have to do everything in your office, but this isn't the case. Your time is in demand, so you need to use it in the best way possible. Often, another staff member can handle certain aspects of your practice, and may even do it more efficiently than you. This is particularly true for administrative tasks, for example referral follow ups.

"You have trained too long and worked too hard to spend time doing things you don't like that others can do."

Dr. Eric Cadesky.

This is also true for your personal life. You can contract workers to do such things as yard maintenance, and house cleaning. You can even subscribe to a food service, such as HelloFresh or GoodFood, and have all the ingredients delivered straight to your door to make eating healthier easier.

f) Re-evaluating and Resetting

In the face of life transitions like graduation, marriage, the birth of a child, a promotion, or the death of a loved one, reevaluating and resetting both your work and personal life goals can be instrumental in establishing a healthy work-life balance. Make sure your goals are SMART goals – specific, measurable, attainable, realistic, and trackable – and be sure to reward yourself when you achieve a goal.

g) Always Remind Yourself Why You Chose to Be a Physician

This is a big one – coping with stress on a daily basis can make you forget why you chose to be a physician in the first place. It's important to take a step back sometimes and remind yourself why you chose this career path. If you're overworked or too stressed, there are many different solutions. The first step is to identify where the problem is and then various ways you can go about to improve it.

The Takeaway...

As a new physician, you're likely looking to build a busy and successful practice. Keep in mind that while you may be able to sustain an extremely busy practice for a while, it will ultimately catch up with you, and certain aspects of both your personal and professional life, will suffer.

It's important to maintain a healthy work-life balance by implementing some of the tips outlined in this article. Not only will you minimize your risk of burnout, but your physical and mental health will improve, you'll have better professional and personal relationships, and the quality of care your patients receive will be much better.

Chapter 9

Final TakeAway: Advice From Other Doctors

Congratulations, you've made it to the end of the guide! You should now know exactly what steps you need to take to become fully certified and you should have a better grasp on not only the admin side of your career but also how to make the most of your time.

To add to this, we thought you might like to hear from those who have personally gone through the entire process themselves. As such, we interviewed a handful of new doctors, who have 1-5 years of practice experience, and asked them a few questions about what you can expect.

New Doctors Reveal their Best Tips and Advice when Starting Out

1. What was/is the biggest challenge/struggle as a new doctor?

"Time management has certainly been the biggest challenge as a new doctor. This is both in clinic (trying to provide good care on a 10-15 minute booking schedule) and outside of clinic (paperwork, labs/results, volunteer/committee work, etc)."

Arlo Green – General Practitioner.

"Setting up a new practice with respect to the business side of things, mostly admin and billing"

Deborah Kahan – Psychiatrist

"Self doubt, imposter syndrome. Time and continued learning were big for this. Locuming also helped but ideally at the same places to get the hang of things, each new location will have different EMR's etc., so you don't want to spend more time and energy on that as well."

Nicole Del Bel – General Practitioner

"Changing from the role of a resident to an attending is probably the biggest. It did take some time to build confidence and experience, especially suddenly you are the last person to sign off a prescription or report and nobody else will necessarily review it. I seek out advice and tips from other colleagues who have more experience than I do. And also be patient. Confidence does come with time and experience."

Derek Chang – General Practitioner

"Big jump from residency in terms of patient volume, responsibility, billing knowledge, time management. Talk to colleagues and mentors for advice and tips."

Daniel Wong – General Practitioner

2. What has been the most frustrating part?

"Paperwork, notes, labs, etc. – all the extra work outside of direct patient care that takes a considerable amount of time (and is not compensated for, at least not directly). And with how connected we are (e.g. at home EMR access, cell phones), it can be a challenge to carve out personal time."

Arlo Green – General Practitioner.

"Not having a supervisor to run things past anymore."

Deborah Kahan – Psychiatrist

"The biggest hurdle was probably managing time, especially with the boluses of referrals that can come all at once, and then trying to finish and get home in time to get some sleep to start the next day all over again."

Terence Yung – Internal Medicine

3. Was there anything that you found surprising?

"The amount of opportunity there is. No shortage of work, both formal opportunities and the ability to create your own path. And maybe not surprising, but definitely reassuring: the amount of support offered by colleagues (from fellow doctors, allied health, administration, etc.) who genuinely want to help each other and patients."

Arlo Green – General Practitioner.

"I'm more confident than I thought, the work is really enjoyable."

Deborah Kahan – Psychiatrist

"Most surprised by level of peer support in division – just because you're out of training doesn't mean you can't still learn from those you work with who have far more experience."

Daniel Blum – Internal Medicine

(Working as a locum) "I love the variety and miss the people I work with and the patients I care for when I am away."

Nicole Del Bel – General Practitioner.

"While this may vary between centres, independent practice feels like a more collegial experience than residency. While authority and hierarchy often dominate too many interactions in residency and in large centres, collegiality, service, and assisting and enhancing patient care remain more central to independent practice."

Michael J Diamant – Internal Medicine

"Besides clinical skills, there are many other skills to learn as a physician (management, coordinating, leadership…)"

Derek Chang – General Practitioner

"Time really flies by so enjoy the journey."

Daniel Wong – General Practitioner

4. What were you least prepared for?

"The amount of outside the office work has been somewhat of an adjustment. As a trainee/resident, much of the behind the scenes work was completed by others (i.e. your preceptor); as an independent new physician, it is your responsibility to follow up on all lab work, faxes from pharmacies, calls from community supports and nurses, etc. etc."

Arlo Green – General Practitioner

"Administrative responsibilities"

Deborah Kahan – Psychiatrist

"Ensuring consults were booked in appropriate timeframe was a challenge – had to work closely with clericals to ensure nothing fell through the cracks. Still have to do this."

Daniel Blum – Internal Medicine

"The financial and practice-building aspects of work remains the most opaque. Residency programs prepare physicians well for content and decision-making, but billing, as well as designing and managing a practice, remain poorly taught and rarely discussed."

Michael J Diamant – Internal Medicine

"I found billing to be slightly confusing at the beginning and can leave a lot of money on the table. I found that having a mentor is helpful. Find tutorials that may be helpful."

Amy Chen – General Practitioner

5. What advice would you give to new doctors?

"Make choices mindfully, especially in the amount of work you take on initially. From clinic/hospital work to leadership roles to educational opportunities, there will be many demands on your time and you will feel like saying "yes" to everything. It is okay to say "no" to some of these opportunities as you have to make decisions to guide your career in the path you want to take as well as protect some of your own personal time."

Arlo Green – General Practitioner

"Go to business/admin seminars if they are offered."

Deborah Kahan – Psychiatrist

"Locum where you want to work, take your time determining a good fit. Ensure you like your team. There is no end to the ability to do more work so learn to say no and make sure you know your priorities and your ideal balance.

Check in with the divisions in your area, check with mentoring doctors, also check with any residency programs for any resources for new physicians in the area. Send out an email/fax if you are a specialist (they can help with this) if you are a GP don't send out an accepting patients list until you feel settled. You can get full in seconds. Make sure you learn the billing codes for your area.

Nicole Del Bel – General Practitioner

"Independent practice remains a self-directed learning experience. Re-evaluating your own decisions, documentation, workflow, billings, and patient communication remains central to continued growth as a physician."

Michael J Diamant – Internal Medicine

"Your colleagues in the group are your biggest resource. Treat them well, keep them close. They have the real life experience that can save you time, effort and even money. And so it's especially important to join a group that is supportive. To do that you need to locum a bit first. Don't get committed to a group that may be toxic."

Terence Yung – Internal Medicine

"Stay on top of your paperwork and billing. Set your work schedule up to work for you. Find people that you like to work with."

Amy Chen – General Practitioner

Afterword

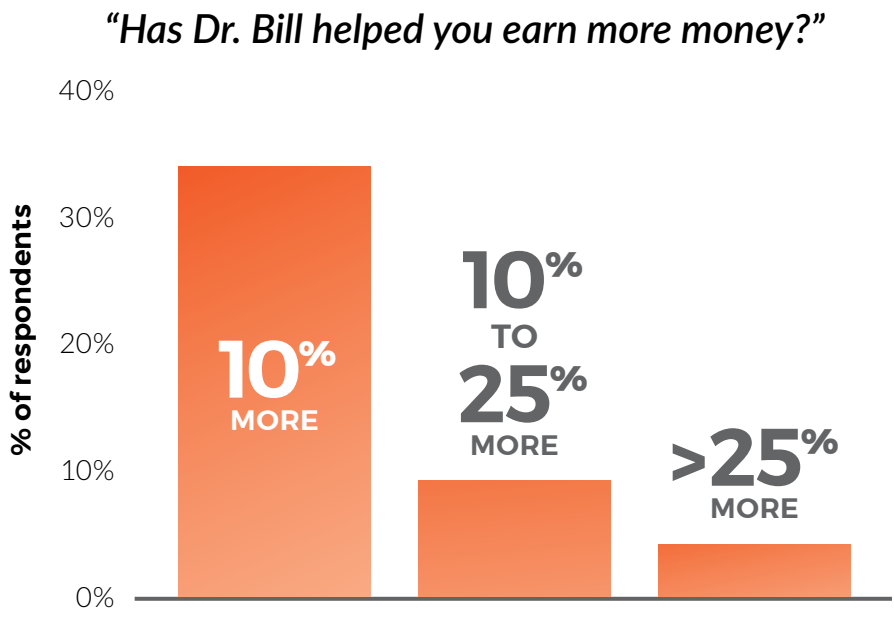
Welcome to the Dr. Bill Community!

The team at Dr. Bill hopes this guide has helped you figure out how to tackle some of the complexities involved in making your first year of practice a successful one. Remember, a little bit of planning can go a long way!

We also wanted to let you know that you're now part of the Dr. Bill community and as such, we're here to help you improve your practice by simplifying your billing so you have more time for yourself while actually maximizing your earning potential.

Don't take our word for it though, the results speak for themselves:

We surveyed our users:



So, what are you waiting for?! Sign up today and

Get $150 in Free Billing Credit

This is truly a risk-free opportunity (**no credit card necessary**) and is a great way to test out the app and get used to billing.

Here's what other physicians have to say:

"The service was easy to set up and the listing of fee codes made it easy to find the correct billing codes even as I adjusted to a new fee schedule as I usually work in a different province. The clearly formatted claim listing explained where things were at for each patient and from there I could easily decide the next step."

Dr. Ayoub Dangor, Anaesthesia

"I love the on-the-go use of Dr. Bill and the label snap feature. "

Dr. Justine Spencer, General Practice

"Love the quick interface, favourite list. daily summary and easy call out/continuing care add-ons."

Dr. Elliott Bogusz, Neurology

"So convenient and I love the instant feedback at the end of the day that tells me how much I've billed. The homepage that reports the status of total billings is also very clear. My billing...what's been paid/held/ refused was always very vague with my prior billing service. I also never really had a good idea of how much was outstanding and was submitted for a given billing cycle. I'd eventually get some information but usually 2 or 3 months later."

Dr. Val Montessori, Infectious Disease

"Customer service is absolutely fantastic. Prompt replies to any questions I have. The app makes it easy to bill. Easy to enter claims."

Dr. Jennifer Yeh, Psychiatry

Claim Your $150