



Choosing a Career in Academic Medicine

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May 5, 2017, was an important day in my academic career as it represents a lifetime of hard work and perseverance, supported by mentors, colleagues, family, and friends. The road toward promotion to Professor in the Departments of Emergency Medicine and Pediatrics at the Penn State University College of Medicine began the day I decided to become an academic pediatrician.

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Reconnecting with my Pediatric Emergency Medicine fellowship mentors, Drs. Jeffrey Avner and Ruby Rivera, at the Pediatric Academic Societies meeting, 2019.

Pop Quiz

1. Do you consider yourself a teacher and enjoy educating and mentoring your learners?
2. Do you find satisfaction from conducting research, presenting your data at scientific meetings, or publishing your data in peer-reviewed journals?
3. Are you a lifelong learner, constantly challenging yourself to be the best clinician you can be?
4. Do you enjoy being in a leadership position or working within a team construct to serve your community or profession and improve the lives of your pediatric patients?

If you answered yes to any of these questions, you may have a future in academic pediatrics.

What Is Academic Medicine?

A career in academic medicine involves *demonstrating scholarship, gaining knowledge, and providing education*. *Demonstrating scholarship* involves imparting knowledge that results from study and research in a particular field and the dissemination of this knowledge, thus becoming an expert in a particular field. *Knowledge* is the sum or range of what is perceived, discovered, and learned over time, therefore practicing “lifelong learning.” *Providing education* is the act of imparting knowledge and skill to another person/group or to cause to learn by example or experience, thus becoming a teacher and mentor.

Climbing the Academic Medicine Ladder

The goal of any academic physician is climbing the academic ladder, from Clinical Instructor to Assistant Professor to Associate Professor and ultimately Professor. Although the road may be long and difficult, at times sacrificing other nonacademic inter-

ests, in the end, the benefits and impact are numerous. While there may be nuances in the promotion and tenure process among academic institutions, criteria for promotion often involves achieving professional excellence in a combination of the following four mission areas, in accordance with your effort allocation:

- *Teaching and learning*
- *Research and creative accomplishments*
- *Patient care activities (clinical responsibilities)*
- *Service and the scholarship of service to the university, society, and the profession*

Promotion is commonly based on performance rather than time-in-rank. Performance is evaluated using the *dossier*, a standardized format for reporting activities and scholarship. Dossier reviews are conducted independently by faculty committees and administrators of each institution. Performance expectations increase as you advance in academic rank, develop mastery and independence in your field, increase scholarly accomplishments, grow your regional and national reputation, and demonstrate professional leadership. At each rung of the academic ladder, performance since the last promotion review is evaluated.

What Are the Components of a Promotion Application?

Promotion applications often include the following:

- Narrative statement (personal statement)
- External (outside your institution) evaluations
- Patient/clinical care evaluations (internal, within your institution)
- Pieces of scholarship
- Curriculum vitae
- Dossier

The *narrative statement* is usually a one- to three-page *first-person* statement about your scholarship in the context of your overall goals and philosophy, highlighting professional excellence in the four mission areas.

External evaluations are letters of recommendations from experts in your academic field/specialty, often at an academic rank higher than your current rank, from a variety of external institutions, and without a conflict of interest (i.e., no former students, teachers, mentors, colleagues, or *significant* research collaborators).

Patient/clinical care evaluations are letters of recommendation from colleagues, referring physicians, or subspecialty physicians who can comment on your clinical performance.

Pieces of scholarship are published research articles that support your overall research goals and that are cited/referenced frequently in the medical literature. Based on your academic institution, the minimum number of publications for promotion will vary, but often exclude case reports, review articles, and book chapters, and frequently require you to be the principal investigator or first author.

The format of your *curriculum vitae* (CV) will depend on your academic institution. The CV is a comprehensive record of your academic career, highlighting in a chronological fashion your involvement with the four mission areas.

The *dossier* is a record of your accomplishments in the four mission areas and is used by internal reviewers to evaluate your performance and scholarship. The information required is more detailed than a CV and must be submitted in a specific format, frequently involving colored “rainbow” folders. Four of the folders are based on the four mission areas and often include the following documentation:

1. *Teaching and learning*: (a) Lectures, seminars, courses given (both internal and external, documenting attendance numbers), (b) research supervised, (c) mentoring opportunities (students, residents, fellows, other faculty), (d) teaching evaluations (quantitative information and summary of comments), (e) peer

- review of teaching (letters of recommendation from senior faculty members within your department commenting on your teaching style)
2. *Research and creative accomplishments:* (a) publications [peer-reviewed journal articles (note authorship role on each) and non-peer-reviewed publications (book editor, book chapters, review articles) including “accepted” and “in press”], (b) research projects [completed, current, planned (note role on each project), internal and external grants], (c) other creative products (e.g., educational methods or computer software developed; inventions; clinical guidelines disseminated)
 3. *Patient care activities:* (a) statement of clinical assignment including time commitment and effort allocation; (b) detail on quantity and complexity of cases [patients per hour, RVU (relative value unit) productivity]; (c) quality of care (patient satisfaction data, QI activities); (d) letters from peers, colleagues, and referring physicians commenting on patient care ability and effectiveness (patient/clinical care evaluators)
 4. *Service and the scholarship of service to the university, society, and the profession:* demonstrating service through committee work and leadership, both internal to your institution (in your department, in the College of Medicine, or in your hospital/health system/university) or external to your institution [within your profession (journal editorships and reviews, study sections, organizing conferences for professional associations, offices held in professional associations, government advisory groups, etc.) or within your community (citizen/client groups, outreach activities, volunteerism, etc.)].

Pearls from an Academic Climber

My journey to professor began the day I decided to become an academic pediatrician. Here are some pearls to make your journey successful:

Find your passion, seek out your niche: Do you remember why you chose pediatrics or pursued a career in your subspecialty? Allow this passion to motivate your career in academia. For me,

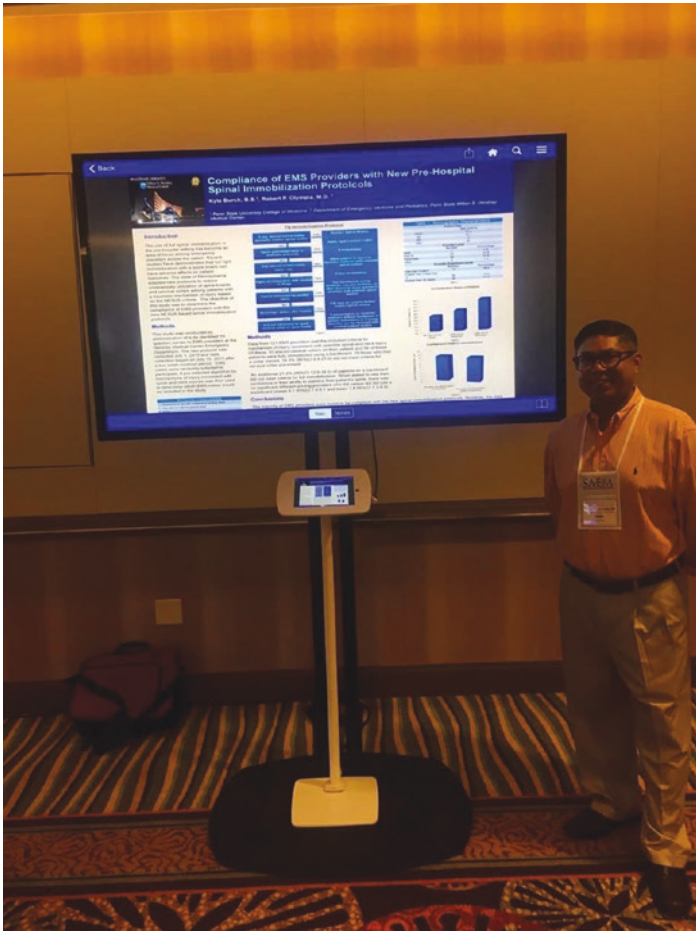
my passion is emergency and disaster preparedness, trauma and sports medicine, access to care, and the impact of media on children. Most of my research accomplishments, education and mentorship, and patient care activities have involved these passions. I still love what I do because of these decisions.

Surround yourself with greatness: Find advisors and mentors that will guide you not only through your career in academia but also with life. I was blessed to have Drs. Magdy Attia and Jeffrey Avner train me as a resident and fellow and, even after so many years, also serve as role models and mentors throughout my career. Having an all-star team around you is better than being the only all-star.

Become a hoarder: Save letters and emails that document excellent patient care. File away lecture evaluations, and if there aren't formal evaluations for educational opportunities, develop one and collect the data. Seek letters of recommendation from learners, colleagues, or mentees who can comment on your teaching skills, mentorship abilities, or clinical acumen. It's not really hoarding if you keep things organized.

Stalk strategically: Since you will need external evaluations from "non-biased" physicians in your specialty, try to meet as many experts in your field. Go to General Pediatric and Pediatric subspecialty conferences (such as the American Academy of Pediatrics' National Conference & Exhibition or Pediatric Academic Societies annual meeting), both regionally and nationally. Introduce yourself to experts in your field, ask questions, invite them to your institution, and hand out business cards. Build your professional network; make a friend.

Keep lecturing and writing, become a scholar: Seek out educational opportunities – lectures at your institution will turn into grand rounds regionally and then expert panels nationally. Turn lectures into review articles or book chapters, turn clinical questions into research ideas, and turn quality improvement ideas into scholarship. Lectureships and publications will increase your reputation and in turn lead to multicenter research collaborations, opportunities to serve within your specialty, and means to improve the care of children globally. A laptop, pen/paper, and thinking outside the box will be your best friends.



Presenting my research at the Society for Academic Emergency Medicine scientific assembly, 2017.

Delegate your work: The amount of time and effort to become promoted can be overwhelming. Utilize medical students, residents, fellows, and other colleagues in the development and implementation of research projects. Collaborate with other departments and institutions for educational and research

opportunities. Make friends with the Institutional Review Board, biostatisticians, librarians, and institutional leadership and committee members. Teamwork makes the dream work.

Volunteer your time and efforts: Provide service to your department, institution, profession, and community but make sure it aligns with your passions. Do you like quality improvement? Medical education? Global health? School-based health? Whatever it may be, just get involved. And seek leadership positions if possible.

Update your CV and dossier regularly: I update my CV and dossier monthly. This may seem pathologic, but it allows me to visually see where my deficiencies lie in the four mission areas and organizes all the data that I have been hoarding over the years.

I believe my career in academic pediatrics has enriched my life, given me purpose and provided professional satisfaction, shaped the future of medicine in the learners that I have educated and mentored, and ultimately impacted the health and well-being of infants, children, and adolescents regionally, nationally, and globally. What an honor and blessing.



Delivery of my first edited book, Urgent Care Medicine Secrets, 2017.