



Governor's Message

Robert. L. Allison, MD MACP

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I can't think of many things in 2020 that I want to see repeated. Personal tragedy, financial struggles, civil unrest, and the disconnect from our daily routines have all left us changed. We are struggling to get back to some level of normalcy but need to realize that things will truly never be the same.

The ACP has become a 'virtual' organization. I can tell you my second year as your Governor was spent like most of you on various communication platforms. I love interacting with my Governor class, a special group of friends all over the country that want the best for their members, but nothing beats face-to-face visits in the places we are proud to call our homes. Despite that we have still shared ideas and life experiences that have bridged the gap somewhat.

2021 will hopefully bring our SD Chapter back to a face-to-face meeting in Deadwood. Our first virtual (and hopefully last) meeting was functional but the attendance was as expected. We all had busy lives and the uncertainty of what we could share limited participation. Thanks to the staff and students for the presentations that we had.

Financially our chapter is in great shape. The pandemic limited activities and expenses. We continue to explore diversity on our executive committee and are reaching out to our members to get involved. Our Chairs are energetic and welcoming to our members who have interest in health and public policy, membership, early career physicians and our annual planning program committee activities.

Our advocacy reach will be virtual as well in 2021. There are no plans for trips to Washington DC but we may need your help in Pierre. By the time of this newsletter several medically related bills will have gone through the Legislature. We hope to expand our legislative "Gladiators" who have special relationships with their own representatives this year. Please build those home grown connections all year round to become a resource for our chapter and your legislators.

Please share your pictures with us to post on our chapter social media (Instagram, Twitter, Facebook). We would love to celebrate your accomplishments but if we don't know about them we can't cheer you on.

Until we visit again. **Be safe and #MaskUpSoDak!**

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What a year it has been for physicians. Many of us were called upon to be leaders in our communities when it came to issues of public health policies aiming to reduce the burden of COVID-19 in our clinics and hospitals. It has been a terribly hard year, but I hope one silver lining might be that we realize how important physician advocacy is in our communities, state, and nation.

Nationally, the American College of Physicians continues robust advocacy for our patients and our profession. One big win in 2020 was the revision of E&M coding and documentation requirements as well as increased payment under Medicare which went into effect on January 1, 2021. The ACP Advocacy Team was also very active in many aspects of legislative action taken to address the COVID-19 pandemic.

Locally, our state Health and Public Policy Committee is monitoring the current state legislative session for bills relevant to the care of patients in our state. As always, I would encourage our members to be in contact with your lawmakers at the local and state levels to be a resource they might call upon when an issue related to health care arises.

In 2020, Leadership Day on Capitol Hill was, for obvious reasons, cancelled. This May we hope to be able to participate in national advocacy in a virtual manner.

To read about ACP advocacy including many position papers, you can always go to acponline.org/advocacy. To stay up-to-date on current advocacy efforts, please enroll in the Advocates for Internal Medicine Network at acponline.org/advocacy/advocates-for-internal-medicine-network.

I am sending my sincere thanks for all your work across our state in the past year, and I am wishing all a better 2021.

SAVE THE DATE!!
70TH ANNIVERSARY ANNUAL MEETING
SEPTEMBER 29 - OCTOBER 1, 2021
DEADWOOD, SD



Internal Medicine Residency Update

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Our PGY3 residents had another outstanding fellowship match this year. We have 4 residents going into fellowships. These fellowships include Cardiology at Houston Methodist, Hematology/Oncology at University of Nebraska, Pulmonary-Critical care at Mayo Clinic in Scottsdale, AZ, and Nephrology-Critical care at University of Texas San Antonio. We are also excited that our other 4 residents will be staying to practice in South Dakota. One resident will practice in Primary Care and three residents will practice as Hospitalists.

We also had another outstanding year with our ABIM boards. We had a 100% pass rate again, which makes this the 5th consecutive year. The residents continue to do very well on the In-training service exam with our residency (all residents combined) composite percentile of greater than 90% in all specialties and overall program. Thanks to all our outstanding faculty.

With COVID 19 we have been interviewing resident applicants virtually this year. Overall we saw a significant influx of applicants. Virtual interviews went well and we are now focusing on the rank list. Match day is set for March 19, 2021.

Check out our new website at <https://usdgame.org/internal-medicine>.

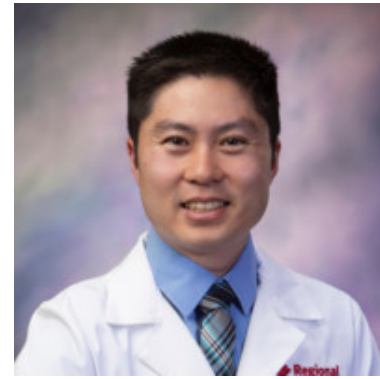
Upcoming Events

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|------------------------|----------------|-----------------------------------|
| March 16 | 7:00 pm | SDACP Council Meeting |
| April 26-28 | | Board of Governors-Virtual |
| April 29-May 1 | | IM2021 Mtg - Virtual |
| May 25-26 | | Leadership Day - Virtual |
| September 23-25 | | Fall Board of Governors |
| Sept. 29-Oct. 1 | | SDACP Annual Meeting |

Early Career Physicians Update

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I hope you are all healthy and in good spirits. I wanted to focus this article about your personal well-being. I recall my personal challenges on becoming a new attending. Learning to practice independently, developing a knowledge base specific to your practice, a new work environment and colleagues, a different patient panel, and navigating new clinic and organization politics was challenging for my first year in practice. I specifically remember working long hours at my new practice in the clinic as well as pulling extra shifts at the local urgent care clinic to help support my growing family size. After one year of being an attending, I remember the excitement of medicine giving way to exhaustion, never able to feel recharged after a weekend or vacation and dreading that morning drive into my clinic in the morning. I eventually felt powerless like I was unable to make meaningful changes in my workplace and to my patients. I kept researching what options were available to me outside of clinical medicine. I finally came to the realization that I was experiencing “burnout”.

I realized I was not alone when I spoke candidly with my junior colleagues. One colleague of mine described severe heartburn and nausea on the days she had to go in for work. A few of my colleagues elected to cut their hours to part-time in order to maintain a minimal level of being. I performed a root cause analysis at my work and discovered the core reasons young physicians were “burnt out” at my workplace was because of a complete lack of autonomy, as well as a boss who did not create a healthy work environment. Even the senior physicians in the clinic were counting the years left till retirement so they could claim their pension. After advocating for workplace change but not making headway, I made the most difficult decision and submitted my resignation and moved to South Dakota.

On January 21st, 2021 our local ACP chapter held a discussion panel addressing physician well-being with guest panelists **Blake Heinz, DO** - Hospitalist at Avera, **Matt Stanley, DO** - Psychiatrist at Avera, and **Jennifer Williamson, MBBS FACP** - Primary Care at Monument Health. We discussed the signs and symptoms of burnout: fatigue, depersonalization, and personal lack of efficacy. Burnout can lead to depression, substance use, physicians leaving practice or cutting hours, and in its most severe form led to physician suicide. Dr. Williamson shared a personal account of a friend who ended their life during residency. We discussed that physician burnout is not just a result of work life, but also one’s personal and home life. There is not a simple prescription to combating burnout. Every individual’s core values are different and taking an introspective analysis as well external analysis from those who know you well is key in individualizing a plan to combat burnout. During this COVID-19 pandemic Dr. Heinz shared his story of heavy burden and fatigue from the high census in his hospital as well as the emotional toll of the severity of the COVID-19 illness. He found that his personal antidote was connecting on a personal level with his patients as well as getting good sleep, exercise, and eating right. Dr. Stanley gave valuable perspective on the psychiatric effects of untreated burnout and the challenges physicians have when trying to seek help for mental health ailments. Some of these barriers such as having the South Dakota Medical Board remove questions asking if physicians received previous or current psychiatric help or treatment has been addressed. Our local ACP chapter’s Early Career Physicians are dedicated to advocating for physician well-being and helping physicians maintain work-life balance.