

YPS-AAEM New Attending Starter Kit

Congratulations on completing residency and becoming an attending physician! At the Young Physicians Section of AAEM (YPS-AAEM), we remember fondly the excitement that goes along with starting off on your own. However, we also remember the stress associated with learning about all the requirements and responsibilities that go along with being a young attending physician while no longer having an attending over your shoulder during complicated patients.

This starter kit has been segmented into distinct categories that we found helpful to get started with this next stage of your medical career. By no means is it all inclusive, but rather it's designed to guide you on your searches for further information on important topics in your first years out of residency. Enjoy browsing through this resource, and remember, AAEM is invested in your future as an emergency medicine physician!

INDEX:

- 2 Board Review & Certification
- 4 CME & FOAM
- 6 Finances
- 8 Job & Contract Negotiations
- 9 How to Quit a Job
- 11 Teaching & Early Attending Life
- 12 Useful Phone Apps for Clinical Practice

BOARD REVIEW & CERTIFICATION:

Thought standardized tests were over after medical school and residency? We wish! Board certification is the pinnacle of your testing as a physician. In emergency medicine, this is achieved by passing a written qualifying exam and an oral board exam. Below are some links to guide you through the latest on what that process looks like, along with some high-quality review sources to help you pass with flying colors.

How To Start:

Your first step should be to familiarize yourself with the process of your respective Board of Emergency Medicine (ABEM/AOBEM). Take a look at the following websites to learn about the process of becoming certified—including the application process, timeline, costs, and important dates for registration and testing. Certification exams are only offered on a select few dates per year, so check this out far in advance to ensure you request those dates off!

Pro tip: If your job allows for CME money or reimbursement, inquire if this can be used to pay for your board certification examinations.

- MD graduates: [American Board of Emergency Medicine \(ABEM\)](#)
- DO graduates: [American Osteopathic Board of Emergency Medicine \(AOBEM\)](#)

Board Review Resources:

Below are some of the resources our council found helpful in reviewing for boards. In no way is this a comprehensive list of available resources. You can find an unending supply of resources at your disposal of varying levels of quality. Here are the ones we have found helpful. Reach out to colleagues as well to see what worked for them.

- **PEERprep:** Tried and true, the PEERprep program has guided many young physicians in their written certification preparation. With over 2,000 questions, this question bank is much more extensive than the PEER questions you may have done as a resident.
- **Rosh Review:** Another popular question bank, many residency programs have residents use the resident edition to help prepare for in-service examinations.

Rosh's 3,000 questions are used to formulate a predicted passing score and personal analytics, making this a high-quality resource to help you prepare.

- **AAEM Review Courses:** AAEM sponsors review courses for both the written and oral examinations. AAEM leaders and faculty are committed to providing you with the tools you need to be successful on exam day. Check out the following links to learn more:
 - [Oral Boards](#)
 - [Written Boards](#)

Maintenance of Certification:

Congratulations! You have become certified in the specialty of emergency medicine, a true honor. Now, what do you need to do to keep yourself board certified? Here are some articles that help explain the process of board certification maintenance.

ABEM follows a five year certification cycle. This involves an annual fee to maintain certification, MyEMCert Modules (four open book modules required per five year certification), an attestation to participation in one practice improvement project, and annual attestations to licensure and professionalism.

In case you've heard about different requirements from others - These are fairly recent changes. The previous 10 year certification cycle that involved another written certification exam and Lifelong Learning Self Assessment (LLSA) tests are no longer utilized, but the LLSA tests are still available for CME purposes if you need them.

- [ABEM: Stay Certified](#)
- [Everything You Need to Know About MyEMcert](#): Want further clarification on the new ABEM process? Check out this HippoED article summarizing the MyEMcert modules.
- [AOBEM: Continuous Osteopathic Recertification Exam \(CORE\)](#): AOBEM follows the Continuous Osteopathic Recertification Exam (CORE) annual cycle. This involves an annual fee and an open book examination with 40-60 questions divided over six modules (two core content-based, four article-based).

Pro tip: The deadline to register for the CORE is mid-November, and the exam must be completed by December 1, so do not wait until the last minute!

CME & FOAM:

You will find no shortage of resources at your disposal for your continuing medical education (CME). Many physicians use FOAM (Free Open Access Medical) education to ensure they are staying up to date with the current literature. Below you will find many popular blogs and podcasts, but the list is not all inclusive:

Before we start, let's talk about organization. You may or may not have heard of an RSS reader, but they can be a nice way to organize many of your favorite blogs and podcasts on your phone. Check out this link for information on getting some of the popular ones: [The Best RSS Feed Readers for Streamlining the Internet](#)

- **AAEM Podcasts:** An excellent resource to stay up to date on trending topics, gain new perspectives, and hear the voices of some of the coolest leaders in EM. Definitely check them out.
- **[Academic Life in Emergency Medicine \(ALiEM\)](#):** Has bountiful resources to help improve your EM practice, definitely worth checking out.
- **[Life in the Fast Lane](#):** An Australian EM resource that presents as almost a Wikipedia like encyclopedia of important EM topics. Of special note is their section on critical care and EKGs, something that can be helpful in practice as a quick resource but also a wonderful resource to direct students and residents to on shift for teaching points.
- **[emDOCs](#):** Succinct blog post articles about many important EM topics.
- **[First10EM](#):** Another resource for short articles about journal papers and important clinically relevant EM topics.
- **[The Skeptics' Guide to EM](#):** Great podcast with special focus on evidence-based medicine.
- **[EMCrit Project](#):** Scott Weingart's podcast and articles dedicated to knowledge of critical care and EM and how they intersect.
- **[EM:RAP](#):** EM:RAP describes itself as the #1 audio EM program, and has multitude of associated perks with a paid membership, such as procedural aid videos, current research paper discussions, review questions, and more.

CME Guidelines:

We all know that medicine is a field that involves lifelong, self directed learning. State medical licensing boards use continuing medical education (CME) hours/credits to ensure we are engaging in/staying up to date on the latest best practices. Each state you are licensed in will have their own specific requirements. Some states have specific requirements such as opioid education, domestic violence education, trauma requirements, etc. It can be a lot to keep track of!

Our best advice? Review your own state's specific requirements when you receive your full license. Find a good way to keep track of credits you accumulate. Some physicians do this by hand on paper, others keep excel spreadsheets, or save folders to their desktops with copies of their CME certificates. Some institutes/employers may offer apps to help with CME tracking. Remember, all of your board review question banks, courses, UpToDate searches (if you make an account!), and even passing your certification exam can earn you credits!

One thing you may run across is the terminology designating CME as AMA Category 1 or Category 2. Here is an article reviewing how CME credits work, what the difference in categories mean, and how credits are calculated. Worth a look to help your understanding of CME!

- [AMA PRA Credit System Requirements](#)

Pro tip: Many employers offer CME money or reimbursement to help earn these credits. Check if this is a benefit, and become familiar with the process. Sometimes you must get approval before using CME money, others allow for it retroactively. Different rules may apply for in-person travel/conferences, international travel, reimbursement of clothing or medical equipment, etc.

FINANCES:

Chances are if you are like most newly minted attending physicians you have accumulated some debt along the way. You also are finally starting to reap the rewards in terms of a larger paycheck, something that once seemed so far away! Knowing how to budget, pay off large loans, and think about things like retirement investing seemed at one time far off but are now here! Check out some of these resources that look at what can be an unpopular topic to discuss, money and how to be smart with it.

- **White Coat Investor:** This is a well known finance resource founded by an emergency medicine physician. There are great articles on various topics relating to financial issues that physicians experience. Additionally, the "Recommended" tab includes recommendations on student loan refinancing, disability insurance providers, physician mortgages, and much more.
- **Physician on FIRE:** FIRE? No, this is not a website talking about burn care. It is a site from a retired anesthesiologist who achieved Financial Independence to Retire Early (FIRE). While not specific to emergency medicine there are several great articles and resources related to physician personal finance.
- **Physician Mortgage:** Wanting to settle into life as a homeowner, but struggling to know how to navigate a physician home loan/mortgage? This is a nice article reviewing some important information as it pertains to physician mortgages.
- **Tax Deductions for Physicians 101:** As high-income earners one of our highest expenses will be taxes. While it is something we all have to face, there are strategies to be smart when it comes to income tax. Here's a nice site looking at some strategies to help manage a large tax bill.

Loan Refinancing:

If you are lucky enough to have no loans or have already paid off your loans, congratulations! You may skip this section. But if you are like most new attendings, your loan balance may be daunting and the interest rate even more so. If you do not plan to pursue Public Service Loan Forgiveness (PSLF), refinancing your loans should be near the top of your new attending to-do list.

- **Pros:** Interest rates are significantly lower if you refinance, saving you much of your hard earned money in the long term. Most suggest getting quotes from several different companies and comparing rates, or trying to get two companies to compete for your business with a lower rate.

Don't feel the need to stay loyal -as your balance decreases and your payment history increases, continue to shop around for even lower rates -at least annually.

- **Cons:** The biggest con is that federal loans are forgiven if the borrower dies, whereas refinanced private loans will not. If one has a family, it is important to ensure you have adequate resources (life insurance, disability, etc) that would also cover the remainder of your loan burden in case of the borrower's unexpected death or permanent disability.

Student Loan Refinancing Guide: This WCI article that links to many of the well known companies accustomed to working with residents and new attendings:

Investing in your Retirement & Using a Financial Advisor:

"If you don't find a way to make money while you sleep, you will work until you die," were the words of the very successful investor Warren Buffett. Although we all love what we do, there will likely be a time when we look to retire. The earlier you start investing in retirement accounts, the more time there will be for interest to compound resulting in larger returns in your initial investment and more money for your retirement.

Additionally, various types of investments may be taken from your pre-tax income, decreasing the amount of taxes you pay. When you take this money out during retirement your annual income will be lower. Hence, you will be in a lower tax bracket when you retrieve this money and pay less in taxes.

Some choose to manage their own investments. If you do pursue the use of a financial advisor, the goal is that the money you pay the financial advisor will be outweighed by the increase in return and time saved in comparison to managing your own portfolio.

There are a lot of financial advisors out there. If you do pursue one like some of our YPS members have, it is important to understand how they are paid. Most charge a percentage of Assets Under Management (AUM). This is quite appealing early in your career when you only have a small amount of money invested and will be paying the advisor a small fee. Depending on your income and that of a potential significant other, the AUM fee can be substantial later in your career when you have more invested. It is important to understand the percentage that they are charging. If you have a high-earning significant other you are investing with, you may want to consider negotiating a flat rate fee per year instead of the AUM model. This may cost more initially but save you significantly over the course of your career.

JOB & CONTRACT NEGOTIATION:

The moment you've been waiting for: Signing your first employment contract! Years of hard work and medical training will finally be fruitful for you in terms of having a job that rewards you well financially. Chances are, however, this may be your first foray into the world of contract negotiation. While you can always have a lawyer review your contract, it is wise to have some personal knowledge regarding physician contract structure as you enter negotiations with your future employer. You are valuable and bring a unique set of skills to a future practice, make sure you advocate for yourself!

W2 vs 1099?

Having trouble deciphering the difference between W2 contracts and 1099 contracts? Here is a nice article reviewing the differences between the two to help you make the best decision for you and your family:

- [The Important Differences Between W-2 and 1099 Physician Income, and Why It Matters](#)

AAEM/RSA put together an article on key issues to review in any contract you are considering signing:

- [Key Contract Issues For Emergency Physicians](#)

AAEM/RSA also has a podcast discussing this further:

- [Evaluating Job Opportunities: Making the Right Choice](#)

Wondering what sort of questions to ask during your negotiations with a future employer? Here is an article summarizing some key questions to make sure you have the answers when it comes to contract negotiations:

- [8 Questions Emergency Physicians Must Ask During Contract Negotiation](#)

A past YPS-AAEM member wrote this article about the different sorts of EM jobs available (hospital employee, CMG, locums, democratic groups). While some may be limited by geography, it still is a nice idea of options available to you in terms of a career in EM.

- *Common Sense* pages 9-10: [Group Decisions: Types of EM Jobs](#)

HOW TO QUIT A JOB:

Letting an employer know you're leaving can be difficult and stressful. You may feel like you're disappointing a friend, burning bridges, or leaving other docs high and dry. Make your exit a little more graceful and less stressful by remembering these tips:

- 1. Be honest:** Tell your employer the real reason why you are leaving. Getting caught in a lie can seriously tarnish your reputation. Being honest can also help improve the organization and its working conditions for future employees.
- 2. Remember that people are still paying attention to what you do:** It's important to remember that your actions will still affect how others perceive you. Continue to work diligently, provide compassionate care, and treat those around you with respect. Emergency medicine is a small community, and you never know who might be on a hiring committee when you're looking for another job in 5-10 years.
- 3. Plan for succession:** If you're involved in a committee or hospital leadership, or otherwise have any specific knowledge or skills you've picked up at your job, be sure to pass that knowledge along to someone else to ease the transition for your employer.
- 4. Give ample notice:** Your organization needs as much time as possible to adjust to your exit. On top of the time needed to find a suitable replacement, the credentialing process itself usually takes months. Try to give notice as soon as you are certain that you are leaving. Most jobs would like a three month notice at the very least.
- 5. Be prepared financially:** Before you put in your notice, ensure that you have enough funds to do so! You should have enough money in your emergency fund to get you through the transition. This means that you should be able to cover your cost of living, potential moving costs, and benefits (medical, dental, etc.) that may normally be covered by your employer for at least three months. Be prepared to leave immediately, as your employer may ask you to leave sooner than your desired date.

- 6. Know your current contract:** You'll want to make sure that you are familiar with your active contract before you resign. Make sure you know your non-compete clauses, required notice period, tail insurance clause, or any incentives you may need to repay.
- 7. Have a new contract already signed:** If you are leaving for a new career opportunity, make sure you have reviewed and signed the contract for a new position prior to providing your resignation notice.
- 8. Maintain a good relationship with your medical director:** Your medical director will often serve as a reference for future job opportunities. If you are more than two years out of residency, some jobs will not accept a reference that is older than 24 months.

TEACHING & EARLY ATTENDING LIFE

Transitioning from the role of a student to a teacher can be uncomfortable for many. We are used to many years of presenting patients to someone with more authority. Suddenly, that authority figure is you! Learning to be a competent teacher is important whether you are at an academic center or in community practice. Becoming an effective educator does not happen automatically, nor is it guaranteed that those who are strong clinicians will be strong educators. Take the time to look into the wealth of information available on the subject and make an effort to be the best educator you can be if your job will routinely place you in this role. Below, we will share some starter resources that can help make your next shift with a learner a successful one:

- **Finessing Feedback: Recommendations for Effective Feedback in the Emergency Department:** Annals of Emergency Medicine from our friends at ACEP published this nice article about the art of giving feedback, an incredibly important interaction for students and attendings.
- **10 Tips to Make the Leap from Resident to Attending:** EMRA put out a list of 10 tips and tricks for transitioning to life as an attending.
- **Teaching the Modern EM Resident:** EMDOCs, a popular blog site, posted an article on teaching the modern EM resident for those who are working at academic centers.
- **Teaching on Shift:** Great podcast from Amal Mattu, and Rick Penciner about teaching on shift.
- **Teaching on the Fly:** EMRA put out this podcast about strategies for teaching, another nice resource for those looking to spruce up their teaching skills.
- **The Learning Scientists:** If you desire more of a deep dive on becoming an effective educator, check out this group of cognitive psychological scientists. Most of their information is geared towards general teaching, but can readily be applied to the clinical environment as well. Their blogs, podcasts, books, videos, and downloads are all excellent tools!

USEFUL PHONE APPS FOR CLINICAL PRACTICE:

It's hard to imagine the days when our smartphones were not in our pockets, always available as a quick reference tool. Many of us built a nice library of medical apps during residency, but in case you may have missed them, see the following for a non-exhaustive list of our favorites:

EMRA Antibiotic Guide:

Our friends at EMRA have put out an annual antibiotic pocket guide for common infectious issues we take care of in the ED. It is available via a print edition, or Apple and Android app stores.

- [Apple version](#)
- [Android version](#)

MDCalc:

Very useful application for different scores and decision-making instruments we frequently use at the bedside in EM. Available on both Apple and Android platforms.

- [Apple version](#)
- [Android version](#)

Pacemaker ID:

Frustrated with the "but we don't know what kind of pacemaker this patient has" statements? This handy app allows you to simply take a picture of a patient's pacemaker on their chest x-ray with your cell phone, and it tells you with a percentage probability who the pacemaker manufacturer is! Problem solved.

- [Apple version](#)
- [Android version](#)

Pedistat:

Pedistat is an incredibly useful app to have for pediatric emergency calculations. Think of it as a virtual Broselow tape. The nice thing too about the app is that you can use age to estimate weight for when you get a radio report of a sick child on the way in. It gives you an opportunity to get ballpark equipment and medication doses ready to go. Some of the best five dollars you'll spend on your practice!

- [Apple version](#)
- [Android version](#)

UptoDate:

We're all probably familiar with this great resource for all things medicine. Most hospitals probably will give you access to this popular database, but it is a website to favorite or an app to get on your phone!

Pro tip: If you get access through your hospital system, create an account while on your hospital desktop computer. From there, you can use those credentials for free access from your phone for one year. As long as you log in annually from a desktop, your phone access doesn't expire! You also collect free CME while logged in using the app, which you may collect any time.