

Burnout? Not an Option

When medical students discuss emergency medicine as a possible career choice, someone invariably asks, “What about burnout?” I’ve never quite understood why so many non-EM colleagues seem to think burnout is more likely to occur in emergency medicine than in other specialties. Perhaps because EM is so appealing, it must be too good to be true. But after 3 decades, I have yet to see any data objectively supporting this obsessive concern, and it does not appear that EM is more or less likely than any other specialty to result in burnout. A friend and EM colleague of over 30 years, Anthony Mustalish, MD, celebrated his 70th birthday last month and a week later ran his eighth New York City Marathon. For Tony Mustalish, burnout is not an option.

A 1966 graduate of New York University Medical School, Tony was 2 years into his general surgery residency when he was called to active military duty. After 8 months of training in orthopedic trauma in the US, he was sent to Vietnam for a year, where he operated on direct battle and guerilla warfare casualties and in addition ran a volunteer civilian war casualty program. Each weekend, Tony helicoptered from his field hospital to operate on victims of “collateral damage” and always managed to return with a few extra unauthorized passengers—

children with severe orthopedic injuries who could only be successfully treated at his base hospital.

Tony Mustalish returned from Vietnam with a new sense of purpose, and after earning an MPH degree at the Harvard School of Public Health, quickly rose within the New York City Department of Health to become its deputy commissioner. But Tony also began applying what he learned in Vietnam to New York City emergency departments, and he has continued doing both emergency medicine and preventive medicine/public health ever since.

In 1977, Tony established the first department of emergency services in a hospital serving one of the city’s most disadvantaged neighborhoods and a few years later became the first director of emergency services at Lenox Hill hospital in Manhattan, where he ultimately became its senior vice president for hospital operations and its chief operating officer. In 1991, Tony joined the newly developing department of emergency medicine at what is now NewYork-Presbyterian Weill Cornell Medical Center.

Here at NewYork-Presbyterian, Tony has been the “go to” person for new ventures. When the emergency physicians became members of the college’s faculty practice a few years ago I couldn’t think of anyone other than Tony to be our chief compliance officer. When our emergency physician



informatics expert abruptly relocated this past summer, 12 weeks before we were scheduled to roll out an electronic medical record, Tony took over all of his responsibilities without being asked, attending the daily meetings, learning informatics, and ensuring the success of our “go live” in mid-October.

And therein lies the secret of avoiding burnout: If you ever feel that you are in danger of burning out, reinvent yourself—as Tony has done repeatedly—without leaving emergency medicine. Informatics, toxicology, international emergency medicine, and areas such as wilderness medicine and geriatric emergency medicine that have not even been fully developed will take you and EM to the next level. As for long-distance runner Tony Mustalish, who heroically began his medical career in Vietnam, neither his interest in emergency medicine nor any of the 70 candles on his birthday cake have any chance of burning out. □