



THE ST. JOHN'S TOOLKIT **FOR POSTGRADUATE WELL BEING**

To get the best out of your PG days

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THE ST. JOHN'S TOOLKIT FOR POSTGRADUATE WELL BEING

Pre-publication Sample Booklet

**This Booklet Contains Pre-Final versions of 10 chapters
out of 45 chapters**

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1 Why this Toolkit

“Focus on your goals, do not look in any direction but ahead”

Postgraduation is a very different and the most competitive period of a doctor's life. Getting an orientation to what is to be expected from you and how to face them prior to starting is a real asset. This Toolkit helps you to get prepared for what is in store.

This section will cover the thoughts behind this Toolkit, messages from dignitaries national and international. It also talks about the current challenges faced by the PGs.

PREFACE

Welcome, to the *St. John's Toolkit for postgraduate wellbeing!* Within these pages you will find simple and practical guidance for your wellbeing.

Importance of PG well being

Previously, any stress, was considered a 'normal' part of the medical profession. The generation before us didn't need to talk about it, and so we don't need to talk about it is a common prevailing myth! Habits of self-care should begin in residency to positively impact the training period and beyond.

Purpose of this book

This book aims to share information, strategies, and suggestions to improve a PG's health and wellbeing with an emphasis on information relevant to the local context and services available at St. John's. Our goal here is to show PGs as well as faculty who serve as guide and mentors to PGs what wellness is and why it is so important. What constitutes wellness for one PG can be different for another. But there are some universal elements to wellness that affect each PG. The elements are interconnected and contribute to how we live. However, each postgraduate may choose to prioritize these in a different way.

We hope that the chapters can enhance PG performance in professional roles, which would lead to improved academic and clinical performance, drastic reduction in medical errors, better engagement with students and patients, thereby leading to better overall satisfaction. Overall, the book would aid in developing healthy coping mechanisms, increasing resident autonomy and finally, building resident competence in all areas.

As an institution it is our responsibility to attend to our resident's health and well-being and develop programs for this purpose. Most importantly, training programs need to demonstrate that PG self-care is not an indulgence, but an essential component of the profession.



How to read this book?

Everyone will have their own unique approach to processing information. Some might prefer to read it all at once, some at different points through the course of a year, others might prefer to read it with friends and discuss the topics amongst each other, and there may be those who would like to make notes.

The tips & suggestions offered are not meant to be prescriptive. They have been drawn from research, training, the author's own personal experiences and student support programs that other PGs have found useful.

Possibly the first such book in India

To the best of our knowledge, with this toolkit St. John's will become the first institute in the country to bring out a book of this kind for postgraduates. This is something every Johnite can be proud of. This guidebook is just one way of promoting a culture of self-care among postgraduate students and will hopefully inspire institutions, policy makers for postgraduate courses, and teachers to broaden the scope of student wellbeing strategies.

We hope you find this guide useful and relevant. We welcome comments or suggestions. This preface version was used for the first edition of the book.

- Dr. Suhas Chandran and Dr. Denis Xavier

MESSAGE - Member, NITI Aayog

डॉ. विनोद कुमार पॉल
सदस्य
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12th March, 2020

Message

I am very pleased to know that St. John's Medical College is bringing out a unique book on post graduate wellbeing covering topics on academic, hospital as well as importantly, on overall wellbeing.

The Government of India and the Board of Governors in Supersession of Medical Council of India have worked systematically towards greatly enhancing both, the numbers of doctors in India and the quality of training. Towards this, several new medical colleges have been started in a short span of time, and more are coming up. We have already implemented definitive steps for enhancing the quality of academic, clinical and research training to ensure high quality and fairly uniform standards across the country.

One area we are working on is the wellbeing of our students, both undergraduate and postgraduate. We recognize that competition for the courses is increasing and workload, both academic and clinical is also increasing. Our young doctors in training are being affected.

This book from St. John's, which I understand is the first in India, is therefore relevant and comes at the right time. I hope that other medical colleges too use this book, as well as consider bringing out such books of their own.

I congratulate Dr. Xavier and Dr. Chandran the Editors, all the authors and the management of St. John's for this important initiative.

Vinod K Paul

Message - Director General ICMR



Prof. (Dr.) Balram Bhargava,
Padma Shri
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Indian Council of Medical Research
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I am delighted to learn that Drs. Suhas Chandran and Denis Xavier from St. John's Medical College are bringing out a book focused on post graduate (PG) wellbeing.

First I think that this is a brilliant initiative from St. John's. As an institution, St. John's has pioneered several academic, research and service initiatives.

This book deals with several important aspects of a medical postgraduate's professional as well as personal life. We read in the lay media about unfortunate and adverse incidents with PGs across the country. Medical literature too highlights physician burn-out. Clearly we need to do something about this. The 'St. John's Toolkit for PG Wellbeing' is one step in the right direction.

The different topics dealt with in this book are important and helps to deal with the issues facing our young doctors. Beyond academic and professional issues, other areas important for overall development and wellbeing such as ethics, relationships, financial, family and social aspects are addressed.

From the ICMR, in recent years we have taken several initiatives to promote research in the country. An important initiative is the online PG research training. India has a huge potential for research - we have diverse and plentiful clinical material as well as very intelligent and capable investigators. We need to implement the right strategies to leverage them.

The PG course is a right place to start. We want to make our PGs well informed and develop skills to conduct high quality and relevant research for our country. I am pleased to note that the online research training is being received well.

This book too deals with several topics on research and is timely for the PG students in India.

Once again, I congratulate the management of St. John's as well as the editors and authors of this unique book.

Balram Bhargava

2 Your Academics

"Strive not to be a success, but rather be of value"

Post graduates is thought to be all about working in the wards, labs, OPD or Medical College, but there are other facets that must be mastered, academic knowledge being one of them. From developing teaching skills to presenting in conferences there are numerous areas where we must sharpen/better ourselves. It is good to learn everything you can, anytime you can and from anyone you can during postgraduation as it will stay with you forever.

This section covers the academic side of your postgraduate life such as Academics, thesis, conferences, teaching and exams.

PREPARING AND PRESENTING FOR ACADEMIC SESSIONS



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Amongst the several qualities expected from a medical practitioner, one of the leading ones is an ability to convey a message in clear and concise manner, to a variety of audience. An academic presentation is a training tool to develop and refine this, during the post graduate course.

The guidelines for Competency-Based Postgraduate training for an MD program, includes presentations in broadly 4 categories. Each of these have a clear objective as listed below:

1. A **seminar**- for an in-depth reading on a small topic.
2. A **journal club**- for critically evaluating a journal article and familiarization with recent advances in a field.
3. A **clinical case discussion** - focuses on presentation of salient features with critical thinking skills in prevention, diagnosis and management.
4. A **conference presentation** - is a part of the critical requirements of a post graduate degree and ultimately helps in preparing the student with an extra-mural exposure.

The department academic presentations therefore serve as a platform for teaching and learning, with peers and seniors.

Preparation for the Sessions

For a Seminar

■ In-depth reading and comprehension of a topic:

It is essential for you to know the topic well before you present.

- The emphasis is on depth as well as the breadth for any topic.
- An overall understanding of the concept, is key to a good presentation. Therefore, read around the topic and not just the topic.
- If you are in the first year, then you may need about 4-6 weeks of preparation.

■ Resources:

- A standard textbook will serve as a foundation.
- This can be further built upon by additional readings from advanced text books or journals.
- Review articles are good resources to get an overall idea about the topic and the back references of these can be used for further reading.
- It is also advisable to take seniors' help to identify the key areas of focus in your presentation.
- Another important point is to know the standard treatment guideline in the given area.
- If a moderator is assigned, seek help from him/her regarding good resources.
- As you gain experience, you will require lesser time. But a thorough reading with at least 2 weeks of preparation is required even in the final year.

For a Journal Club (JC)

To choose an article for a journal club, the following are the criteria:

- a) It should be from an indexed, peer-reviewed journal. If you are not sure about the standard of the journal, seek help from a faculty member.
- b) The credibility of the article should be assessed by the affiliations of the authors and sources for funding.

The important parts of an article and what to focus on:

■ Article details:

- This should be presented in a tabular form with details on journal, authors and their affiliations, institutions involved, place of conduct, funding for the study and conflicts of interest.

■ Introduction:

- Epidemiology of the condition under study- with latest statistics at an International and national levels (A useful resource for this is the Global Burden of Disease (GBD) data accessible from www.healthdata.org).

■ Background:

- Includes what is already known in the topic.
- Current practices for prevention, diagnosis and treatment.
- Need for the current study.

■ Objectives of the study:

- What the investigators planned to do.

■ Materials & Methods:

- Study design.
- Study setting, site, population, duration, data collection methods.
- Inclusion and exclusion criteria for study subjects.
- Sample size and basis for calculation.
- Statistical method

■ Results:

- Present all the relevant tables and figures.
- Title of each slide should specify the result (not just saying 'results').
- Write a summary of findings on the last slide of results.

■ Discussion & Conclusion

- Previous studies and comparison of findings to this study must be presented. This can be done well using a tabular form.
- Strengths and limitations - In addition to that stated in the article, you must independently assess the article and state the strengths and weaknesses .
- The emphasis of JC therefore is not to be a mere conveyor belt, but to include intellectual inputs from you as a presenter.

Include a summary slide at the end, with few important take home messages.

■ Critical appraisal of the article:

- This is done according to the prescribed guidelines for each type of study. These are: CONSORT checklist for RCTs; STROBE for observational studies; PRISMA for systematic reviews and ARRIVE for animal studies.

- This is to be presented in a tabular form. Under each category, it should state whether the point is mentioned and give brief details.

■ References:

- This is an important section where you list out all the resources that have gone in for the preparation of the JC presentation. The format for writing references is Vancouver style. The electronic material accessed should additionally have the date of access.

Making the Presentation

1. Choice of a medium for conveying the information

- PowerPoint is the standard medium of presentation.
- There are certain instances during post graduate examinations when the examiners have asked the pedagogic sessions to be taken using chalk and board.

2. Making Slides

- **Before making the slides** take your time and prepare an **outline** to keep you on track, and guide you through the presentation. Keep in mind that each slide should convey one message (that can be summarised in one sentence).
- All slides should have a title. The slides should the content. **Use separate slides to convey different points.**
- Maintain time limits. Most of the presentations are scheduled for an hour. Prepare your talk for 45 minutes allowing time for discussion.
- Visuals can be much more effective than words and they help reinforce or complement the ideas you're trying to get across. Your visuals should be simple and related to the content on the slide.
- It is advisable to avoid cartoons which could act as distracters.

3. Skills of an Effective Presentation

- **Text on slides:** You want your audience to listen to you instead of reading from your slides, so less is more.
- Use short sentences and in bullets. **The text should only be a prompt for you to speak** and not the entire content. As memory aids, the speaker notes below the slides can be used for additional points that you need to explain.

- Type your own sentences. DO NOT CUT and PASTE text on slides.
- There are prescribed number of words per line and lines per slide. (**Rule of 7-** up to 7 words per line and not more than 7 lines per slide). This avoids overcrowding and makes the slide look crisp.
- Any **abbreviation** used on the slide should be written in the bottom of the slide with the expansion, especially those that are not common (for e.g., ICH-GCP is International Conference/ Council on Harmonisation- Good Clinical Practice).
- Use a consistent **template** with the same **fonts**. The minimum font size is **24** for the body and **32** for the title.
- A simple font (SANS SERIF- that means, the font does not have loops at the end e.g., ARIAL, CALIBRI etc.) are preferred for better clarity.
- The **colour** of background and text depend on the presentation room. For a small room with dim light, a dark background with light text (A blue with white/yellow text is prescribed). For a large room or one with an ambient light, the background being pale (white preferred) with a dark text has superior visibility.
- **Animations:** Use object builds (animation) and slide transitions judiciously.

4. Gaining confidence to face a group of people

— Rehearse your presentation:

- Rehearsing is crucial to make you comfortable with the presentation.
- Rehearse
- Another strategy is recording your presentation. This lets you see where you are.
- Practice speaking clearly into a mike.

— Make eye contact with the audience:

- For your audience to engage, it is important that they can see you and that you make eye contact.
- Try to spread your gaze, rather than staring at one person.
- Avoid focusing intently on your laptop screen, your notes, or the floor. This can give the impression that you are nervous or uninterested and can also prevent you from projecting your voice clearly.

— For a case presentation:

- Case given on the same day and you present within 2 to 3 hours:
 - Objective: Mimic exam pattern to prepare you for the university examinations.

- Case to be taken in advance (few days prior to presentation):
 - Objective: Work up the case in detail. Learn in-depth about the disease. prevent you from projecting your voice clearly.

— Preparation for a case presentation:

If the case is given to you on the same day, there will not be enough time for you to study. You will have to concentrate on taking the case and arriving at a diagnosis. If the case is given in advance:

- Take the case in detail. Concentrate on not only the findings but also:
 - The order of examination of each system.
 - The right method of examination or eliciting a reflex.
- Quote standard sources for the methods you have used.
 - If you have chosen a case from another department (super specialty: cardiology, neurology etc.) consult the PG from the concerned department with regards to the case.
 - Consult the moderator assigned to you immediately after identifying the case and also before the presentation to get her/his inputs.
- For any case presentation write down the questions asked which will help you to work up cases in future.

— For a slide discussion:

- You will be given a set of slides and given about half an hour to one hour to view and write the findings. Later a faculty will discuss the slides with you. You will not have time to read up about the slides before making the diagnosis.
- However if the discussion with the faculty is on the next day, then you are expected to read up about the findings on the slides and participate actively in the discussion.
- Viewing slides daily will help you to quickly arrive at a diagnosis.

Take home message

- Presenting skills are for life and postgraduation is the time to master them.
- A sound knowledge on the subject is essential, therefore start preparation at least 3 to 4 weeks in advance.
- Take note of do's and don'ts and rehearse the presentation for good outcomes.



CHOOSING A THESIS AND MAKING IT RELEVANT

Dr. Anil Vasudevan,
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- ▶ **Why thesis is important:** A thesis is an important component of the residency as it helps the resident develop skill set for identifying and solving a medical problem and improve scientific knowledge. Thesis helps in developing analytical and critical thinking skills to synthesize and apply published literature to patient care.
- ▶ **How to make thesis meaningful and enjoyable:** Residents need to adopt an organized approach with clear time lines. A quick scroll through the thesis of seniors will provide an overview. A close working relationship between the student and a faculty mentor helps a lot.
- ▶ **Choosing the topic:** Thesis topic selection is vital. Discuss with your guide the broad areas of research topic and choose a narrow, well-defined topic which interests both of you. The topic should be relevant and feasible in the specified time frame. If recruiting patients avoid topics that require long follow up period or require expensive or complicated investigations.
- ▶ **Ethical issues:** You must address all possible ethical issues. Please note that ethical submission and approval can be lengthy. Performing unnecessary tests or increasing financial burden on patient to complete the study should be avoided. Follow the Good Clinical Practice (GCP) guidelines (ICMR 2017).

- ▶ **Writing the synopsis:** Synopsis is a brief write up of the research work that you intend to do. It should include a background of the topic; knowledge gap and rationale for the study, research question or hypothesis, specific objectives, appropriate methodology, estimating sample size and brief summary of statistical tests. Seek guidance of biostatistics department well in advance for study design, estimating sample size and statistical analysis. Where possible involve your guide in meetings with statistician. Data collection forms must be designed to ensure that relevant data are recorded.
- ▶ **Learning basic skills in research methodology:** You can do this by attending the PG workshops and other annual short courses that are conducted regularly at St. John's.
- ▶ **Timelines and guide meetings :** Be aware of the requirements, rules and regulations of the institution and the university deadlines. Draw up a realistic road map and set timelines. Seek help from your colleagues and peers when required and obtain their feedback. Meet your guide periodically to update work and obtain feedback, discuss problems and specific tasks. The regular meetings with your guide will also help if any course corrections are required. Negotiate with your guide and the head of department to allot you sufficient time for your thesis work.
- ▶ **Writing the thesis:** This is a time-consuming task and hence start early. Start writing the introduction, review of literature and methodology while collecting data. This will help in allocating more time for analysis of data, writing the results and discussion. Prior to analysis, ensure and check thoroughly for any errors or missing data. Use open source reference managers like Zotero or Mendley to archive and update references. Finish miscellaneous requirements like certificates, indexing, appendix, and formatting text when you are tired (post duty) and intense writing is not possible.
- ▶ **Common reasons for delay in completing thesis:** Expect to come across some troubles and turbulences which may cause delays in your thesis. Most of the common reasons for delay in completing thesis are avoidable such as failure to plan, lack of communication with the guide and keeping the writing of the thesis to the very end. In some cases, however, the guide causes delays, whether through benign neglect or other means. In other cases, a cause for delay may be unavoidable, such as sickness. The process will become manageable if you know the common causes of delay and its solutions; these are discussed below.

Reasons for delay and how to avoid them

- ▶ **Lack of regular communication with the guide:** To avoid delay, schedule regular meetings with your guide. If your guide is routinely unavailable to meet, you should mail and request for time. If a response within a reasonable time is not obtained, the Dean or Vice Dean.
- ▶ **Insufficient preparation and poor project planning:** Develop a framework of your action plan, and how it will be implemented prior to starting your thesis. Delaying starting working on the thesis project is perhaps the most common problem.
- ▶ **Planning was too tight:** Sometimes planning and setting deadlines may not be realistic and not in accordance to the time you can devote to your thesis (e.g., Planning to collect 50 cases in 6 months whereas the clinic only sees 25 patients related to your thesis in 6 months). Make sure that you are fully aware of how much work is going to be involved. Balance expectation versus the reality.
- ▶ **Project is too big:** The thesis may be on a very complex topic, may involve large amount of data collection or involve other departments or dependent on other people's work. Please choose a manageable topic and try to ensure that collaboration with only 1- 2 departments are required for your thesis.
- ▶ **Delay in writing the thesis:** The process of thesis writing becomes a mountain of problems if it is started too close to the deadline for submission.
- ▶ **Attitude and motivation:** Maintain a positive attitude and think of your thesis as a process rather than just a piece of work to complete. Motivate yourself and enjoy the journey as much as possible.

DO'S

- ✓ Read sufficiently about your research topic and chose a topic that interests you.
- ✓ Clearly define the research methods you will be using for actual research and data collection process.
- ✓ Divide your thesis into small sections for convenient and successful completion.
- ✓ Proactively plan and regularly review your progress against your timelines.
- ✓ Regularly communicate and get help from your guide.
- ✓ Reach out to your guide, peers and colleagues to seek constructive advice and obtain on-time feedback about your thesis.
- ✓ Designate time in your calendar for thesis writing.

DONT'S

- ✗ Don't procrastinate and let your research and paperwork pending till last minute.
- ✗ Don't set aside the wrong time for writing (E.g., At the end of doing a 36 hour shift).
- ✗ Don't feel overwhelmed because you can't figure out what you must do and hesitate to seek help.
- ✗ Don't get stressed and lose focus.

Take home message

- Thesis is an opportunity to develop important skill sets for identifying and solving clinical problems and contribute to improving patient care.
- With careful planning and diligent work it is easily possible to make it a meaningful and enjoyable learning experience.

CONFERENCES & CMEs



Dr Priya Pais,
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Should I attend conferences? As a post-graduate student, you should plan to attend at least one conference during your training period.

What is the difference between a conference and a CME?

CME: a 1 or 2 day long educational activity to maintain, develop or increase your knowledge and skills in a medical field. CMEs usually consist of a focused collection of talks or interactive academic discussions focusing on a particular topic in a field. E.g., CME on Urinary Tract Infection in Pediatrics.

Conference: a large (regional, national or international) meeting of individuals with interest in a particular academic field. It typically consists of lectures on recent advances, and provides an opportunity to discuss interesting research findings and case studies. Multiple areas of focus are discussed during the conference.

Why should I attend a Conference?

- 1. Exciting learning opportunity** - listen to, learn from and meet acknowledged experts in your field. Hear about the latest advances that have not yet made it into textbooks.

- **2. Learn how to do research & writing** - preparing an abstract for submission will guide you through the basic steps of conducting research. This knowledge is best acquired by 'doing' not reading about. Writing a well-constructed abstract with your mentor will expose you to the skill of scientific writing.
- **3. Speaking at a podium or poster presentation** - being accepted for presentation is a special accomplishment. An excellent addition to your CV. Although speaking is difficult to master and requires practice, senior faculty are very encouraging of PG presentations and often make it a point to speak with you and provide valuable feedback.
- **4. Networking opportunity** - you will get to meet other PGs, senior faculty and experts in your field. It builds a sense of community, and one day may prove to be useful to you in career advancement.
- **5. Freedom from the daily routine** - attending a conference is a refreshing change from your usual rigorous schedule of departmental activities This provides space to think about what you want from your future career.
- **6. Training requirement** - requirements for scholarly activity and presentations at conferences vary for the level of PG training. At the start of your PG course, you should verify the university requirements.

What types of presentations can I make at a conference?

1. **Research presentations:** A short summary is submitted as an 'abstract' in advance and goes through a peer-review process. If selected, you will be invited to present in any of the following formats:
 - a. **Poster presentation:** A printed summary of your research is printed on a large poster and hung on a board along with many others. During a poster session, a large number of delegates will walk by, and stop to discuss your work with you.
 - b. **Oral presentation:** A few abstracts are selected to be presented in front of a seated audience. Presentations are brief (usually <10 minutes) using PowerPoint slides followed by questions.
 - c. **E-posters and moderated posters:** These presentations are brief, oral communications of an electronically projected version of your poster slide.
2. **Case studies:** Interesting case studies are written up and submitted. If selected for presentation, the case details and a follow up discussion is conducted in front of an audience.

There are usually prizes for the best PG presentations at all conferences. Be inspired to give it a try!

I want to attend a conference! How do I make it happen?

1. Policy Awareness

- a. Ask your HOD about departmental policy regarding attending conferences.
- b. Questions to ask:
 - i. Which conferences do PGs usually attend?
 - ii. Is it mandatory that I have to present to attend the conference?
 - iii. If presenting is mandatory, who can I approach for mentorship?
 - iv. What financial support is available for me to attend a conference?
 - v. What is the policy about granting leave to attend conferences?

2. Plan

- a. Which conference you are going to attend well in advance.
- b. Discuss whether you will be submitting an abstract or case study that you could present at a conference. Could be an off shoot of the thesis itself.
- c. Does this require you to collect data? Do you need to apply for IERB approval?
Discuss timelines for data analysis.

3. Prepare

- a. Monitor conference websites (larger conferences) or email communications.
- b. Note submission deadlines, abstract submission guidelines (word limits, font size, spacing rules, allowance for tables & figures).
- c. Write your abstract rough draft well in advance and submit for feedback to your mentor. Make the suggested corrections, confirm the title and order of authors.
- d. Send your submission in time.

4. Practice

- a. Your submission is accepted for presentation - Congratulations!
- b. Begin preparation of your poster or slides following the rules.
 - i. Poster size - most important. Ask mentor/ colleagues for their poster templates in PowerPoint.
 - ii. Oral presentation - note time allotment (speaking + questions). Plan your slides. General rule: 1-2 slides per minute of speaking time.
- c. Submit a draft of presentation for mentor feedback. Revise your presentation.

- d. Present in front of the department
 - i. Poster -practice what you will say for each section - introduction/ methods/results/ review of literature/ conclusion.
 - ii. Oral - Practice what you will say for each slide. Are you able to keep to the time limit?
 - iii. Feedback - ask your co-PGs to note down each questions or item of feedback.
Discuss with your mentor and revise your presentation if needed.
 - iv. Finalise your poster and print. Save your final slides to the cloud as well as a pendrive.

5. Present!

- a. Arrive early at the venue/or identify the location of your presentation.
- b. Put up your poster and load your slides.
- c. Begin - Introduce yourself. Speak slowly, clearly and confidently.
- d. End with take home messages.
- e. Answer questions to the best of your ability. If you do not know the answer, it is okay to say you are not sure but will look it up!

Attending a conference?

Do's	Don'ts
1. Inform colleagues in advance of your absence	1. Expect your mentor to keep reminding you of deadlines
2. Use this opportunity to learn the basics of research methodology and scientific writing	2. Leave data collection & abstract preparation until the last minute
3. Plan your travel early to avail of low prices	3. Assume submission deadlines will be extended
4. Attend conference sessions even after your presentation is over	4. Finalise your poster printing until you have checked for errors
5. Enjoy interacting with other faculty and delegates	5. Forget to collect your conference certificate
6. Share your learning experiences when you return	6. Throw away your receipts if you are getting financial reimbursement
7. Guide your juniors when they are preparing for conferences	7. Abandon your presentation afterwards - why not write a paper for publication?!

Budgeting for attending a conference.

Create a budget under the following headings:

Travel = bus/train/ flight + local transportation.

Accommodation = Per night X total no of nights. Try to share with other Pgs

Registration = apply for discounted trainee rates in advance (usually requires a letter from HOD).

Miscellaneous = food (find the free lunches, drinks and snacks at the conference!), poster printing.

Other tips while attending a conference

- a) When at a conference click photos of posters that you found most interesting.
- b) Choose the sessions in advance that you want to attend at the conference based on your thesis, research interests, career interests, exam requirements and so on.
- c) Make a list of expected queries and be prepared for the same. Tell your friends and seniors to suggest questions, go back and research, and prepare answers for which dependable references can be quoted.
- d) Don't bunk sessions at a conference. Don't treat it like a holiday. You can see some of your seniors do this but mark out important sessions and attend as many as possible.
- e) Dress appropriately, and confirm dress codes beforehand (this is especially important in international conferences, or conferences outside India).
- f) You will find eminent people in your field of interests, go ahead and talk to them between the sessions. Networking is important.

Take home message

- Attending a conference is an opportunity not to be missed. Try to submit something for presentation.
- Putting together an abstract or case study is a valuable learning experience which will serve you well in your future career.
- Good quality presentations require advance planning.
- At a conference / CME you can socialise, network and learn something new, all while having fun.

Suggested Reading:

1. Thomas C Erren, et.al. Ten Simple Rules for a Good Poster Presentation. PLoSComput Biol. 2007 May.
2. Ten simple rules for making good oral presentations. Bourne PE. PLoSComput Biol. 2007 Apr 27;3(4):e77.
3. Writing Abstracts and Developing Posters for National Meetings. Gordon J. Wood, R. Sean Morrison. J Palliat Med. 2011 Mar;

3

LIFE IN THE HOSPITAL

"If it were easy everyone would be a doctor"

The hospital is the home of the PG, a place where he/she works and learns day and night. It is the place where most of the struggles are faced, where most of the mistakes are made and where most of your knowledge is gained. Tending to patients, night duties, taking tough decision can exhaust and test your limits but the growth during this time is tremendous. Making sure you are alert all the time, seeking help when needed and staying focused is very crucial for overall learning and development.

This section will take us through how to work better in the hospital, with our colleagues, in our department, how to deal with mistakes, legal issues and much more.

LEARNING THE ART OF CLINICAL MEDICINE



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The worst man of science is he who is never an artist, and the worst artist is he who is never a man of science, Trousseau stated in 1869.

Amidst the rush and technology remember that the center of your postgraduate training, especially for those in the clinical subjects is the patient, a human person. Clinical medicine is a science and an art. Both are essential. While the science may be acquired in the class room and journal club, the art is acquired at the patient's bedside - by spending time, carefully listening to them and their families, observing them and absorbing the often-unspoken signals. This art is best learnt by spending time (no shortcuts) and by keenly observing other senior physicians.

The word "awareness" is used in the context of meditation but is also part of the art of clinical medicine - developing awareness of the patient and his family. This implies going beyond objective measures such as blood pressure and temperature to subtle attributes including facial expression and other non-verbal cues.

These also serve as an early warning of patient or family dissatisfaction which may be defused in time before major medico legal issues erupt. In this chapter we offer simple age old techniques and suggestions to become an astute and empathetic clinician.

Always write a good case sheet.

Take your time with it and think as you write. Putting your findings down on paper helps you identify what you may have missed. Commit to a written differential diagnosis at the first evaluation and update it at each patient encounter. This is a discipline that pays.

Make management

Learn to be "suspicious". Even when a diagnosis seems obvious ask yourself if it could be anything else - is there anything that does not fit in. That is how unusual cases are picked up and what differentiates an astute clinician from a run of the mill practitioner. Interpret diagnostic tests in the context of the individual you are treating. You are treating the person and not a lab value. An isolated abnormal test when all else is normal is often of no consequence. Take note of it, repeat it if necessary. Don't chase isolated abnormalities. Remember someone is paying for the tests, usually the patient.

The first interview is of crucial importance.

It often sets the tone for all future interactions. Take a moment before you meet the patient to gather as much information from the available documents as possible. Your being informed has a dual advantage of increasing the confidence of the patient in you, and helping streamline the interview with greater efficiency. Focus on the personal basic details in the beginning of the interview, and allow the patient to take the lead by asking open ended questions and modifying the trajectory of the interview accordingly

Your non-verbal skills are as important as your verbal ones.

Patients usually pick up on gestures and facial expressions, and it becomes necessary to modulate these to portray an open stance. Maintaining eye contact is encouraged strongly. Discuss the agenda of the current interview, and ask the patient or caregiver if they have any more queries at the end of the session, after suggesting a short-term tentative plan of management. This increases confidence, and gives a sense of optimism, which greatly enhances the quality of rapport.

Validate their concerns

Express curiosity about their issues and empathy for their suffering. Always place yourself in their shoes and contemplate before suggesting any option. Imagine if you would be comfortable with whatever is being suggested. This litmus test can vastly improve your understanding of the patient at a deeper level.

Finally, how do you salvage an interaction spiralling down south? Be honest, and accept it in case the fault was yours. Don't forget, you can always go to the senior

residents and faculty and ask them to intervene and help you. Each mistake is an opportunity to better yourself.

Using a touch of humour can help lighten the situation, and goes a long way in allaying distress and anxiety, which can make patients more amenable to the management plan suggested.

Physical examinations

It is always good practice to explain the procedure clearly and take permission beforehand. There may be cultural issues with physical contact, and it is necessary for the patient and caregiver to understand why any particular procedure is being done. Needless to say, always

have a female attender or health professional accompany in case of male doctors examining female patients.

The value of the human touch

This is often underrated. The touch here does not refer only to that involved in physical examination. Even a warm handshake or a gentle pat on the shoulder (when appropriate) can go a long way in helping a patient relax. Although now a days it's common place for an Echo/Doppler/USG to threaten or even replace a physical touch, it's relevance goes well beyond these investigations.

Do not give false or difficult to fulfil assurances.

While it may help to build rapport immediately, irreparable damage can occur in case expectations are not adequately met. Patients also appreciate it if you're able to give them some general information about certain logistical issues, such as how to go about dealing with billing and paperwork. In case you are taking leave, it helps to inform the patient beforehand, and indicate the other doctor who can take care of them in your absence.

Clinical medicine is a team effort.

This team goes beyond doctors. Always discuss with the other members of the treating team. The non-medical members give invaluable insights, often those which we may have overlooked because our focus is on the blood parameters, the monitor beeps and the medications. They often have a better perspective of fears and concerns of patients and families who may discuss such issues more freely with nurses and others.

Take home message

The importance of the art of medicine is because we have to deal with a human being, his or her body, mind and soul. To be a good medical practitioner, one has to become a good artist with sufficient scientific knowledge. Technology covered with the layer of art alone can bring relief to the sick.

4 Beyond Academics

There is life beyond being a PG! While the struggles of life are ever present there are also opportunities to get the best out of life. Coping with finances, family issues, relationships, peers etc., are few of the big challenges a PG would face. It is important to schedule your priorities, take time to rejuvenate and balance things out to have a smooth work life.

This chapter will take you through life beyond being a resident, the struggles you might face and how to overcome and deal with them.



spiritual self care



physical self care



social self care



emotional self care



personal self care

SELF CARE STRATEGIES

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As a postgraduate, new set of challenges begin.

It is necessary, therefore, to plan a little about how you are going to meet these challenges. At the end of three years, you must not only become a trained professional, but also a more mature, confident and well - rounded individual. For this to happen, you need to ensure that you take care of yourself - professionally, personally and socially during the entire training period.

Here are some of the possible challenges and some suggestions on how to deal with them.

1. Managing time and planning work

- Cliched as it may sound, managing your time is crucial to ensure that you do not burn out. Sometimes we start very enthusiastically thinking we will spend every waking minute learning - either theory or doing clinical work.
- Admirable as these thoughts are, they are not really practical. It is necessary, therefore, that from day one, you start planning and managing your time better. Being at work on time is a good starting point.
- At the start of the day, make a tentative plan about the tasks to be done during the day. For clinical PGs it is taking case histories, collecting reports, making treatment plans, OT times, duties, preparing for rounds and overall being in full readiness for the day ahead. For non clinical PGs similarly plan your teaching, academics and lab duties well in advance.
- Keep a diary (either a notebook or a digital one) to note the tasks for the day and keep ticking off as they get completed. Be realistic about what you can achieve.

- Being aware of your roles and responsibilities - where they begin and where they end is also a skill.
- Try and complete as much of what you planned as possible.
- Having a start and end time to the work day is crucial to make maximum use of available time. If you have an end time and try to stick to it, you will find that you are more efficient in completing tasks than when you are prepared to endlessly stay at work.

2. Eating properly

- Eating regular meals is important but rarely followed.
- Eating at the wrong time, eating the wrong food and also eating too fast are also common. Keep some time for the most important meal of the day - breakfast. Have a good, healthy and hearty breakfast that will keep you going for several hours. Food is like petrol in the tank... the more the petrol, the longer you can carry on.
- Keep some snacks or fruit in your bag that can give you instant calories in case you are not able to take a break for a full meal.
- Or, create snack stations: Stock a small bin full of a variety of healthy snacks in a location that PGs visit frequently, such as the central work area or duty room.
- Having an early dinner once you reach back is also a good idea. It is also part of good planning not to skip any meals.
- You are likely to feel more tired not necessarily due to the quantum of work but also because you have not eaten enough.
- Balanced meals and healthy snacking are essential to maintain energy without peaks and troughs in glucose and insulin levels, which can otherwise cause feelings of fatigue and concentration difficulty.

3. Sleep consistent hours and also sufficient hours

- Maintaining regular times for sleep is necessary to ensure being alert in the daytime.
- Try to get 7-8 hours of sleep every day and plan everything else around that. If you are a morning person, get to bed early. If you are someone who works better at night, then make sure you wake up later.
- Going to bed and waking up at the same time every day is even better

- This sounds difficult when you consider the duties, studies, ward work, emergencies, late admissions etc. but be conscious of this aspect and try to get it right as many nights as possible.
- If you are unable to sleep, get out of bed and do a quiet or relaxing activity for 15 minutes, then return to bed and try to sleep again.

4. Exercise

- Take the stairs rather than the lift.
- Park your car or bike where you can fit in a 15 minute or longer walk to and from work. In case this isn't possible in the mornings (rushing for rounds, collecting investigation reports, filling up case sheets), take a longer walk while returning to your parked vehicle.
- Start a walking group with colleagues or a bicycle club and stick to a routine.
- Buy yourself a fitness gadget that when worn counts how many steps you take.
- Use this to increase your daily steps.
- Yoga or any team sport can also be very beneficial.

5. Having a bed time ritual

- Many times, we get into bed immediately after active, concentrated work like just switching off the laptop and trying to sleep. This is usually not a great idea as the brain requires some time to wind down and relax enough to get to sleep.
- Try reading lighter material, listening to some music, having a warm bath etc., as a prelude to going to bed. This might appear simplistic, but it does work.
- Have a daytime ritual as well. It may just be waking up, opening the balcony door and drinking a cup of coffee, but sticking to a routine, however simple it is, helps you focus for the rest of the day.

6. Disconnect

- Learning to disconnect from the internet is a skill we all have to learn. In fact, it may help to focus on other, more important things.
- Learning to disconnect from the internet is a skill we all have to learn. In fact, it may help to focus on other, more important things.

7. Do what makes you feel good

- It is sometimes necessary to keep time to do what you like to do as well - however short the time you have may be. Hobbies can help to ground you in the midst of all the work and rejuvenate you as well.
- You may want to take some music lessons, sign up for a swimming class, become a member of the local drama/ theatre group, teach language to underprivileged children - the choices are endless.
- Remember though, that these have to be fitted into an already hectic schedule and should not become stressful by themselves!

8. Connect with family and friends

- One of the main casualties during the PG days is the inability to stay connected with family. We try to avoid calls, tell our Family or friends that we will call them later since we are busy.
- Make time to talk to the significant people in your life (even if it's while walking to and back from the hospital, or in between wards!)
- Of course, they will understand but it is worth making a little effort to call or take personal calls as this will be a stress buster and will help you talk about and think about something that is totally disconnected from your work. You will make their day too!
- Making time to go home for festivals, watch a movie, meet elderly relatives who may not be around much longer are all good options to think of. The same applies to friends from your school or college.
- Find time to reply to piled up messages from relatives and friends, at least once in a while.

9. Talk it out with your peers

- Postgraduation is a archetype shared experience in medicine. Make use of it by recounting stressful incidents to other postgraduates and learn what stresses them out. The perspective it brings can be relaxing for both of you.
- This can happen even may be even over a 2-minute cup of coffee in the evening.
- This makes a huge difference to mood, and can be something which makes it that much easier for you to get through the next hours of work.

Take home message

Overall, it is essential to think of ways to take care of yourself in the midst of all the chaos around you. It may sound very difficult to do this when there is so much going on but remember, your life does not have to come to a standstill just because you are a post graduate.

If you take care of yourself, you will perform better. You will be able to think better and learn better. Do not try a major overhaul at one go but start making small changes on a daily basis till it becomes a habit and you would have learnt the skills to take care of yourself.

WORK-LIFE BALANCE

5 Suggestions for Success



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My guess is that most of you - busy postgraduate residents - who read this, would ask...*what life?* You only see patients, their records and discharge summaries on the one hand with miles of workups, presentations and demanding faculty on the other. Life is...what briefly happens between long periods of work and more work.

If you think this way, be assured, you do not walk alone. Your feeling is completely normal. This is a time in your lives which calls for hard work, the harder the better. The iron forged in the hottest of furnaces is the strongest. Each interaction you have with a patient and each word that you discuss with a colleague or teacher will make you the person you will become 20 years hence.

And who is that person?

Is he/she **Dr X** - a cheerful soul, who is known as a competent doctor, but also as a kind and gentle communicator with patients and others? A fun-loving doctor who is popular at the batch reunion...and who handles the community, his colleagues and a difficult patient with the same equable face?

Or is he **Dr Y** - a glum type, who everybody warns you to be "careful" with, whose stinginess with praise is exceeded only by his shortness of temper?

Getting to the 20-year mark from now is perhaps inevitable, but the manner of reaching it is very important. Here are five suggestions which might help you to become Dr X, the first type above, as opposed to Dr Y, whom all of us avoid...

Suggestion #1

Don't worry too much about the difference between "work" and "life", two apparently separate entities which need to be "balanced"

The term "work-life balance" seems to suggest that "work" and "life" are disparate items which need to be set against each other. At this point in time, your work is your life, at least most of it. And so be it. Accept that work is a large part of your existence. Don't fight "escape" to "life", the virtual heaven, which has family, friends, recreation and leisure. As you grow in the profession, workplace-time will gradually give way to time spent with other pursuits. The thing to do is to wait for this to happen. There is a natural rhythm to our lives, we just need to wait and allow it to happen.

Dr X allows for a natural rhythm in his life... he can work hard, play hard, and not do either if he doesn't

Suggestion #2

Constantly ask yourself "What is the ultimate purpose of it all?" and allow yourself to realise that the answers lie not in the "big" things, but in the small "90+ moments"

At this point, you will probably think that life's ultimate purpose is to get that degree, a job, a family, to excel in your field, get two big cars, a fancy lakefront apartment, and...more perhaps. Being 20-25 years ahead of this point, I actually know people who have done all that.

But all those people seem to experience the same irritations and ups and downs that affect us all. If it's not the patients, it's the traffic, if it's not the demanding professor, it's the stubborn employee...and so on. Looking closely at this journey, what they (and you and I) appear to live for - are those "moments". I believe that life is a series of moments, some of which are unique and special.

For example... *its evening, you're at the nurses station and you suddenly realise...the patients are all quiet, Mr A's creatinine has started to drop, blood required for tomorrows surgery is there, your HoD seemed okay when you presented today...in other words - Hey, you're actually feeling pretty good!* If you rate this moment between 0-100, you'd probably give it a 92, or a 95. It's these "90+ moments" that we all live for, ultimately. My suggestion is for you to actively pursue those moments, cherish them, and you will find that they increase in number, and suddenly - Life's good, most of the

Dr X recognises the 90+ moments... a strong coffee at 1030 during the rounds... what a feeling!

Suggestion #3

Identify that "other thing" you like to do in your life, apart from your profession

As we grow, we age. While aging is inevitable, aging "successfully" is the result of choices we make about our bodies, minds and souls. Research has shown that an important determinant of successful aging is our involvement with a hobby, something that gives us happiness apart from our core profession. It could be reading, or cooking, or dancing, or writing a journal, or ...anything, really. Our focus shifts, our minds get enveloped with this pursuit and deep down, we feel nice. At a later point in time, when the workplace is less demanding, this hobby will always be with you and make you feel good about yourself and others.

Often, at the end of along day, Dr X picks up a diary he's writing, and spends a satisfying half hour on it...simple sentences, uncomplicated grammar and lately...simple

Suggestion #4

Build a social network, find those friends who will be with you your whole life

However introverted we are, however demanding the workplace is, the social animal within each of us seeks out the company of friends. Those guys and gals who knew you when times were different, who have seen your highs and lows, and who are now there, to be enjoyed and cherished. The ability to make and keep good friends gradually diminishes with age. So find those friends now, and they're for keeps!

Okay, lets party.. Someone, call Dr X!!!

Suggestion #5

Take that first step, today!

Think about this, talk to a friend about it, go and have a milkshake...but do something, today! Get that smile on your face, and start your journey towards being that caring, kind professional that you are!!

FINANCIAL PLANNING



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Physicians are intelligent, hard-working, motivated and dedicated, yet they are often poor investors. The common belief is that the doctors are always wealthy and making good money, which is one of the reasons for people to complain about high health costs. The medical profession teaches about compassion, dedication, knowledge and hard hours but never about financial security.

Unfortunately, only a few doctors actually plan and control their finances judiciously. Most of the senior doctors would have gained financial wisdom through experience but the onus is on the younger ones to seek this knowledge. Postgraduate days are a good place to start during the transformation from being financially dependent to being independent.

The dire need for financial planning

The current younger generation of doctors comes with a different outlook towards life compared to yesteryears. In today's world, the idea of settling down for a young doctor is not necessarily an own house and car. The advancement in services like rented cabs and apartments a mere click away in phones, younger generation feels self-sustained without possessed material comforts. Added to this is the hidden finances or the virtual currency ranging from PayTm to G-Pay which is ubiquitous.

Doctors study longer than their counterparts in other professions and start earning meagre amounts in post-graduation period when their friends would have settled into a job. The difference in the fees paid and stipend earned in a year may look smaller, but the truth is a PG literally works around the clock to pay her/his tuition fees and still finds her/himself deficit financially and dependent on her/his family.

Financial Literacy

In between organic chemistry, integral calculus and relativity, nobody taught the importance of investments or taxes. In a way, we ended up challenged in financial literacy. Finding the balance between repaying debts and changing their lifestyles, young professionals are in the mindset that what is left may be used in savings.

The PGs may think that they will start saving once they finish studying and start earning after landing a good job. But the bottom line in financial literacy is start early and start now. A good method to plan financially for the future is to divide the years of early career years, peak career years and retirement years. The early years when the career just kickstarts there is a need for heavy work hours and meagre cash inflow. That is the time to start investments because this will lay the foundation for the peak career years like building a nursing home or buying an equipment.

The peak career years will bring in fair share of income flow but balances out with the expenses of family and the need to invest for the retirement years.

Taxes

Pgs get a stipend from which there will be a deduction of TDS. The only time when anyone pays attention to this detail is while filling the forms for an MCI inspection and the department clerk or office staff will call you. The order instance is the yearly visit to the student section to collect the Form 16.

Form 16 is a certificate an employer issue their employees. It validates that TDS has been deducted and deposited with the authorities on behalf of the employee. Employers must issue it every year on or before 15 June. The other earpiece of this stethoscope is the form 26. It contains details of various taxes deducted on your income by deductors: be it your employer, bank, or even a tenant.

PAN Card

The primary objective of PAN is to use a universal identification key to track financial transactions that might have a taxable component to prevent tax evasion. The PAN card is required by the student section for the TDS. Similarly, when we do any investments of more than 50,000 INR, PAN is a must. For various other transactions like buying stocks, buying property or vehicle and even getting a credit card.

Investments

A postgraduate living by himself on the stipend of 40,000 may not have enough to invest. Some may save up for their next semester fee while others may be finding difficulties to make ends meet with rents, EMIs and loans. The medical textbooks are never light on your wallet and depending on the specialty.

Lets learn about fixed deposits, recurring deposits and mutual funds. The stipend being credited through bank gives ample opportunities of starting investments. Postgraduation time can be used as a learning arc of financial returns by trying out smaller duration fixed deposits or mutual funds. The art of any investment is taking into account the duration and the interest rates across different banks and even post offices. Since most of the PGs cannot afford a lump sum to start a fixed deposit, a recurring deposit investment will be a better choice.

A mutual fund is a type of financial vehicle made up of a pool of money collected from many investors to invest in securities such as stocks, bonds, money market instruments, and other assets. Mutual funds are operated by professional money managers, who allocate the fund and produce capital gains (or income) for the investors. Each investor, therefore, participates proportionally in the gains or losses of the fund.

The stock market is a gamble, but with a sharp mind and constant time spent on the pulse and pressure of stocks, the doctor can predict the prognosis of his investments.

On the next visit to our campus Bank of Baroda lets also look at a glance at their interest rates and investment options. The investment option on the BOB mobile app. Also notice the investment plans in the campus post office.

Budgeting:

Many people think that budgeting is a financial constraint and annoyance but in fact, it gives you the freedom to spend judiciously. The priorities are the recurring expenses like room rents, mess bills and other essentials of modern age like the broadband and mobile bills. Next comes the extra necessities of petrol bills, the hunger saviour on duty days like Swiggy/Zomato and the occasional expenses of taking a breather. After all these expenses, a PG may find a difficult to plan for investments.

Some may prioritise hobbies, parties, and living up in general, and a married postgraduate has house rents, baby products, school tuition fees, house maintenance and maid related expenses. Many of the married postgraduate

students have to be dependent on their better halves for the fees and expenses. It therefore takes a strong mind, and a stronger will to cut off that extra expenditure and save up the stipend to give it back for the semester fees.

The Way Forward

Having a planned budget has its advantages like not spending money we don't have, a financially protected future, prepared for catastrophic expenditures, and also shows where we are spending unnecessarily. Remember there are also various finance consultancies which provide investment advice, these can be approached to clarify doubts, in case a professional opinion is required.

A contingency money of 6 months' salary worth should always be kept in the bank. Always seek out knowledge and experience in finances from the faculty during tea breaks. Find an investment which you understand and are comfortable with. There should a fine balance between short term pleasures and long-term perspectives. Postgraduate days are a good place to start.

Suggested Reading:

1. The White Coat Investor: A Doctor's Guide to Personal Finance and Investing by James M. Dahle, MD, FACEP (2014)
2. The Physician's Guide to personal finance by Jeff Steiner, DO (2013)
3. The Physician's Guide to Investing: A Practical Approach to Building Wealth by Robert Doroghazi, MD, FACC. (2009)

NIGHT DUTIES



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Congratulations! You have finally achieved your dream of bagging a postgraduate seat at St. John's. You have finished induction and started working in your unit. Then reality hits you - if you are in a clinical or paraclinical department, you will be doing night duties! Of course you have done these during internship - the difference is that now you are in a position of responsibility, are expected to accurately assess and monitor patients and keep them safe throughout the night and sometimes make independent management decisions which may impact the outcome of the patient. All this, during the night, when you desperately want to sleep.

'Long hours, saving lives'

It is well-known that postgraduate students work hard for very long hours, sometimes 36 to 48 hours at a stretch. Their work saves lives and makes a big difference to humanity.

This can be associated with not only physical but cognitive challenges as well. Another point to keep in mind is that at night, a hospital will have limited resources available - for example, labs may take longer to generate a report, support staff may be fewer in number, and patient's caregivers may not be readily available. Hence, the PG would have to be reasonable with their demands to patients during a night duty. All these factors further increase the challenge that a night duty presents to the PG student.

So, why is staying awake during the night difficult at all?

The physiological processes of our bodies are controlled by a circadian pacemaker situated in the suprachiasmatic nucleus of the hypothalamus. Circadian rhythms are influenced by natural light and darkness and run in 24 hour cycles. Our body slows down at night and prepares for sleep, facilitated by release of melatonin from the pineal gland, which makes us sleepy and less alert at night. Hence during night duty, we are fighting against our natural programming to sleep and conversely, in the day time, we are trying to sleep when our internal clock is telling us to be awake and active.

Despite this, there is no doubt that working at night is a **great learning opportunity** providing a postgraduate with:

- a) Increased clinical responsibility
- b) The ability to deal with acutely ill patients hence improving clinical skills
- c) The opportunity to take individual informed decisions
- d) The benefit from one-to-one teaching by seniors
- e) In many specialties, opportunities to do procedures and surgeries

All these factors enhance competence and accountability and boost confidence levels of postgraduate students.

The important thing is to do an effective night duty, where you are able to work at your optimum best - remember that patients are most vulnerable at night and you need to be awake, alert and able to make accurate decisions. Beginning a night when you are fatigued or sleep-deprived can be dangerous - you may lose insight, hence keep doing the wrong thing and convince yourself that everything is fine, you may lose your sense of empathy and are more likely to lose your temper with patients and colleagues. Errors could happen in simple tasks such as calculating medication. Also, the ability to process and analyse information suffers, hence it takes longer to assess a patient and reach a diagnosis.

The following tips can help you prepare physically and mentally to overcome the challenges presented by night duties, avoid getting stressed out and do your best for every patient in your care.

1. SLEEP

- a. Adults need about 7 - 9 hours of sleep per day to function well. Lack of sleep leads to “sleep debt” which can be paid back only by catching up on sleep you have missed as soon as possible.
- b. To avoid excessive sleep debt, try to have a nap before your night duty.

- a. If you are doing consecutive nights, you should sleep 7 - 9 hours during the day. Avoid stimulants before going to sleep, but do have a light meal so that hunger doesn't wake you up.
- b. Your room should be quiet, dark and at a comfortable temperature.
- c. Use ear-plugs to block out noise.
- d. Control light exposure by using curtains or eye-mask to block light.
- e. Do not watch TV before going to bed and switch off digital devices e.g., computers, tablets, mobile phones.
- f. Exercising or reading a good book before bed can help your mind unwind and ready itself for rest.
- g. After your final night shift, try to return to your normal sleep routine as soon as possible.

2. NAPPING

- a. If possible, have a couple of brief naps of 20 - 30 minutes during the shift. This will relieve fatigue and help you to stay alert and focus better.
- b. But be careful not to take a longer nap, as if you are awakened from deep sleep, you will have greater sleep inertia and will not feel refreshed.
- c. If you are taking a short break to sleep, it is important to tell key people where you will be sleeping, so that you can be contacted easily if required.

3. FOOD

- a. Keep well-hydrated and maintain your regular eating pattern as much as possible during night duties.
- b. Have a good meal before starting your night, but not too heavy as that can make you feel sluggish. This will coincide with your usual evening mealtime anyway.
- c. Your "lunch" should be a post-midnight meal and breakfast would be the usual meal at the usual time, when you have finished your night and are preparing to sleep (if you have consecutive night duties).
- d. Carry healthy high-energy snacks with you e.g., fruits, salads, dry fruits and nuts, protein bars.
- e. Avoid fried, spicy, sugary and processed foods during night duties. (Swiggy and Zomato may be convenient options given our poor canteen facilities! But even when ordering food, choose healthy options.)

4. CAFFEINE

- a. Though coffee could help you to remain alert, in excess it can cause gastritis and tremors, hence use it judiciously.
- b. Smaller (quarter cup!) frequent cups are better than a huge dose before your night.
- c. The effects of caffeine kick in after around 20 minutes, hence a small dose of caffeine before a nap can counter the sleep inertia you may experience after you awake.
- d. Try not to have coffee after around midnight, so that it does not affect your daytime sleep (if you have consecutive nights).

5. HANDOVER

During night duties, it is often required for PGs to either hand over or take over patients from the previous team. This is a very important process which needs to be done systematically, to ensure patient safety and optimum care. Handover implies a transfer of responsibility of care to the next team and should include the following information:

- Clinical condition/diagnosis
- Status of investigations
- Treatment given so far
- Likely clinical course
- Possible complications and how to deal with them if they arise
- Plan for ongoing care

It is useful (and recommended) to carry out handover using structured tools or mnemonics, which would ensure that no point is missed. An example is DRAW (D - Diagnosis, R - Recent changes, A - Anticipated changes, W - What to watch for in the next interval of care).

6. OTHER TIPS

- a. Know your limits - if you are extremely exhausted, inform your consultant and ask for a short break. This will be in the best interest of the patient.

- a. Handover - Often during nights, you are expected to either take over patients from the previous team or hand over to the next. This is an extremely important process which impacts on patient care. Irrespective of a busy night duty, PGs should ensure that it is done in a systematic manner
- b. Finish up academic work e.g., thesis work, preparing for seminar or case presentations, well before your night duty. Don't assume that you can do it during the duty or the day after, after a sleepless night!
- c. Don't be afraid to ask your seniors for help, either directly or by phone or WhatsApp, however trivial the issue.
- d. Everyone is different - take time to find the right combination of techniques that suit you best.
- e. You could share the month's duty schedule with your family members, especially the dates of night duties, and also give details of emergency contacts at work just in case you are not reachable.

Junior Doctor Wellbeing Workshops



1 Need for the workshop

We realize that a book or toolkit alone will have limited impact. An in-person participatory workshop will complement the toolkit and have a synergistic effect. With this in mind, we plan to conduct four Junior Doctor wellbeing workshops per year for two years in different parts of the country.

2 Objectives of the workshop

- a. To provide different JDs wellbeing initiatives that are locally feasible and potentially effective.
- b. To enable the creation of a platform for JD wellbeing initiatives in the institute and nearby areas.

3 Motto of the workshop

Healthier doctors, healthier patients.

4 Technical Content

The module for the workshop will be co-developed by faculty from St. John's Medical College as well as faculty from other institutes across the country

The topics or areas will be categorised in to three broad areas:

- a. Self (relationships, mental health, time, finance and self-management, mentorship, social media)
- b. Work environment (academics, research, conferences, team work, legal issues, violence, night duties, work life balance, death, terminal illness, ethical challenges)
- c. Family and friends (relationships, peer support, family support)

5 Methods

The workshop will NOT have didactic lectures. Instead they will be completely participatory and involve icebreakers, small group activities, mindfulness exercises, somatic exercises to address stress and other reflective activities. Strategies for the issues identified in the workshop will be evolved amongst the participants. The PG wellbeing toolkit will serve as a manual and support with additional insights. All the sessions will only be in-person

6 Dinner Meeting

A dinner meeting will be organized and supported by the host institution. The invitees will include heads of institution of all participating institutions in the region, key management, key medical college faculty and junior doctor representatives.

Objectives of the dinner meeting are:

- a. To decide how to best execute the ideas generated at the workshop
- b. To create a junior doctor's wellbeing committee at the host institute
- c. To set up of a nodal centre for JD wellbeing in the host institution that will support the nearby institutions

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We recognised that PG well-being is of paramount importance. This book is timely and relevant. The issue dealt with are not just on enhancing professional wellbeing, but also has a strong focus on the personal aspects.

While it has a focus on St. John's, I am sure PG students from other institutions in India too will find it useful.

Rev. Dr. Paul Parathazham,

Director, St. John's National Academy of Health Sciences

Residency is a busy period. In the end to be successful, a positive attitude is what is required. I am sure this book will help foster that.

Dr. George D'Souza,

Dean, St. John's Medical College

First I think that this (book) is a brilliant initiative from St. John's, an institution, that has pioneered several academic, research and service initiatives.

We read in the lay media about unfortunate and adverse incidents with Pgs across the country. Medical literature too highlights, physician burn-out. Clearly we need to do something about this. The 'St. John's Toolkit for PG Wellbeing' is a step in the right direction.

Dr. Balram Bhargava,

Secretary, Dept. of Health Research, Director-General - ICMR

For medical doctors one of the most significant periods in their life is their postgraduate training. It is not uncommon feel the burden of a tough curriculum and the struggle to find time to unwind. This book aims to share information and strategies to improve a Pg's health and wellbeing.

Dr. Mohan Issac,

Psychiatrist, Australia, Visiting Professor, NIMHANS

To the best of our knowledge, with this toolkit St. John's will become the first institute in the country to bring a book of this kind for postgraduates.

Editors,

Dr. Suhas Chandran and Dr. Denis Xavier
