

“Yes!” I mean “No” ... (but I said yes)

There’s nothing like being that fresh-faced, new-kid-on-the-block, recent graduate with a mind full of up-to-date knowledge. Walking in on the first day of your postgraduate training program, you know you are going to be the best resident or fellow they have ever seen! At that very moment, you are the smartest you have ever been, and everyone knows it. You are eager to get to work and gain the respect of your new colleagues by happily and confidently accepting challenges, responsibilities, and whatever tasks need to be undertaken for the good of the team. But before you know it, you are drowning under a pile of papers with not nearly enough hours in a day to fulfill your commitments.

I can’t say “no” when a senior person, let alone my supervisor/preceptor, asks for help, but often, I should: not because I don’t want to help, but because I realistically CANNOT do it with all the other competing priorities I have on my plate. When I began my fellowship, I was saying yes to additional projects whenever I was asked. You want little ol’ insignificant *me* to help *you*?! YES! I gladly welcomed the opportunity to substantiate my value to colleagues and prove that they had made the right decision in hiring me for the job. Within a few months, however, the projects began to pile up on top of all the other work I had to get done, and to my dismay, the days were still 24 hours in length. I couldn’t breathe. I was drowning.

Why can’t I say “no”?

I’m not sure when it all started, but ever since my kindergarten teacher began asking for line leaders, milk passer-outers, and door holders, I’ve wanted to be involved in as much as I could manage. People like this are most often termed *overachievers*. In pharmacy school, I was in several different organizations and committees, had multiple leadership roles, volunteered weekly, played intramural sports—oh, and worked a part-time job. It’s exhausting just thinking about it, but I am easily bored and embrace staying active. Therefore, when an opportunity presented itself, I said “yes.”

I can remember long nights during my rotation year when I felt like the work was never-ending, but at least there was a deadline for everything. Even if my APPE preceptor asked me to complete a lengthy project, I knew that if I couldn’t complete it on time, there was another student after me who could. Those are the expectations when you’re in a role for only a limited time (4–6 weeks). Now, when my preceptor asks me to complete an assignment, it becomes my job responsibility, and if I don’t do it, it doesn’t get done.

I like to say “yes.” It feels good to say “yes.” It says that I am an integral part of the team and that you can trust me to accomplish what is asked. Sometimes, if the task is large enough, it even makes me feel important. The catch, though, is that the more *good* work you do, the more others will hear about it—and then the more they will be asking you to do work for *them*, creating a double-edged sword.

Avoiding cuts from the double-edged sword

Residency and fellowship are not 40-hour per week jobs like they appear on paper, but you already knew that. I come in early. I stay late. I make sacrifices, like turning down tickets to the Philadelphia Eagles game. *Ouch!* Mostly, though, I try not to spread myself too thin because the quality of work we do as residents and fellows is extremely important—and especially because, most times, the work is related to an actual patient behind the scenes. And prioritizing time for yourself to keep your mind sane and maintain social relationships is an important component of postgraduate success. We are all human and need to enjoy life. :) This means that sometimes (when the moon is full and Mercury is visible in the night sky), it is OK to say “no.”

How do I say “no”?

By no means is this a survival guide on pawning off work ... but if you find yourself in a “drowning” situation like I did when I began my fellowship, these steps may help. Here’s what I did to ease the burden of all the extra assignments I was saying “yes” to:

1. Open a dialogue with your preceptor. I have set up regular touchpoints with my preceptor so that I can fill him in on everything I am working on. This gives him a sense of my progress during my fellowship to make sure I’m on track with my outlined goals and objectives. This also gives me an opportunity to be open with him about my experiences. If the additional projects are becoming too burdensome, and I can’t submit quality work that I am proud to have my name associated with, I let him know. A strong preceptor-resident/fellow relationship with open communication is VERY important—essentially a “make-or-break” for how your postgraduate year will go.
2. Have a plan. Don’t go into any meeting without an agenda, especially if you’re bringing a complaint. I knew that letting my preceptor know I was being overloaded with work from other preceptors was going to warrant him asking me for a plan. He’s my preceptor, not my parent, and I have a “Pharm.D.” after my name. I should have been able to figure this one out on my own, but gaining his support for my plan was crucial.
3. Detail your plan, and listen. My plan was simple: have all outside additional work from preceptors go directly through my preceptor. First, this would give my preceptor the opportunity to determine whether the projects were appropriate for me and would not interfere with the primary responsibilities outlined in my job description. Second, it would take the pressure off me to say “no” to a senior leader in the company (potentially someone I will eventually have to interview with for a job). Third, I could maintain my sanity and not have to turn the lights off at the end of every business day.
4. Put your plan into action. Work with your preceptor to find ways to say “no” in a respectful and professional manner. Openly communicate if you have too much on your plate, and give constant feedback whether the agreed-on plan is working. Believe it or not, your preceptor is human, too, and most likely remembers being in your shoes as the low man on the totem pole.

The storm settles eventually

Once you figure out a way of saying “no,” or rather, not accepting EVERY project that comes across your desk, you will find that it’s not as scary as it seems. People certainly don’t want to set you up for failure and often don’t know you’re overloaded with work unless you tell them. The great part about health care is that it’s a team sport, so none of us go it alone. Being able to perform at your highest ability is what’s best for the team. Taking on too many projects and sacrificing yourself—and therefore the quality of your work—will only bring down the team. Keep open communication with preceptors, and be honest with them—I promise they will understand. Saying “no” is a tricky part of life that doesn’t always feel the best but sometimes is for the best and other times is necessary to be the best resident or fellow that you can be.

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