



Non-CME Webinar Series
designed with the trainee in mind

first Tuesday of the month



Academic Practice

Tuesday, February 1, 2022

7-8:30 p.m. ET

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Professor

Division Chief and Fellowship Director, Pain Medicine

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Faculty Disclosure

<input type="checkbox"/>	Nothing to disclose
<input checked="" type="checkbox"/>	Yes, as follows:

Honoraria/Expenses	
Consulting/Advisory Board	
Speakers Bureau	
Funded Research (Individual)	NIH, Boston Scientific, Abbott
Funded Research (Institution)	Boston Scientific, Abbott, Medtronic
Royalties/Patent	
Stock Options	
Ownership/Equity Position	
Employee	
Other	

Off-Label Product Use

Will you be presenting or referencing off-label or investigational use of a therapeutic product?	
<input checked="" type="checkbox"/>	No
<input type="checkbox"/>	Yes, as follows:



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Objectives:

1. Basics of academic pain medicine
2. Understand the challenges to academic pain medicine
3. Strategies for success



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Principles of Academic Pain Medicine

1. Clinical care
2. Education (students, residents, fellows, allied health)
3. Research and quality improvement
4. Community outreach and advocacy



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Challenges to Academic Pain Medicine

1. Decrease in reimbursement for services
2. Limited control of referrals (charity care/unfavorable insurances)
3. Limited control of practice environment (large academic centers)
4. Time for education
5. Time for research and quality improvement





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You:

- Need to know what is expected from you (your contract details)
- Your assignments

In:

1. Clinical care
2. Education (students, residents, fellows, allied health)
3. Research and quality improvement
4. Community outreach and advocacy



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Strategies: Clinical Care

- Address the basic needs first!



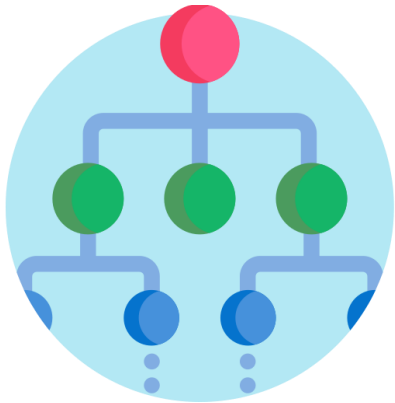
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Strategies: Clinical Care



- Engage with colleagues and faculty
- Define the initial goals of your practice
- Integrate your goals within your division and department
- Integrate your goals with the overall goals of your institution/academic center



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Strategies: Clinical Care

- Engage and take control
 - “Sit at the table – and don’t become the menu”
- Use organizational resources
 - Referrals, shared services (e.g., marketing, Decision Support Services), space, and equipment
- Collaborate with your colleagues

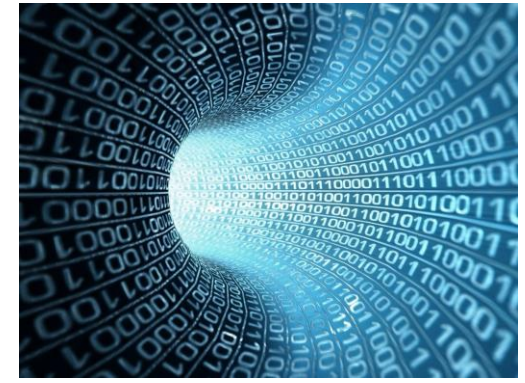
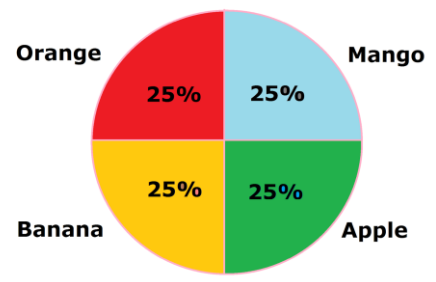


Strategies: Clinical Care

You will need:



DATA





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Strategies: Clinical Care

Useful data are:

- Linked to the goals of your practice
- “Live”
- Consistent
- Easy to understand





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Strategies: Clinical Care

Benchmarking the metrics of your practice in comparison to:

- Your internal database (historical)
- External (e.g., AAMC, MGMA, WMC)

2020 CPSC wRVU Benchmarks							
Specialty	N	Mean	25th %ile	50th %ile	65th %ile	75th %ile	90th %ile
Pain Management	80	4,433	3,072	4,298	4,781	5,344	6,891
2019 MGMA wRVU Benchmarks							
Pain Management	47	3,906	2,134	3,598		5,121	7,435
UHC 2018 Work RVU Benchmarks							
Specialty	N	Mean	25th %ile	50th %ile	65th %ile	75th %ile	90th %ile
Pain Management	75	4,528	3,368	4,412	5,044	5,484	6,736



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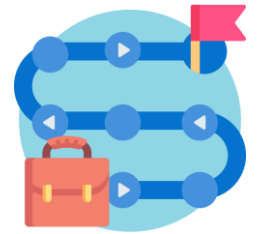
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Strategies: Clinical Care

Put it together:

- Adjust your clinical service line
 - Goals of practice, educational needs, and institutional objectives
 - Reasonable reimbursement for service
- Ensure appropriate staffing with members practicing to the highest level of their license





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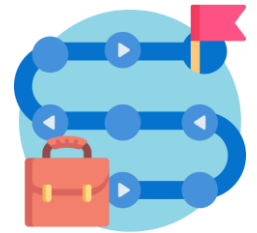
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Make it Comprehensive

Next to clinical service:

- Education
- Research
- Quality improvement





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Strategies: Education

- Address the basic needs first!



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Strategies: Education

Review your strengths and interests

- What is needed?
- Which trainees are rotating through your clinical practice?



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Strategies: Education

- Reach out to your colleagues
- Reach out to other disciplines and their faculty
 - Synergy? For example, opioid therapy at various clinical services
- Is there formal training for “educators”?
- Build connections
- Become a mentee
- Become a mentor



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Strategies: Research and Quality Improvement

- Address the basic needs first!



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Strategies: Research and Quality Improvement

Be a realist ...

- If you can, build on your foundation from your previous training program
 - For example, “finish” your research already started
- Be compliant (e.g., IRBs)
- Do not underestimate projects such as case reports – first steps first
- Retrospective review of case series
- Present at departmental and institutional meetings (e.g., M&M, Research Day)
- Interdisciplinary projects
- Research mission of your institution



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Strategies: Community Outreach and Advocacy

- Address the basic needs first!
 - Presentations for support staff and department
 - Presentations for other programs and trainees
 - Local medical societies
 - Apply to state and national societies and get involved



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Strategies: Summary

Put it together:

- Define your vision and create a plan to achieve it — as a team
- Set benchmarks
- Collaborate (clinical, research, education, administration)
- Obtain funded research and philanthropy
- Innovate to distinguish yourself
- Engage in marketing and community outreach
- Look for opportunities within your health system (underused ORs, marketing, shared services, research)
- Keep track of your achievements





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Thank you

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