

Doctors Without Boundaries

I was on vacation, it was 10 pm, and we were on our way home from dinner when I noticed that my cell phone had shut off. We had been busy that day, hiking in Big Sur, and I had drained my battery by using GPS to get to and from the hike and track our path. It was the first day of our first real vacation in months, and it felt good to be unplugged. Relaxed, I plugged my phone into the charger and got ready for bed.

As my cell phone was resuscitated over the next 10 minutes, it started buzzing and vibrating incessantly. I checked my texts and saw 8 unanswered pleas from a single patient, who was irate that I had not answered him. The staff had sent additional texts begging me to call him. My voicemail contained another 5 calls, all from the same number. Of course, I knew who this was and that there was little I could do at this hour, being 3 time zones behind and 3 hours past the emergency. In the morning, I called to hear the updates and manage the damage.

I can't remember the first time I gave my cell phone number to a patient. It had to be after I purchased my first cell phone, which was probably in the late 90s as I was becoming an attending physician. I am pretty sure it felt inconsequential at the time; little did I realize it would change my life. What started as the occasional, but mostly satisfying, inconvenience of managing patient calls after hours has insidiously evolved into a continuous consciousness of work. Let me explain.

Managing cancer patients is an increasingly complex business. When I started in my field of genitourinary cancers, there were few management options for patients with metastatic disease, who lived a couple of years on average. Because of treatment advances, our patients are now surviving 2 to 4 times longer with metastatic disease than they did 20 years ago. As fortunate as this is, extended patient survival also carries with it more complications, emergencies, hospitalizations, and the need for critical decision-making, much of which happens outside the clinic. This results in more calls.

To be fair, neither my patients nor my cell phone are to blame; I am fully responsible for my current predicament. Still, the fact remains that technology and culture have pushed me along this path. In the early days of cell phone use, I might have been able to let calls go to voicemail, where an outgoing message could kindly ask patients to page the on-call physician covering for me. But now, with texting, people expect an answer—if not immediately, then soon. The same has happened with

email, which was once a convenient medium to communicate with colleagues and family while I was seated at my computer. Now that these messages appear on my phone, I am inundated with unfiltered noise and 24/7 information. When the hours of the day do not allow me to read through my entire inbox, patient messages can get lost. Maintaining multiple email accounts only compounds the problem. More recently, I have become responsible for acknowledging and responding to patient messages and other notifications through our electronic medical record system. I might have 4 or 5 media to review before I can call it a night. So what can we do about it?

Recognizing our limitations and living within them are essential to maintaining some balance in our life. Without self-control, we are all prone to overcommitment, failure, anxiety, guilt, depression, and burnout. Setting boundaries can help us clarify, both for ourselves and everyone around us, what we can and cannot manage. In full transparency, I still haven't fully acknowledged my boundaries. But as I get older, I am recognizing opportunities to create space for others to lead in clinical care, research, and administrative roles. I am also learning from my younger colleagues how to use technology to manage my time more effectively.

Over the last year, I have brought more clinical faculty into our practice and have leveled off my patient load. Younger colleagues, who have grown up with technology, are much savvier at managing it. For instance, my colleague Matt Labriola introduced me to *Doximity*, the physician app that can manage incoming cellphone calls and help set boundaries.

In addition, mentoring and sponsoring colleagues and staff have allowed me to step back from some of the burdens of a professional career and focus more on personal relationships, outside interests, and hobbies that most people take for granted but physicians rarely have time for. It is time to start thinking of what I want to do with the hours outside of work when I leave the hospital, turn off the computer, and look around at the world of possibilities available to me.

Sincerely,



Daniel J. George, MD

