

## **WORKSHOP SUBMISSION FORMAT**

Use the following format to prepare your workshop proposal. Please limit your submission to one page.

### **Title:**

**Mindfulness, STAT: Strategies for Incorporating Mindfulness Approaches into Physicians' Workdays**

### **Author Information:**

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### **Background:**

Mindfulness meditation is an evidence-based intervention for supporting physician well-being and decreasing burnout by helping to support personal resilience (1, 2, 3, 4). Traditional training programs for learning mindfulness techniques are time-intensive, which can make the approach seem inaccessible or impractical to busy clinicians. As a practicing physician myself, I have presented mindfulness concepts and exercises to palliative care clinicians, oncology nurses, and other physicians and find it especially helpful to emphasize the role of informal mindfulness practices.

### **Objectives:**

After participating in this workshop, faculty participants will be able to:

- 1- Describe key concepts of mindfulness meditation and relate them to fundamental skills we have been taught in our training as physicians
- 2- Identify at least one existing personal coping strategy that incorporates mindfulness principles in order to maximize the benefits of that strategy
- 3- List two informal mindfulness practices that can be used in a busy workday

**Description:** Mindfulness, or nonjudgmental present moment awareness, involves observing physical sensations, thoughts, and mood (the “triangle of awareness”) and practicing noticing these elements without judging them or oneself. I plan to open the workshop with a discussion of myths about mindfulness, as generated by the participants. I have found abbreviated versions of traditional formal meditations to be helpful for demonstrating these concepts in my other workshops. Specifically, I plan to introduce the 3-minute breathing space and a brief mindful eating exercise as examples. After each exercise we will debrief our reactions to the experience and use that to illustrate relevant concepts. Then the rest of the workshop can be spent in discussing ways to incorporate mindful check-ins into a busy day, such as doing a mindful walking exercise while moving from one building to the next or to the car at the end of the day, or taking a single arrival breath at the door of a new patient before entering. I have a handout that lists 21 ways to reduce stress during the workday, and discussion about these suggestions is often lively. Finally, I will distribute a mindfulness resource handout; this includes recommended readings and also information about mindfulness smartphone apps.

**Evaluation:** I plan to distribute a survey at the end of the workshop asking participants:

- their satisfaction with the session.
- to list 1 existing coping strategy that they can do more mindfully (and how)
- to list 2 new practices they intend to try as a result of having attended

**Reflection:** The focus I have selected for this workshop is based on feedback I have received when I have taught this topic in a series. I frequently hear from participants that in between sessions they became aware of the mindfulness elements of activities they already found enjoyable. This new awareness then allowed them to further cultivate the benefits they derive from these activities. I also frequently hear that people tried some of the informal practices listed on the “21-ways” handout and found them interesting and worthwhile. I hope to be able to share these benefits with the workshop participants in order to help make mindfulness more accessible for physicians.

## References

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3. Fortney L, Luchterhand C, Zakletskaia L, Zgierska A, Rakel D. Abbreviated mindfulness intervention for job satisfaction, quality of life, and compassion in primary care physicians: a pilot study. *Annals of Family Medicine*, 2013; 11(5):412-420.
4. Krasner MS, Epstein RM, Beckman H, Suchman AL, Chapman B, Mooney CJ, Quill TE. Association of an educational program in mindful communication with burnout, empathy, and attitudes among primary care physicians. *JAMA* 2009; 302:12, 1284-1293