A Simple Pyramid Model for Career Guidance
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Medical educators frequently find themselves in conversations in which they are asked to offer career guidance. This may be part of a formal role as an assigned advisor, or in informal interactions with learners. Many medical schools have successfully integrated career advising for students in a multitude of ways, such as official mentoring programs, career services from nonmedical advisors, web-based resources, and career exploration courses.1,2 By comparison, the literature about career advising at the graduate medical education level is relatively limited, and provides little guidance for framing these advising conversations. Given the lack of formalized career counseling for residents, having a broad group of faculty skilled in these conversations is important.

We have found career advising conversations with residents to be common, and a natural pattern has evolved. The model presented here uses a simple structure to facilitate these important conversations (FIGURE). It uses a pyramid model that is approached from the bottom up, narrowing a learner’s perspective toward more clarity regarding an appropriate career choice, or a next step in the career path.

Assets: One’s Talents, Skills, and Accomplishments

The first step is for a learner to gain insight into the assets of his or her portfolio. Typically, learners have sufficient breadth and depth in their assets to enable pursuit of a wide range of career choices within their chosen specialty. It is the role of the medical educator to help the resident identify and articulate the specific talents, skills, and accomplishments that are important for career success.

Advisees should first self-assess their strengths by consciously listing the skills and talents they see themselves demonstrating in their medical career. Meaningful examples include procedural abilities, calmness in the face of crisis, research skills, or a vision toward innovation. In addition to inviting an opportunity for reflection and feedback, this step empowers learners to see their potential.

This step also requires the advisor to ensure that the learner has demonstrated the accomplishments necessary to achieve his or her career goals. Learners often make career choices without an in-depth knowledge of the particular specialties they are considering.3 The advisor might point out that the learner’s strengths do not match those required for a particular specialty. The advisor may provide specifics, such as recommending to a learner who aspires for a competitive fellowship that he or she may need to enhance scholarship portfolio, or that a resident interested in a fast-paced discipline may need to bolster his or her efficiency. See the TABLE for example questions that frame the advising conversation.

Joy: Sustaining Happiness in One’s Work

Burnout is increasingly recognized as a major issue within the medical profession.4 The literature has shown that job satisfaction is associated with lower rates of emotional exhaustion and burnout. Given the high risk of burnout in the physician profession, seeking joy in work is essential to long-term success and sustainability.4–6

In this phase of the conversation, learners should list what they most enjoy about being a physician. Examples might include caring and advocating for patients, providing reassurance, the adrenaline rush, the discovery of new knowledge, improving systems, 1-on-1 communication, and teaching. A purposeful conversation about finding joy in one’s work will help the learner recognize an optimistic view of his or her future.

Pride: Building a Legacy

The next level helps residents focus on developing their professional identity and pride. Furthering a vision of professional identity aids residents in reaching their highest potential.7 This aspect of advising pushes learners to have a vision for their future that satisfies their innate drive to be proud of what they do. As learners consider their legacy, they come to discover what possibilities generate pride. In this phase, the advisor might elicit examples of what the resident hopes to be respected for, or wants to be known as. In this phase of the advising conversation advisors need to be cognizant that learners may risk

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disappointment if they seek a career based on pride that does not build on their strengths and their joys.

**Purpose: A Career of Service**

Service is core to the medical profession. The literature on burnout articulates the importance of finding one’s work to be rewarding by recognizing that one can make a difference in the world. Finding meaning is increasingly important to job sustainability.8–10

In this final phase of the advising conversation, learners should list what societal or clinical needs they feel most compelled to address within the context of the work they have outlined. Examples might include a particular disease process or patient population the learner finds most in need of care and attention. In more advanced conversations this might be tailored to meeting a local need. For example, a graduating resident deciding between 2 job possibilities might choose 1 over the other given the opportunity to meet a greater need.

With the advising framework we propose, faculty advisors can lead learners through the steps of this pyramid model, encouraging residents to reflect on their self-perceptions regarding key aspects of a meaningful medical career. Conversation will assist learners to appreciate how they can optimize joy by approaching their career choice in a way that generates pride, recognizing the needs their work will address, and highlighting the greater purpose they will serve.

**Summary**

While no advising scheme will be all inclusive, this 4-step framework addresses preparation, enjoyment, legacy, and service, all key contributors to a satisfying career in medicine. It is intended as a model for a structured conversation between advisor and advisee that allows for meaningful individualization. Faculty advisors can inspire residents to select specific careers by focusing on learners’ assets, determining aspects of the work most enjoyed within their portfolio, considering important factors of pride and legacy, and finding meaning by identifying purpose. Our simple pyramid model is intended to facilitate

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<tr>
<th>Phase of the Pyramid Model</th>
<th>Example Questions</th>
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| 1. Assets                  | • What are your strengths?  
                           | • What skills do you see yourself using in your career?  
                           | • Are you talanted with procedures?  
                           | • If necessary, tell me about your evaluations and scores, research experience, and leadership.  |
| 2. Joy                     | • What specifically do you enjoy about being a physician?  
                           | • Do you find yourself more fascinated with the pathophysiology or the people?  
                           | • Do you enjoy working on your feet engaged with others all day, or do you need to have more time alone to be happy?  
                           | • Do you most enjoy asking questions or answering them?  |
| 3. Pride                   | • How would you like your colleagues to introduce you in the future?  
                           | • Can you see yourself as a ____?  
                           | • When recognized at your retirement, what do you hope is said about you?  |
| 4. Purpose                 | • How do you want to make the world a better place?  
                           | • What problems are you most compelled to address?  
                           | • What is the change that you would like to make in the world, using your talents while doing something you enjoy and are proud of?  |
meaningful career conversations between faculty and residents.

References


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