During the course of their careers, clinicians will be involved in adverse events, and will make mistakes. Each of us reacts in a unique way, but many of us share certain responses in common. Below are some of the most common experiences, some suggestions for coping, and available resources.

**Common Responses**

| Emotional | Depression, intense sadness  
|           | Shame, regret, guilt  
|           | Feeling of worthlessness  
|           | Anger, irritability, frustration, mood swings  
|           | Sense of isolation or self-isolation  
|           | Anxiety, panic attacks, fear  
|           | Overwhelmed, vulnerable  
|           | Loss of sense of confidence, self-esteem, professional stability  
| Cognitive | Decreased concentration  
|           | Indecisiveness  
|           | Obsessive rumination – constantly going over the event  
|           | Fear/avoidance of taking care of patients or certain types of patients  
|           | Loss of sense of humor  
| Behavioral | Difficulty sleeping  
|           | Changes in eating patterns  
|           | Decreased productivity  
| Physical | Lack of energy  
|           | Worsening of pre-existing medical symptoms  
|           | Heart racing, backaches, nausea  

**Coping**

Remember that this may be an overwhelmingly stressful time (the event may even come up again in M&M or peer review) and you might need to manage your expectations differently. This is also not a good time to make major life decisions. In addition, how you react, and how you take care of yourself or not, significantly impacts the rest of your team, your patients, and family members. This may help you in making choices to take better care of yourself and/or to think about seeking help. The table on the next page offers suggestions for better coping choices.

**Natural course**

Physicians who understand the long and short term effects of adverse events are better prepared to deal with them. Here is one model of a “natural course” after an adverse event. You may or may not fit this model.

| Initial | Shock - stunned, dazed  
|         | Emotional turmoil, confusion  
| Immediately afterwards | Denial, numbness  
| | Obsessive re-enactment, what if’s  
| | Isolation  
| Soon afterwards | Worry about opinion of others  
| | Self-doubts about career  
| Seeking equilibrium/help | Taking time off  
| | Making coping choices  
| | Changes in practice  
| | Psychological and physical symptoms  
| | Decreased job satisfaction  
| Moving on | Dropping out – transfer or quit  
| | Surviving – coping, but sadness, intrusive thoughts, reminders  
| | Thriving – gaining insight, perspective  

**When to Seek Help**

- Anxiety or distress interferes with daily work and relationships
- Remain preoccupied with event
- Self-medicate or abuse substances
- Colleagues, friends or family observe and comment on changes in behavior
- Significantly diminished work satisfaction
- New or exacerbation of old physical symptoms
## Suggestions for coping

<table>
<thead>
<tr>
<th>Suggestions for coping</th>
<th>Less helpful coping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduce responsibilities for a time</td>
<td>Pretend like nothing happened (&quot;bury it&quot;)</td>
</tr>
<tr>
<td>Become more aware of thoughts and behaviors – self-monitor</td>
<td>Alcohol, other substance use</td>
</tr>
<tr>
<td>Place more focus on healthy sleeping and eating</td>
<td>Hyper-vigilance – over-ordering tests, spending extreme time and energy to &quot;not make a mistake&quot;</td>
</tr>
<tr>
<td>Exercise (helps with physical stress symptoms, sleep and mood)</td>
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</tr>
<tr>
<td>Learn relaxation methods</td>
<td>Spending money, gambling</td>
</tr>
<tr>
<td>Remind yourself of what is going well in your life, and what you are grateful for</td>
<td>Emotional withdrawal from others</td>
</tr>
<tr>
<td>Spend more time with positive social connections, family</td>
<td></td>
</tr>
<tr>
<td>Spend more time with hobbies, leisure</td>
<td></td>
</tr>
<tr>
<td>See your PMD about symptoms and treatment (don’t self-diagnose or medicate)</td>
<td></td>
</tr>
<tr>
<td>Seek counseling as needed</td>
<td></td>
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<tr>
<td>Become an advocate for systems change</td>
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</tr>
</tbody>
</table>

### Post-traumatic growth:
Consider that, in time, for some people trauma can lead to opening up new possibilities and life choices, closer relationships, compassion for others who suffer, a sense of personal strength of having survived a difficult situation, a greater appreciation for life, or a deeper sense of spirituality.

### Resources

#### Take some time off

- Talk to partners, section or dept. chair about adjusting responsibilities
- HR* – [Personal time off policy](#)
- [Leave policy](#)
- [Flexible work options](#)
- Office of Work-Life* - [schedule a one-on-one appt.](#) to discuss career transitions

#### Talk to someone

- A Medical Staff Peer Supporter who has “been there” is available any time. Conversations are confidential. Call 650-736-8871 or email peersupport@stanfordhealthcare.org
- Help Center* 650-723-4577
  - M-F 9-5 business hrs/ M-F 8-6 counseling hrs
  - 10 free counseling sessions
- Mental health counseling available through your insurance (check back of insurance card)
- Your religious counselor or Stanford Spiritual Care Service 650-723-8222 page 15683
- Local Stress/Crisis Hotline 650-368-6655
- National Suicide Hotline 800-273-8255

* available to University employees

#### Physical Symptoms

- Your PMD, who can be uniquely supportive from a shared perspective
- Sleep – [maintain healthy sleep habits](#)

#### Family Issues

- Help Center* - free limited counseling is available for spouses, domestic partners and dependents up to age 26
- [Emergency child or elder care*](#)

#### Substance abuse issues

- [Recognizing Alcohol and Drug Abuse](#)
- Stanford [WellBeing Committee](#) – page Chair Dr. William Bergquist to start a confidential support process

#### Support/relaxation suggestions

- TED Talk “Doctors Make Mistakes”
- [Three good things](#) – before sleep, thinking of three good things that happened that day improves overall mood
- [Relaxation techniques](#)
- [Mindfulness](#) information/resources
- [Self-Compassion tools](#)

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1 Adapted from Charles 2005 Adverse Events, Stress and Litigation: A Physician’s Guide and Scott Qual Saf Health Care 2009 18: 325-330

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