

# Burnout in Advanced Practitioners and the Benefit of Protected Time

BETH FAIMAN, PhD, MSN, APRN-BC, AOCN®, BMTCN, FAAN, FAPO



**T**oday, I learned an interesting fact. There is a diagnosis code to classify what many of us currently struggle with: burnout. The International Statistical Classification of Diseases and Related Health Problems (ICD-10) has a classification code for burnout, lack of relaxation and leisure, and more in the section titled “Problems related to life-management difficulty.”

Advanced practitioners (APs) are familiar with the ICD-10 system, a systematic way to classify diseases, symptoms, and diagnoses in the clinical setting. In fact, the ICD codes are global classifications of disease initially set forth by the World Health Organization (WHO), which was formed in 1948. The diagnostic codes are currently maintained by the Centers for Disease Control and Prevention (CDC) and regularly updated.

Since 2016, Z codes were added as a subset of the many ICD-10 codes used to report social, economic, work, and environmental determinants known to affect health and health-related outcomes positively or negatively. Many APs in oncology experience stress, burnout, and a lack of relaxation and sleep because of long hours, lack of vacation time,

and mounting clinical responsibilities. Those of us harboring these Z code diagnoses are therefore at risk for negative impacts on our physical and emotional health.

## IMPACT OF BURNOUT

There has been a heightened awareness of the importance of work-life balance and the impact of burnout within the last decade. Major professional organizations such as the American Society of Hematology (ASH), the American Society for Clinical Oncology (ASCO), and the Advanced Practitioner Society for Hematology and Oncology (APSHO) have published surveys and other research papers on the topic. Approximately 30% to 40% of APs and oncologists reported elevated levels of burnout in surveys prior to 2020. This number has increased in the years since COVID to nearly 50% (Bourdeanu et al., 2020; Hlubocky et al., 2021).

Although the causes of burnout are often multifactorial, short staffing, lack of administrative time, compassion fatigue, and technological struggles have been cited as reasons why APs, nurses, and other oncology practitioners are leaving the oncology profession or seeking a job change.

Recently, authors and advocates from diverse backgrounds have highlighted strategies specific to APs to identify, prevent, and treat burnout. These include mindfulness exercises, taking scheduled time away, and advocating for administrative time (Toth, 2023; Leddy, 2022; Austin et al., 2021). Proulx (2021) published Emory Healthcare's leadership structure and highlighted the importance of standardizing administrative time, which they identified as a critical component of AP engagement and productivity across practice settings.

Recently, the APSHO Professional Development and Leadership committee published a series of articles on AP productivity, burnout, and work-life balance. One particular article, "Advanced Practitioners in Hematology and Oncology: State of the Workforce," dives into the importance of supporting flexible work schedules and allowing protected time to reduce burnout and improve work-life balance (Kurtin et al., 2023). I encourage you to share your thoughts on the topic of protected time, burnout, and other topics relevant to AP practice in the APSHO Community at <https://community.apsho.org/>.

## IN THIS ISSUE

In this issue's Research and Scholarship section, learn about the important work of Baugh and colleagues on the topic of burnout and resiliency in APs. In addition, read two online-first articles on adverse events associated with FGFR inhibitors for cholangiocarcinoma along with an overview of the subtype peripheral T-cell lymphoma, not otherwise specified. Learn about how a standardized educational curriculum for bone marrow aspirate and biopsy led to fewer incident reporting events, and the risk factors for immune checkpoint in-

hibitor-related myocarditis. A case study on using intravenous cetirizine to mitigate infusion-related reactions also summarizes the latest research on premedications. Finally, the Practice Matters article considers the ethical question of whether all patients have the right to testing for cancer-predisposing pathogenic germline variants. ●

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