Heal the sick, advance the science, share the knowledge.
For more than a century, Mayo Clinic has been recognized as one of the world’s premier medical centers. Evolved from the medical practice founded in 1859 in Rochester, Minnesota, by William Worrall Mayo, and led to renown by his physician-sons William J. and Charles H., Mayo Clinic today is distinguished for its excellence in patient care, medical research and education.

Central to the Mayo Clinic mission — to provide the best care to every patient every day — is a precept of its founders, “The best interest of the patient is the only interest to be considered.”

Today, nearly 3,000 physicians and scientists at three Mayo Clinic sites — in Rochester, Jacksonville, Florida, and Scottsdale/Phoenix, Arizona — treat more than half a million people each year. No matter the location, patients benefit from the Mayo Clinic Model of Care. This model brings together integrated teams of physicians representing various medical specialties to determine diagnosis and treatment. Patients at each location have access to the extensive medical resources available across all of Mayo Clinic.

Since the beginning, Mayo Clinic’s pursuit of excellence in patient care has been supported by a commitment to research and education: Research to assure access to the latest, most effective diagnostic methods and medical treatments; and education to promote objective analysis, prepare future generations of physicians and share knowledge and research discoveries with others.

A non-profit organization, Mayo Clinic invests all excess revenues in patient care, research and education. Information about the clinic staff, revenues, clinical, education and research programs is available at www.mayoclinic.org and in the most recent annual report.

While facts and figures help define and measure Mayo Clinic, it is the culture — and the people who bring it to life — that make Mayo a special place to not only receive, but also to give, care.

We hope the insights in the following pages, offered by our physicians in Rochester about what it means to practice medicine under the Mayo Clinic Model of Care, will provide a helpful starting point from which to consider Mayo Clinic in your career planning. Beyond these pages, we look forward to providing additional information and perspectives through future communication with you.
Many Paths Lead to Mayo Clinic Rochester. Will Yours?

YOU HAVE A GOAL IN MIND. You know what motivates you. You know what you need to be happy and fulfilled. You may be at a crossroads and need a change. Before you make the next career turn, ask yourself: Why did I choose medicine as a career? And where can I practice medicine in the manner I envisioned?

For Dr. Michael Ackerman, Dr. Sharonne Hayes and Dr. William Dunn, Mayo Clinic Rochester was the answer. Each had distinctly different practice goals, career aspirations and lifestyle choices in mind. What they found was a unique culture that is distinctive in American medicine.

Mayo affords physicians professional experiences and equips them with resources and opportunities that are unparalleled anywhere in the world. But what makes Mayo different from other institutions is the culture in which people not only begin, but build their careers.

At its essence, it’s about an attitude that expects the best in its people. Standards are high here — and you are equipped to excel. It is a learning environment. While students contribute to an atmosphere of inquiry, physicians who are committed to career development and self-improvement thrive here. This infuses Mayo with a palpable energy and excitement.

You are never an island at Mayo. You are automatically a member of a team and function as a team member on a daily basis. Teammates are eager to share knowledge and are interested in helping you succeed. It’s not about competition, it’s about collegiality.

There is a climate of respect. Whether co-workers serve patients directly or not, they work with someone who does, and that makes everyone important to fulfilling Mayo’s mission: the needs of the patient come first.

Even though Mayo is often referred to as a gold standard in medicine, it strives to improve and constantly seeks to change for the better. No matter how your time is apportioned as a clinician, educator or researcher, Mayo Clinic looks to its physicians to effect positive change that strengthens care for patients. After all, the patient is at the center of everything. If your interest is in practicing medicine with this priority, keep following the signs that point to Mayo.

“The CULTURAL ASPECTS of Mayo involve attitudes that make us different from other INSTITUTIONS.” William Dunn, M.D.

Top Ten Reasons Why Physicians Make Mayo Clinic Their Career Destination

1. The people. Challenging patient cases and inspiring colleagues bring and keep physicians here.

2. Priorities. Patients are the priority. No matter the question, the answer is always what’s best for the patient.


5. The culture. Collegial, professional, progressive.

6. Change. You can make a difference through physician leaders, committee involvements, quality improvement work.


8. The place. Clean, bright, pleasant. Beautiful art and architecture.

9. The choices. Excellent employer benefits, programs, and services. A great community in which to work and live.

10. Pride. Staff are proud to say they work for Mayo Clinic.
Mayo Clinic Rochester: Everything You Want in Your Career – All in One Place

CONSIDERING THE SETTINGS in which to practice medicine, Mayo Clinic is exceptional on many counts. In much the same way patients find everything they need here, you can too.

As the world’s first and largest integrated, not-for-profit group practice, Mayo Clinic Rochester has many unique attributes. Every medical and surgical specialty and subspecialty is represented among its staff of more than 1,700 physicians.

Mayo’s combination of mission-mindedness, team culture, and high standards are potent unifying elements for its sizable staff and expansive campus.

Three qualities undergird what has been described as an “experiment in cooperative individualism”: an ideal of service rather than personal profit; a primary concern for each patient; and every staff member’s interest in the professional progress of all staff members.

Even campus buildings are beautifully designed and fastidiously maintained to perpetuate heritage, make efficient use of the latest technologies, inspire patient confidence and trust, and instill staff pride.

Everything about Mayo contributes to your capacity to focus on patients and cultivate your career interests.

AN ENVIRONMENT OF SUPPORT AND GROWTH:

- Integrated systems, including an electronic medical record, make patient care information accessible, ensure accuracy and speed delivery of care. Systems and processes enable patients to have multiple medical evaluations and diagnostic tests on the same day or be scheduled for next-day surgery or other procedures.

- Mayo Clinic-owned Saint Marys Hospital and Rochester Methodist Hospital, with a total of 1,900 beds, provide care for hospitalized patients.

- Colleagues at Mayo Clinic Jacksonville and Mayo Clinic Scottsdale/Phoenix are available to you for consultation.

- Opportunities to teach and conduct research provide for further pursuit of professional interests.

- Mayo is a premier teaching institution and home base to five schools. Programs in laboratory and clinical research focus on the frontiers of cancer, bone and muscle diseases, genomics and proteomics, infectious diseases, and transplantation, to name a few.

- A pedestrian subway and skyway system connects downtown campus buildings.
Dr. Steve Kopecky has seen Mayo’s primary value from both sides: as physician and as patient. While in medical school in Texas, he battled cancer and was cared for at several institutions. When his cancer recurred in 1994, he was on staff with Mayo Clinic and experienced Mayo’s primary value as a patient.

“Everything here is focused on comforting the patient,” says Dr. Kopecky, a cardiologist. “My physician turned off his beeper and sat on my bed to talk with me. I had his undivided attention.”

Dr. Sharonne Hayes is a cardiologist who uses all the resources available to her to deliver the same focused care to patients in the Women’s Heart Clinic, many of whom have complex medical problems.

“I had a patient in her early 40s with serious and multiple medical problems,” says Dr. Hayes. “I spent two hours with her. Some people might think that kind of time is a luxury, but with many patients it’s a necessity, and given our mission, it’s an expectation. I sent her off for consultation with other colleagues and for tests. She needed subspecialists, including a neurologist and gastroenterologist.”

Dr. Hayes saw the patient two weeks later on a return visit. “The patient’s comment to me was, ‘I’m just an ordinary person, but I feel like I have been treated like a queen,’” says Dr. Hayes. “Most of her experience had nothing to do with me; it was every step along the way — all the staff and services she came in contact with — that made her feel that way.”

It was that kind of commitment to patients that convinced Dr. Kopecky to join the Mayo staff. “I chose Mayo because everything here is designed to put the patient first,” says Dr. Kopecky. “From my experience, there’s not even a close second when it comes to better patient care. If you want to treat every patient the way you would want your own mom treated, you can practice that kind of medicine here.”

“This common, patient-centered mission is extremely powerful. It makes Mayo an integrated practice where I can call on my colleagues for assistance at any time because we all know that meeting the needs of patients is the expectation.”

Prathibha Varkey, M.D.

THE MAYO CLINIC MODEL OF CARE

It is not unusual that a patient coming to Mayo Clinic in search of a diagnosis or treatment has already been seen by one or more doctors at other medical centers. Nor is it unusual that the patient is amazed at how quickly Mayo physicians arrive at an answer.

The Mayo Model of Care makes the difference. Care is provided by integrated teams of compassionate, multidisciplinary physicians, scientists and allied health professionals all focused on the needs of the patient. The Mayo Model of Care:

- Brings together top specialists in a multidisciplinary practice environment
- Fosters a culture committed to teamwork — and that places team success ahead of individual success
- Encourages an atmosphere of mutual respect
- Provides extensive resources and numerous support personnel, all available to physicians as they focus on patient needs, and
- Features common systems, including salaried compensation for physicians, that encourage the use of only tests or procedures deemed best for the patient without consideration of personal financial gain
At Mayo Clinic, the core principle of mutual respect is intrinsically connected to teamwork. The expectation is that everyone — physicians, nurses, allied health professionals — will be treated with respect as members of the patient care team. Respect drives collaboration, professionalism, and the seeking of multiple viewpoints and skills to arrive at the best care for patients.

This culture of respect is part of the Mayo Clinic Model of Care and starts with the simple, but profound, act of listening to patients. That same kind of respect extends to colleagues and co-workers.

Dr. Steve Kopecky did a residency at Mayo and then went into private practice in San Antonio, Texas, before returning to join the Mayo staff. He says he became a better cardiologist the day he returned. “It’s the doctors, the nurses, the pharmacists, it’s everyone doing their work as a team with a common mission that makes it possible for me to do what I do best,” says Dr. Kopecky. “Here, we all put our oars in the water together and row in the same direction.”

In any given day, teamwork will take different forms, but it all comes down to collaboration and doing what’s best for the patient. “We have patients who in three days might need to see four subspecialists and have a couple of dozen tests,” explains Dr. Kopecky. “We pick up the phone and consult with one another and order tests. Everyone and everything has evolved to focus on compassionate, efficient care of patients.”

The routine nature of consulting is why Mayo physicians are referred to as consultants. Nephrologist Tim Larson directs the Kidney/Pancreas Transplant Program and every day functions as a team member. “I interact closely with surgeons,” says Dr. Larson. “We round co-jointly and look at the medical and surgical-related issues of patients as a team. Our offices are even located nearby. There’s nothing to be gained by one of us or one group having more authority. The primary value is what unites all members of the team across Mayo locations, departments and specialties. The longer I’m here, the more I see how important it is to keep everyone on the team focused on the primary value.”

“Integration offers ease of communication from floor to floor, and from practice to practice. If the expert for a particular condition is at Mayo Clinic Jacksonville, I dial seven digits and consult with that person. We also have excellent allied health staff, which enable us to be of higher service to patients. Here when we talk about making changes to the practice, as a team we ask what’s best for patients and what impact change will have on them.”

“THE SUM-TOTAL OF MEDICAL KNOWLEDGE IS NOW SO GREAT AND WIDE-SPREADING THAT IT WOULD BE FUTILE FOR ONE MAN TO ATTEMPT TO ACQUIRE, OR FOR ANY ONE MAN TO ASSUME THAT HE HAS, EVEN A GOOD WORKING KNOWLEDGE OF ANY LARGE PART OF THE WHOLE. THE VERY NECESSITIES OF THE CASE ARE DRIVING PRACTITIONERS INTO COOPERATION.”

William J. Mayo, M.D., 1910
TEAMWORK INTEGRATES THE EXPERTISE of physicians across many disciplines and from across all three Mayo Clinic sites to provide high-quality patient care.
All Eyes on the Top Priority

“WE’RE VERY AWARE of anything that looks even slightly like it’s chipping away at the time we have with patients. We know we need to be aware of the bottom line, but the needs of the patient are always part of the discussion. The institution works hard to keep the patient first.”

Sharonne Hayes, M.D.

“The fact that we make our PATIENT CARE decisions independent of our FINANCIAL ones is unique in the way medicine is practiced today.”

John Knudsen, M.D.

To ensure that patients are the first priority, Mayo Clinic offers physicians the support and services to make that a reality in their work lives. That means maintaining systems that diminish or remove many of the distractions found in other models of medical practice and providing tools to enhance work efficiency and effectiveness. This includes everything from scheduling appointments and tests, to recordkeeping, to expediting communication between colleagues and among all three Mayo campuses.

The challenges of health care economics and constricting time with patients pose a professional and personal dilemma for physicians who are motivated to provide high quality, compassionate care. Mayo’s Model of Care serves as the standard for time with patients.

“I never feel rushed,” says Dr. John Knudsen, a radiologist. “There’s no one behind you telling you to hurry up. We’re all trying to do what’s best for the patient. That’s not the case in private practice, which is production-driven; you do as much as possible in the shortest period of time to maximize your return on resources. We work hard here, but with the patient as the priority and the resources we have, we can have time with our patients.”

Mayo Clinic’s electronic medical record is another essential resource. It centralizes all patient information in a standardized and accessible way, and expedites the coordination of many patient services. Physicians access the record electronically from any workstation in the clinic or hospitals. All medical information, laboratory test results and dismissal plans are kept up to date and help to make certain that patients receive the highest quality of care. As physicians consult with colleagues at campuses in Jacksonville, Fla. and Scottsdale/Phoenix, Ariz., the medical record is easily referenced by all.

When colleagues are located thousands of miles away, satellite video conferencing makes real-time communication possible with colleagues at all Mayo sites.

“In the transplant center, we have common standards of care that are important, along with shared processes for decision making,” says Dr. Tim Larson, medical director of the Kidney/Pancreas Transplant Program. “We have monthly summits and satellite video conferences with our Jacksonville and Scottsdale colleagues. This develops familiarity and common ground, and it enables consistency so that we can make comparisons and improvements to what we do in patient care. This is part of being one Mayo on three campuses.”

Another of the crucial elements of Mayo Clinic is that physicians are salaried. This compensation model enables physicians to focus on care of patients without consideration of numbers of procedures or tests ordered.
Pursuing the Ideal of Service

WHEN DR. LONI NEAL was asked to join the staff of Mayo Clinic in 1999, she eagerly anticipated opportunities to expand her professional vistas by caring for patients from around the world. But she wondered, “How will I fit into the culture of Mayo?” She found the answer in an enduring ideal.

Dr. Neal had worked for seven years in a medical university setting in South Carolina prior to joining Mayo’s staff as a consultant in General Internal Medicine. Her reservations about fitting in were less about being a female African-American physician, she says, and more about how a global society comes together in the diverse staff members and patients of Mayo.

An institution’s culture can be likened to a personality. It is comprised of values, beliefs, traditions, strengths, and areas in need of improvement. Dr. William J. Mayo addressed an important component of Mayo’s culture when he spoke of the “pursuit of the ideal of service,” which respects the dignity and individual needs of all.

“In any organization, the greater the numbers of colors and cultures represented, the more the issues that can accompany differences dissolve,” says Dr. Neal. “A diverse workforce also brings great brain power that taps into other cultures.”

A commitment to diversity also takes a commitment to service. “Mayo has developed international practices in which physicians, physician assistants, and allied health staff — including language interpreters — collaborate to meet patient needs,” says Dr. Neal. “It is helpful to have physician colleagues from India, Asia and many other countries who speak the languages and understand the cultures.” This commitment to service is foundational to Dr. Neal’s professional standards and personal satisfaction.

“We know that patients develop greater trust with their care providers and more readily comply with recommended treatments when we understand their cultures, values and beliefs,” explains Dr. Neal. That level of service yields the trust and respect that are the bedrock of the patient-physician relationship.

“That’s key, because at the heart of care, there’s a reciprocity between patients and doctors,” says Dr. Neal. “Often my patients are acutely ill, but they’re also brave. In the process of caring for them, they renew my strength and spiritual beliefs.”

Dr. Neal participates in opportunities that expand the diversity of her medical career experience at home and abroad. In the community, for example, Mayo partners with Hawthorne School and the state of Minnesota to offer breast screenings and mammograms free of charge to all women in Rochester who qualify, including African-American, Middle Eastern, Somali, Hispanic, and Hmong women. “At Mayo, and in Rochester, we have many opportunities to bridge cultural gaps,” says Dr. Neal.

Mayo physicians also participate in international meetings, which serve as intellectual and human exchanges that further enrich the ideal of service. “I represented Mayo at a meeting in Croatia last year,” says Dr. Neal. “Every patient you meet and every professional experience you have represent an opportunity to educate yourself about the world and to cultivate understanding of different cultures.”
Championing New Ideas with a Singular Focus

DR. WILLIAM DUNN did his residency in Internal Medicine at Mayo Clinic Rochester in the early 1980s. He spent the next three years as an internist in private practice in his home state of Pennsylvania before returning to Mayo to do a fellowship in Pulmonary and Critical Care. In 1989 he joined the staff. He answers questions about what makes Mayo Clinic unique and how the Mayo Model of Care is more relevant and essential than ever.

AN INTERVIEW WITH DR. DUNN

What made you want to return to Mayo Clinic?
It was the unique teamwork, the infrastructure, and most importantly, that patients are at the soul of leadership in this organization. There’s a self-sacrificial attitude about patient care and excellence here. Even while a visiting senior medical student, I experienced teamwork as a co-equal with the chief of Infectious Diseases. We rounded daily, and then we went to the cafeteria and talked over coffee. It was mentorship extraordinaire and it was incredibly powerful.

What makes teamwork here different than elsewhere?
The cultural aspects of Mayo involve attitudes that make us different. The philosophy of the Mayo brothers has been perpetuated here for decades. Their concept was that “it’s not about me.” Mayo fosters success in people who know “it’s not about me — it’s about my patients.” Fundamentally, staff here must be other-person centered.

Has Mayo encouraged your interests beyond patient care?
My team and I championed the idea of a simulation center here for several years before it became a reality. As I helped introduce this new idea to this culture, colleagues and committees looked for validity of thought and evidence of efficiency. It helped that I was tenacious. I am called a bulldog by some. Remember, here in the Midwest that’s a compliment. I’m proud of the fact that while other institutions have departmentally-based centers, the Mayo Multidisciplinary Simulation Center is truly institutionally integrated and accessible.

How important are such new endeavors to perpetuating excellence in patient care, education and research?
It’s critical because the center addresses all three like nothing else. It’s a safety and quality laboratory that can analyze and train around complex areas of risk. Things that emerge are studied well, discussed and will lead to more innovation in all areas of patient care, education and research. In our view, there’s no place like this in the United States.

What is the most rewarding part of your day?
I love everything that I do. Critical care is intrinsically gratifying. The patients get better before your eyes. And even when they don’t, you have the opportunity to focus on the needs of the spouse and family to help them deal with the crisis.

MAYO CLINIC MULTIDISCIPLINARY SIMULATION CENTER

The Mayo Clinic Multidisciplinary Simulation Center is one of the largest centers of its kind in the world. Teams of professionals from multiple specialties work through exercises using high-tech equipment to simulate real-life medical experiences. Simulation technology is a powerful tool for reducing medical errors, maximizing patient care and comfort, and enhancing teamwork. A pre-planned curriculum factors in human mistakes and exposes participants to scenarios ranging from early warning signs of a condition to irreversible death. The center can operate 24/7 and is accessible to staff from any Mayo Clinic site.
Conducting basic and clinical research to improve patient care and benefit society is one of Mayo Clinic’s core principles. The institution is committed to harnessing emerging knowledge by connecting the laboratory with patient care through translational research.

Mayo’s resources (including an unmatched treasury of medical records and tissue archives) and the diversity of talent committed to research are exciting and energizing to physicians interested in bench-to-bedside research. This is especially true as research opens new vistas for individualized medicine and as the genomics revolution reveals the fundamental processes of human life.

Mayo’s basic science and clinical departments are integrated and work together to investigate interesting, challenging and diverse groups of patients and to use the latest technologies. Centers such as the Mayo Clinic Center for Clinical and Translational Research centralize expertise and technology.

Staff also seek ways to conduct research with colleagues at all three Mayo sites. Mayo has the nation’s first multi-site Comprehensive Cancer Center, encompassing Rochester, Jacksonville and Scottsdale/Phoenix. The center is engaged in a broad spectrum of research, including basic science in the laboratory and clinical trials for patients.

Dr. Michael Ackerman determined early on to devote much of his career to research that would improve care for pediatric cardiology patients. “We get incredible opportunities here to study patients with unique diseases,” says Dr. Ackerman, “and to see more of that kind of patient than anywhere else on the globe. The clinical enterprise creates great opportunities for research that is translational.”

Dr. Ackerman’s use of genetic testing to study a young boy’s family history of Long QT syndrome paved the way for creating the Sudden Death Genomics Laboratory.

Other physicians, like Dr. Kopecky, had an epiphany that brought them to research. “I was treating patients with heart attacks and spending a lot of my time in the catheterization laboratory,” recalls Dr. Kopecky. “I realized the best way to beat heart disease would be to support research and to help people make lifestyle changes.”

He now spends a portion of his time in the Cardiovascular Health Clinic. It is in such clinical settings that research ideas are ignited and the potential to save lives is realized.
Dr. Loni Neal knows what it’s like for work demands to overshadow any opportunity for professional development. She describes her workload in a previous employment as “intense,” and more about surviving than thriving. At Mayo, she spends half of her time in Internal Medicine and the other half in the Breast Clinic, caring for patients with breast concerns, including malignancies. While she is passionate about caring for her patients, she did not see herself engaged in education and research. “Truthfully, I didn’t see myself doing research or education beyond caring for and teaching my patients,” she says. “I wasn’t accustomed to giving presentations or writing grants.”

The encouragement of colleagues, including a mentor, helped to transform Dr. Neal’s career. Her mentor recognized her potential and created opportunity for her to grow. “Now, I’m mentoring my nurse practitioner and helping educate medical students and residents,” says Dr. Neal. “I’m even getting accustomed to doing presentations. My mentor nudges me and I feel challenged and encouraged.”

There’s real enthusiasm about the things Mayo physicians value, and at the top of the list are the people with whom they work. Many physicians are experts in their specialties and are among the brightest minds in medicine. They also are genuinely eager to share their knowledge and experience in formal educational forums such as Grand Rounds, and in daily consultations. At Mayo, physicians are both teachers and students. Many physicians serve as faculty in one of Mayo’s five schools. “I love the open-mindedness of students and residents,” says Dr. Neal. “They teach me. They’re curious, bright and knowledgeable and challenge me to keep up to date.”

Physicians are also encouraged to become leaders. Formal courses equip physicians to serve on and lead institutional and departmental committees. Mayo-paid trip days enable physicians to increase professional competence, broaden knowledge and meet responsibilities to professional groups. Mayo gains from what its physicians bring back into the practice, and most importantly, so do patients. The culture also values publication in professional journals. To facilitate that, Mayo provides resources including library services, photography, graphic design, and editorial assistance. “People coming from academic settings are wowed by our resources,” says Dr. Ackerman.
A relative newcomer to the staff (she joined Mayo Clinic in 2002), Dr. Varkey’s professional life reflects a unique blend of fresh idealism and awareness of the need to keep innovation and educational excellence high on the institution’s priority list.

Her choice of Preventive Medicine as a specialty was shaped by her childhood. She was born in the United States and grew up in India before returning to the states in 1997. In India she developed an interest in public health while observing and working with many underprivileged and underserved populations.

As a reflection of her expertise and interests, her work at Mayo is never too predictable. She finds the variety energizing and key to her professional happiness.

“I might start my day counseling a patient to quit smoking or caring for a patient through the Refugee Clinic and being the first health care provider this person has seen in the U.S.,” she explains. “I also teach and mentor medical students and fellows.” Her time is also devoted to the quality improvement initiatives she spearheads in Mayo’s educational programs.

Making leaps from clinician to educator to quality improvement specialist is exactly what she dreamed of and worked toward. Before joining the staff, she graduated from medical school in India, did an Internal Medicine residency at Yale University, earned a master’s degree in health care management at Harvard, and completed a fellowship in Preventive Medicine at Mayo Clinic Rochester.

“If you are willing to work hard and are committed to excellence, you can advance relatively quickly, regardless of your years in practice,” she says. “That is the beauty of a work environment like Mayo Clinic.”

She is passionate about exploring new avenues to enhance quality of patient care and introduce education methodologies that strengthen Mayo’s ability to develop the best possible physicians for the future.

“What’s fantastic about Mayo is that achieving the highest excellence in patient care is a concept that has been part of its strategic vision forever. It’s clearly a part of what has and will set it apart in the future.”

LIKE MANY PHYSICIANS, Dr. Prathibha Varkey entered medicine wanting to heal the people of the world. She grew up in a family of physicians. “Both my parents, my sister and many cousins are physicians,” says Dr. Varkey. “It’s like Grand Rounds when we all get together.”

From Dr. Varkey’s perspective, among the best things about Mayo are:

- Access to superb colleagues and allied health staff
- Teamwork with a common mission
- Students that invigorate you
- Encouragement to learn, explore, experiment and innovate
- An environment in which young, hard-working staff can advance quickly

“My day is a WONDERFUL mix of clinical practice and education combined with AMAZING innovation, and research.”

Prathibha Varkey, M.D.
Wielding All Three Shields

AS A BOY, DR. MICHAEL ACKERMAN wanted to be Quincy, television’s forensic pathologist, or Evel Knievel. Or maybe join the Secret Service or the CIA. Even though the M.D., Ph.D. didn’t pursue those occupations, his career at Mayo Clinic does involve sleuthing and some suspense.

Dr. Ackerman sprinkles conversation with phrases such as “quantum leaps” and “ticking time bombs.” It’s clear that energy and dedication propel his passion. On a daily basis, he applies that drive to patient care, education and research, the three shields that comprise the Mayo Clinic logo. He has ample opportunity to do so with appointments in three departments: Internal Medicine, Pediatrics, and Molecular Pharmacology.

In the course of a day he toggles through doing research in his laboratory, seeing patients, reviewing the results of QT stress tests, leading teaching conferences, and working with Ph.D. students.

And he is up for the challenge. Early on in his M.D., Ph.D. program, he worked alongside a Mayo cardiac researcher publishing in *Nature*, *Science* and *Cell*. Even though findings of his own research were published in these journals, frankly, he says, the esoteric work seemed to lack relevance to the human condition.

That all changed one night during the second year of his residency in Pediatrics when he encountered a boy who had drowned in a local swimming pool. The boy was defibrillated by responders and resuscitated. The details of the episode caused him to wonder if the culprit was Long QT syndrome, a condition Dr. Ackerman had researched in graduate school.

The condition was confirmed and it was a moment of realization for him. “Research that seemed irrelevant at one point suddenly became very relevant,” he recalls. “The physician-scientist role made sense and it opened the door to research for me.”

Today, he investigates the genetic substrates of families with Long QT syndrome and guides one of the largest specialty centers on this condition in the world.

“The CLINICAL SIDE is the engine of the practice, and the RESEARCH ENTERPRISE is the fuel.”

“I want to make fundamental discoveries that will transform the lives of all patients who might have this syndrome,” he says. “That means making quantum leaps of knowledge for the whole field and impacting more people than we’ll ever see at Mayo.”

To make that happen means integrating the collective experience and wisdom gained from all three Mayo shields.

“For people interested in working here, Mayo offers the mentors, the colleagues, the resources, and the opportunities to help you succeed,” he says. “For clinicians, the delivery system is great. For scientists who want to do translational work that is patient-oriented, it’s pick your question and specialization. What you need to supply is the drive, passion and interest in advancing care.”

MICHAEL ACKERMAN, M.D., Ph.D.  
Specialty: Pediatric Cardiology and Cardiovascular Diseases

Patients: Are the sun in our solar system  
The Mayo Model of Care: It’s like Toyota efficiency with Betty Crocker love  
Your specialty: Long QT syndrome; I’m the electrical hiccup expert  
Your colleagues: They’re the best; they elevate and stimulate you  
Work/life choices: You can achieve balance here — even if you are a high-octane person  
Best part of the day: The walk home from work, time with my wife and our four children, teaching tae kwon do
Discovering the Right Balance of Work Life and Home Life

FROM THE OUTSIDE LOOKING IN, cardiologist Sharonne Hayes’ schedule could appear overwhelming. But the tempo of her life is just the way she likes it — as steady as a healthy heartbeat. Her secret? The choices she’s made.

“My CHILDREN and FAMILY are priorities. A major part of FINDING BALANCE is being willing to say up front what you NEED.”

In the course of a day, Dr. Hayes may care for several patients with complex cardiac problems in the Women’s Heart Clinic, which she directs, review research findings in the echocardiography lab, cheer poolside at her daughter’s high school swimming meet, and talk over family dinner with her husband, also a cardiologist.

“Truthfully, I wanted to be a mom before I wanted to be a doctor,” says Dr. Hayes, who is mother to an 11- and a 16-year-old. “I have one and one-half days off a week and I can use that time to make things like my children’s birthdays, their activities and family dinners a priority.”

She is quick to add that there are days when work encroaches on that time, “but then I also can do some work from home, like phone calls.” And she offers the caveat that every department within Mayo Clinic is distinctive in how it negotiates schedules. Mayo, from her experience, recognizes the pressures on physicians and is a receptive environment for balancing professional and personal life.

“When I was hired there weren’t many models within Mayo or cardiology for working part time,” says Dr. Hayes, “but I knew my priorities, and leadership listened.”

Dr. Hayes says that practicing to say ‘no’ has been particularly effective in helping her make cardiology compatible with family life. “I’ve found that you have many great opportunities at work and you have to be selective about committee involvements, extra projects, and other commitments,” explains Dr. Hayes. “Even within Mayo policies there is flexibility. We have a good trip policy and the time can be used for a variety of things, including service on professional boards, educational time or writing a paper.”

While the Mayo Model of Care affords latitude to achieve work and life balance, Dr. Hayes finds the balance boils down to one question: Will this choice align with my priorities?
In the land of Garrison Keillor’s Lake Wobegon tales, Lena and Ole jokes and Minnesota nice, Dr. Haro has found what he wanted in a life’s work and a lifestyle that embraces four distinct seasons.

“I erased a geographic limit to be able to practice the kind of emergency medicine I want for my patients,” says Dr. Haro. “And I found opportunities available that aren’t based on age, but on interest and capacity.” Equally important to him, he has found a lifestyle that works for him and his wife and their two sons, ages 5 and 7.

“I had never gardened before I came to Minnesota, and the boys help me with that,” says Dr. Haro. “We also go fishing in nearby state parks.”

The city itself maintains 60 parks that cover more than 2,500 acres, which include paved walking and biking trails ideal for running and bicycling. Farmers’ markets, local ethnic and traditional festivals, outdoor concerts, and plenty of sporting events are the backbone of the summer season.

With winter comes cross-country skiing, snowman building, ice hockey, and sledding.

“Yes, I’ve learned to live with a few months of winter,” he adds, smiling. “But the institution and the community absolutely make this a great place to live.”

Dr. Prathibha Varkey echoes the sentiment. “Most of your waking hours are spent at work,” says Dr. Varkey, “and if you’re not happy at work, you’ll carry that home with you. I play hard and I work hard.” In the summertime you might find her sailing on a nearby lake or hiking. But no matter the season, she’s eager to be on the dance floor. “There are dancing events here almost every weekend,” she says. “There’s also theatre, concerts and sporting events. And, the cost of living here is very reasonable.”

When Money Magazine named Rochester “Best Small City” in America, it said, “One thing to remember about Rochester is that it has the sophistication of a larger metro area, but not the congestion or the complications.”

With a population of more than 93,000, Rochester is the fifth largest city in the state. Most physicians make Rochester their home. Some physicians live within walking distance of Mayo; many others live in the city limits or in the nearby country, enjoying a drive of less than 30 minutes to work. Still others don’t mind a longer commute.

Rochester is situated just 75 miles south of Minneapolis/St. Paul. Dr. John Knudsen grew up in a small town in Texas, but has always enjoyed metropolitan life. “For me, Minneapolis holds sentiment because I visited my grandmother there as a child and learned to swim in Lake Harriet,” says Dr. Knudsen. “I live in Minneapolis now and enjoy the commute. I love what I do and the freedom to choose to work here and live within driving distance.”

Drs. Haro, Varkey and Knudsen: three transplants who have found in Minnesota the life and lifestyle they sought.
THANK YOU FOR YOUR INTEREST IN MAYO CLINIC.

As a next step in your career planning, we invite you to learn more about the staff, work environment and professional atmosphere of Mayo Clinic by visiting our web site at: mayoclinic.org.

We look forward to an opportunity to learn about your career goals and to further describe how practicing medicine at Mayo Clinic might fulfill your aspirations for a professionally satisfying and personally enriching career.