

So, you think you want to be a relief doctor? Relief work is an exciting and energizing type of practice. Like any practice though, if it is not a good match, it will not be enjoyable. Here are seven things to think about before you take the plunge into the exciting world of locum tenens work.

Why are you considering getting into relief work? These are some of the answers I have heard to this question:

- 👉 Can't find the right place to work,
- 👉 Have a child at home, and want to be more flexible,
- 👉 Looking for the best place to work,
- 👉 Looking for a clinic to buy,
- 👉 Retired and want to keep my hands in veterinary medicine.

These are all great reasons to consider relief work, but they are not the only reasons. Everyone comes to Locum tenens (relief) work from different perspectives. This perspective will help to shape the decisions made along the journey. Locum tenens work is a practice, in and of itself. Depending on your situation and location, you may be able to do this full-time or only part-time. So, what are the things to evaluate to consider operating a relief practice?

1] Remember who you are

Know thyself is the ancient greek philosophy attributed to Socrates, among others. But, it still rings true today. So, what about yourself might make you an interesting and good relief doctor?

To look at this, we want to use the lense of : "Is full-time relief work a good fit for me?" as we look at these areas that we will be navigating. Even if you are considering part-time relief work, these questions will still be very helpful.

A) Why are you doing this?

- to get more vacation - you can get more vacation time, but remember it is NOT 'paid time off'.
- flexibility - your schedule can be flexible, but those flex times have to be 'scheduled' in advance.
- spontaneous time off - this can be a killer for a long-term relief business. If Dr A is counting on you to help at his practice, and you call at the last minute on a regular basis saying you are unavailable, the entire scenario does not encourage a long-term relationship.
- looking for permanent work - this can be a good way to learn the practice culture of a clinic and if you find a good fit, there may be an opportunity if you help the practice grow to where they need a full-time Doctor.

B) How do you like to practice?

- 🐾 Do I like a structured environment, where I know the medications I will have, or do I like the chance to try new things?
- 🐾 Do I like learning different protocols for anesthesia, vaccines, treatments on a regular (weekly- sometimes daily) basis?
- 🐾 Do I like having used a medication or protocol before, or am I willing to try something I have only read about?
- 🐾 Am I slow and always late with appointments or can I easily keep a 20, 15 or 10 minute appointment schedule?

C) What is your skill set?

You should know what you are comfortable doing, or not doing regarding: surgery, euthanasia, blood draws, etc. and be willing to let the clinic know your limitations. The more information you can give your prospective clinic, the fewer the surprises. You would not like to find that they have scheduled a 100 lb Shepherd for an Ovariohysterectomy when you are not comfortable with surgery. And the clinic owner would not be happy when he/she gets back to an upset owner because the surgery was not done on the day that it was scheduled due to you rescheduling the surgery to a day when the regular doctor was back.

Ask a peer or friend you trust and who will be honest with you about your skills. Then, don't be upset if they tell you something you don't like or disagree with. If you chose them because of their honesty, they won't have an 'ax to grind', and would sincerely want to help you. Telling you 'you are great, and perfect' is not helpful.

We all have things we have to work on to improve. No one is perfect. We all have unique temperaments that lead us to certain traits and habits. These traits and habits can be overcome and improved, but only if we can take an honest look at ourselves and find out what needs improved. Once you have the information about what skills to improve, work on improving those skills.

Life is more about the questions we ask, than the answers we seek. If we don't ask the right questions, we necessarily are not going to find the right answers.

Your goal is to make this a smooth transition for the Doctor owner and his/her staff and clients. Your goal should not be to make your day go easy and great! That is a very important distinction to remember.

2] Online

What information is available about me online?

Do a search of your own name to see what comes up. If there are things that are not you, or if you have something you wish had not happened, make sure you spell that out. As mentioned earlier, none of us like surprises, and clinic owners do not like surprises. They have to trust you with their staff, controlled drugs, and the clinic's

reputation. If they do a background check and find something you were not forthcoming with, this will negatively impact your chance to do relief work. They likely will not hire you, as they may assume that there are other things about you that they have not been told.

3] Lay of land

Know the place where you are working

One thing the author did that helped was to send a worksheet to the clinic to fill out as a template to use. This worksheet helped the relief doctor to know and be able to utilize the same or similar medical techniques when seeing patients in that particular practice.

Visit the clinic before you are scheduled to work there. When you set up a time to be present, show up on time or early. When the author did relief, only once in 18 years was this initial visit not possible (due to emergency need), and every clinic owner really appreciated this early visit. This visit is especially important if you are helping a solo Doctor. If you do not do this meeting, you end up being 'two ships passing in the night'. The visit gives the clinic owner more peace of mind when they can meet you face to face.

This is the time to ask questions about blood machines, x-ray equipment, anesthetic machine, anesthetic protocols, etc. If you have any questions from the pre-filled worksheet, this is the time to clarify these. Find out what the doctor does him/herself, what these procedures are, and then, jot that down in your notepad.

Ask about vaccine protocol preferences, HWP, etc. The goal is for you to have a smooth transition and to have as few changes as possible for the staff and patients. Also, don't forget to write down the staff members' names, and something to remind you of who they are. These are the folks you will be working with primarily, and they can be a true asset if you get them on your side. When you are at the clinic during the scheduled time, ask them how the doctor did things, and what things you could do to help make things go smoother.

4] Anticipation and Follow-up

So, after doing an initial visit, you know the lay of the clinic and the staff. Call the doctor three to seven days before the time you are scheduled to work at the clinic. If you have any last minute questions to ask, or questions on any cases the Doctor has that may run over to when you are there, you can find that out now.

If you want a thriving relief practice and want to improve your clinical skills, make a call to follow-up after your scheduled time as well. Wait 3-5 days after the doctor returns to call as the first few days after returning, the clinic owner is just catching up with 'stuff' that was left for them and as well as seeing patients. Ask the doctor owner what you could improve upon, and then listen. If the owner says to not take as long in a room,

you need to learn how to cut conversations short. If you are too short, then learn to ask questions about the client's other pets, previous pets, how long they have known the doctor, vacation, family, etc. Ask the doctor about cases you saw while there and how they responded.

Enclosed you will find a MS word form to use and fill out when you are seeing the clinic's clients when you are filling in. It was a list of all non 'routine' things I saw when doing relief and a treatment summary. This is the tool I used to discuss follow-up cases and to find out the outcome of those cases.

Follow-up on cases is one thing new relief doctors say they miss or wish they could do more of. This follow-up is a way to do just that. Keep a copy yourself and call to ask how Fluffy Jones is doing. It will help you build rapport with the doctor/owner, shows interest in your relief work, and improves your medical skills. This will also help you to get repeat business, which is the lifeblood of every practice, relief, small animal, large animal, etc.

For example, I learned not to leave too much of a toe out on a dog that is going to run around with his bandage because it ends up acting like a tourniquet and had to be taken off for a day before reapplied. I appreciated the Dr's honesty, and I never made that mistake again. :-)

5] Impression you make - Invest in attire

Dress code - You never get a second chance to make a good impression.

We may not like it, but we are judged by the clothes we wear. We are professionals and should dress as such. On the first visit, if you seem overdressed for the clinic, you may ask if there is a dress code for the Doctors. During the initial visit, the author wore dress pants, shirt and tie. While at the clinic, a white lab coat (second or third backup available in the car) and name tag.

You still want to fit into the clinic culture. At one clinic, the doctors wore polo shirts and jeans, and on the author's initial visit, the dress code question was addressed.

The other reason this is important is the role you have in the clinic. When you first meet a client and their pet, introduce yourself. " Hello, I am Dr Ramirez and I am filling in for Dr Jones who is taking time off at a conference today (this week). I am glad to be able to see 'Fluffy' today." The clients, in as few as 6 seconds, are going to make a judgement as to your medicine and how comfortable they are with you.

Stephen Covey outlined this phenomenon beautifully in the book "The Speed of Trust". You get the message of the book by the title. When there is trust, things move quickly. When a client (clinic owner or the clinic owner's clients) does not trust, you, you have to work very hard to regain the trust hurdles. Anything you can do to increase the trust level between the client and you, the doctor they do not know at all, will improve your medicine, your rapport, and ultimately, your patient care.

6] Driving with a license

The paperwork side of things can seem to be the most tedious in terms of knowledge of what to do. However it is not that hard, it is just different from what we are used to dealing with. We do not deal with a lot of aspects of government regulations. Yet this is most important. Some of the paperwork is federal, state or personal in nature.

1)Federal

a)DEA

To use, order, or prescribe controlled substances you individually must have a DEA license. Many licensed professionals in veterinary medicine misunderstand this and believe they can 'practice under' a hospital or clinic DEA number. That is not true. The clinic or hospital does not have a DEA number- only licensed individuals have a number, and any discrepancies in ordering or use of such substances will fall back on that individual. A clinic will typically use the practice owner's DEA number to order drugs from distributors.

The medications that fall into this category commonly would be used in seizure control, pain management, anesthetics, and euthanasia.

Even if you are an associate veterinarian, you should have your own DEA number. You will not need it to order drugs for the clinic, but if you need to call in a prescription to the local human pharmacy, they will need your DEA number, not the clinic owner. The pharmacy will not dispense the medicine if you can not supply them with your DEA number. You must have your own DEA number in order to prescribe or administer these drugs.

This is relatively easy to get by filling out the appropriate paperwork and paying for the registration. If you do not have this registration, you should let your potential clinic know that you do not have a DEA number before you agree to work for them.

b) Accreditation

To sign health certificates for large or small animal practices, you must be accredited. As of February 2010, you must register with the federal agency as to which type of accreditation you wish to maintain, if any. In the future there will be specific CE requirements that will need to be maintained on a regular basis. If you do not have this accreditation, let the doctor owner know.

2)State

In Illinois, you need to have a Veterinary license, and a Controlled Substance license. These are two separate license documents.

a) Veterinary license

The Veterinary license must have a physical address. If you are sending all your business correspondence to a PO Box, the license must be at a physical address. For

most locum tenens Doctors, this will correspond to your home address. If you have a separate office you can use as a physical address, you may use this also, but it should not be any of the clinics where you regularly work as a locum tenens Dr. You only obtain one Veterinary License.

b) Controlled Substance license

The Controlled Substance license is required in Illinois for any licensed individual (veterinary, MD, pharmacist, etc) prescribing or giving controlled substances on the premises to patients. This license is required for each location where you will be performing this veterinary procedure.

You may think: "Well, I will not be doing surgery, so I don't need this." However, what if you need to euthanize a pet, or prescribe phenobarb or valium for a seizing patient? In Illinois, to be compliant with the license board, you need to have a controlled substance license for that location.

You are allowed to have many controlled substance licenses.

3) Personal:

a) Radiology badge.

You should get a radiology monitoring badge and keep that as a part of your lab coat and name tag. The badge measures your level of scatter radiation exposure. This is important for your own health. This is not a government requirement, but something wise to do for yourself. You will see all sorts of different radiology equipment and you need to know your exposure level.

7] Strain of Taxes

Benjamin Franklin said, "The only things certain in life are death and taxes." His words are still correct, so we will look at the tax issue as it relates to relief or locum tenens work.

A) Federal

One of the advantages of doing relief work is that you are an independent contractor. 'Independent contractor' is an IRS designation. The advantage of being an IC is that you can deduct some expenses from your income that otherwise might be non-deductible expenses as an associate. Car mileage, lab coats, Continuing Education, professional journals, cell phone, and a computer are some of the items that may be deductible. The home office deduction is not typically enough of a tax relief to be useful for most IC veterinarians, but check with your accountant for details.

Instead of withholding that is taken from your check, you must pay quarterly payments on April 15, June 15, September 15 and January 15. These payments get filed with the form called 1040ES available online at <http://www.irs.gov/pub/irs-pdf/f1040es.pdf>.

Getting help from an accountant is advised to make sure the amount you pay is appropriate.

When you file your taxes at the end of the tax year, a Schedule C is what is used to calculate your income and expenses.

To assist your clinics in your designation as an Independent Contractor, you should give every clinic a W-9 form on which you have your own employer ID number (EIN). An EIN is a number the IRS uses to identify a business entity. This establishes that you are serious about being your own independent agent. There is no cost to you to apply for this number. The only additional piece of information you will need for the application is a name for your relief business.

You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business.

You can download the W-9 form from the IRS web site at <http://www.irs.gov/pub/irs-pdf/fw9.pdf>

"If Patrick Henry thought that taxation without representation was bad, he should see how bad it is with representation." -- Farmer's Almanac

B) State

In IL, the state quarterly payments are due on the same dates, April 15, June 15, September 15 and January 15. There are no additional forms to fill out regarding state income tax (at this time<sigh>).

<http://www.revenue.state.il.us/TaxForms/IncCurrentYear/Individual/index.htm>

I know people's eyes tend to glaze over when the topic of taxes is discussed, but do pay attention, because the IRS and IL Dept of Revenue have no humor. A defense of 'I did not know' will still be slapped with a serious fine, not a 'do better next time'.

The state level is where we should discuss whether you incorporate or not. From a tax perspective, several accountants have advised me that incorporation does not hold any tax advantages, either federal or state. From a legal perspective, each state is different. In WI and IL, a corporation formed by a licensed professional does not shield the individual from liability, so there is no protection if you reside in these states. Your attorney can advise you if this may be helpful in your specific situation.

Personal

Federal and State tax forms are required for tax purposes, but not helpful to use to 'run' your business. How do you know what is your strong month/ quarter? What clinics book a lot of repeat work? How many hours are you working per month, etc?

The author used a two spreadsheet combination, as well as 'Quicken Home and Business' software to keep track of this arrangement (although a spreadsheet alone could do the same). One spreadsheet, called a timesheet template was used to input the days/ times worked. A separate sheet was generated for each clinic, as well as for each 2 week period working for the clinic. To keep better track of monthly hours/ days worked, a separate time sheet was created for each month worked.

This time sheet was then saved as an excel sheet with a naming routine. This made it easy for the 'Quarterly Spreadsheet 20__ (fill in the year) to import numbers from the different cells in the spreadsheet.

You may be asking, "Why go through all this trouble?" We started this conversation on becoming a relief DVM and why you wanted to be a relief DVM. If your answer was to work less hours, how do you know you are working fewer hours if you don't measure the hours you work? If you want more days off, how do you know how many days you worked to determine how many days off you had, unless you measure the number of days you worked?

If you had a hyperthyroid kitty or hypothyroid dog that the client did not allow you to monitor their T4 level, you would think it was silly because you know as a medical professional that even though things look ok from the outside, those looks can be deceiving. The same is true of relief work, you may think you are not busy, when in fact you may be working more hours or days than you did before. You will miss more for not looking than for not knowing in medicine and in life.

What is your goal?

If your goal is to provide relief for area colleagues, if you follow these seven steps, you will be providing something better. And if you keep these ideas seven ideas in mind as you consider and pursue your relief veterinary career, you can achieve your goals and enjoy the unique practice niche that is relief.

Additional resources:

Ramirezdvm.com – links to all files and resources

Sample contract and form in 'How to hire Relief' manuscript

IRS W-9 form

VIN

"Flex vet" by Carin Smith DVM

Excel quarterly spreadsheet

Quicken Home and Business

