

## Selecting a Mentor: A Guide for Residents, Fellows, and Young Physicians

For trainees entering clinical practice, mentorship can be most helpful, and for those with an academic interest, mentorship is vital.<sup>1-11</sup> A mentor can be a personal teacher, tutor, advisor, and coach. In addition to those pursuing academic advancement, similar issues also affect physicians entering a practice setting who are seeking comprehensive mentoring from their senior colleagues. The clinical trainee interested in pursuing a general clinical field or specialty can often achieve his/her goals with a personal faculty confidant or advisor. A senior member of a practice group can serve in the same role for the younger physician(s) joining that group. Mentorship beyond the advisory level, however, is necessary for those interested in subspecialty skill sets (eg, coronary interventions, oncology, transplantation) or pursuit of becoming a leading expert in a clinical or research area. With the exponential escalation of research information and technology, mentorship has become crucial for trainees interested in pursuing an academic career in clinical or laboratory research. The tools for achieving an academic career are typically garnered during the mentorship phase of the training period.

Selecting an effective mentor becomes one of the most important decisions in a young physician's career. The following discussion is directed at the trainee pursuing an academic career, but the general principles also apply to the recently trained physician joining a clinical practice group.

### STEPS IN CHOOSING A MENTOR

First, identify your target career and area of interest. Common choices include practicing clinician, clinician-educator, clinical investigator, or translational/basic research scientist. In general, career success is linked to the level of passion for the area that "turns you on." The area of study can stem from patient-care experiences, an enthusiasm for teaching, and a compelling interest in unanswered diagnostic and therapeutic questions. For those with a focus on translational/basic research, it may be either a prior research experience or a specific clinical interest.

---

**Funding:** None.

**Conflict of Interest:** None.

**Authorship:** All of the authors had access to the manuscript and played a role in writing during its preparation.

Second, determine who among available faculty or mid-level/senior colleagues has the expertise, experience, and "track record" in or near your area of interest. This requires a study of the faculty member's publication record and discussions with his/her current or former trainees. Funding and financial stability of the laboratory or research program are important in translational/basic investigation because the fellow or trainee rarely brings monetary support to the relationship. For the trainee with an undefined research direction beyond simply wanting to "give basic research a try," determining the active, vibrant laboratories is a reasonable start. An alternative approach for those with either academic or clinical interests would be to identify and contact faculty or more senior members whose careers they wish to emulate.

Third, arrange a meeting with the prospective mentor-candidate. Expect that it will last 30 or more minutes, covering certain objectives. Introducing yourself, your level of training, and available time to commit to a project(s) are obvious initial discussion points. For the academic trainees, the discussion should then focus on obtaining experience in research with the ultimate goal of pursuing an academic career. The faculty member has the option of discussing various aspects of his/her research activities, some related to your interests, to render an overview and menu for you to ponder.

Around this time, you should develop a "gut feeling" of whether the mentor-candidate has an acceptable level of enthusiasm for guiding your research and early career. Assuming that the faculty member is interested in the mentorship, discussions might now shift to whether the faculty-investigator has the laboratory (or access to another), experience, and knowledge base to support your career direction and research interest. Insight into your career and research interests and an eagerness to begin the trip with you are critical to your forthcoming interactions and mentoring success. Basically, the trainee has to feel that the faculty member or colleague would serve in good faith and that the relationship and research environment are likely to be vibrant and productive. A hardy self-interest without making it too obvious ("restrained selfishness") is a necessary attribute to foster in the unfolding of one's career. If you did not get the sense that the faculty member is inter-

ested in you, your career, and your general clinical or research direction, you will have to repeat steps 2 and 3 with another mentor-candidate.

### NOW THAT YOU HAVE CHOSEN YOUR MENTOR

Once you and your mentor-selection have decided it's a "go," the training begins. The mentee must assume the "learn and do" mode and then, with the mentor's guidance, generate the research protocol(s), the applications for human subjects or animal-model review and approval, and grant submissions to fund a sustained effort. In the meantime, the trainee should learn and develop the required experimental methods.

### THE IDEAL MENTOR

The mentor must have laboratory or procedure experience related to your area of interest, an associated knowledge base, a "track record" (eg, publications and presentations), and an appreciation for your career and research interests. The mentor must be able to assist you in generating research ideas and studies, expanding on those you have brought to the interaction. A good research project should set the stage for additional research, and it is reasonable to expect the work to be published in the leading journals of the field.

The mentor and associates should have the knowledge base and experience to "teach you the ropes"; assisting you in learning and attaining the tools to succeed. These tools include generating ideas to study; writing succinct, clearly stated protocols; learning appropriate and optimal study design (including the concepts of controls, blinding); submitting applications for human subjects and animal-model review and approval; collecting, analyzing, and interpreting study results; drafting and revising manuscripts; selecting the appropriate journals for the manuscripts; revising manuscripts in response to reviews; managing the rejection of manuscripts; writing clear, convincing grant applications for funding; and fostering an attitude and environment of high ethical standards. The mentor should be able to bring in assistance, even a co-mentor(s), as needed, to optimize your efforts and experience (eg, special methods or procedures, sub-studies). The mentor will generally encourage the trainee to supplement the experience with related courses (eg, statistics, didactic methods) and network with other academicians and laboratories.

Perhaps the most fundamental characteristic of a good mentor is that he/she has a deep-seated commitment to fostering your training and career. The success of the mentor as a professional is, in large part, related to the success of his/her trainees. If your mentor is "nice" and kind, you've been awarded a special bonus. These personal features are not at all essential for a good mentorship. On the other hand, the mentor also serves as a professional role-model in the proper interaction with other faculty, laboratory personnel, trainees, and students. A malignant, irascible faculty member (a few still exist) should make you pause regarding his/her mentor-candidacy.

### WHO TO AVOID IN CHOOSING A MENTOR

In your first meeting, you need to determine if the mentor-candidate has the time to serve in that role. Perhaps the faculty member or colleague is already fully committed to a number of mentees. Once again, you need to garner a sense of his/her interest as your mentor-candidate. Remember, "the eyes never lie" and so, reading the faculty member is as important as listening to him/her. Obviously, the candidacy is enhanced by the look of interest and excitement, by the faculty-candidate extending the interview beyond the allotted time, and by comments such as "... sounds interesting," "We could also do . . . .," "Let's also talk with. . . .," "Let's get together again," and "... soon." The "watch-glance" sign (mentor-candidate checking on the time) is not a good one and suggests that it may be time to move on to a better selection.

For the academic trainee, it is a good idea to avoid the research "dabbler"; the faculty member who primarily generates book chapters, review articles, case reports, or abstracts. This emphasizes the importance reviewing the curriculum vitae of the mentor-candidate(s). You also will want to avoid the "whiner," namely the person who will talk down your research interests or give you reasons why you should not pursue your research project and ideas.

### YOUR OBLIGATIONS AS A MENTEE-TRAINEE

The mentor provides the expertise, guidance, research environment, and commitment that allow the mentee to develop the tools and abilities to succeed in his/her career. The mentor does not owe the trainee anything beyond these aspects, although most mentors provide much more. The trainee must take it from there; basically, it is *your* study, project(s), and career. The trainee provides the commitment, enthusiasm, time, work, and "sweat" needed to bring the project(s) and mentorship training to fruition. Undoubtedly, a good mentee enhances the productivity and career of the mentor, but it is rarely an even exchange. The documentable benefits and intangible gains for the mentee may greatly overshadow what the mentee provides in return. Regardless of the lack of guaranteed reciprocation, the relationship remains an integral part of career growth and development for trainees and junior staff physicians while providing a fulfilling role for mid-level and senior mentors.

Carl V. Leier, MD

Alex J. Auseon, DO

Philip F. Binkley, MD, MPH

*Division of Cardiovascular Medicine*

*Davis Heart and Lung Research Institute*

*The Ohio State University College of Medicine*

*and Public Health*

*Columbus*

## References

1. Alpert J, Bettmann M, eds. *Mentoring Handbook*, 2<sup>nd</sup> edition. Dallas: The American Heart Association; 2008.
2. Jackson VA, Palepu A, Szalacha L, Caswell C, Carr PL, Inui T. "Having the right chemistry": a qualitative study of mentoring in academic medicine. *Acad Med*. 2003;78:328-334.
3. Sambunjak D, Straus SE, Marusic A. Mentoring in academic medicine: a systematic review. *JAMA*. 2006;296:1103-1115.
4. Alberts B. On becoming a scientist. *Science*. 2009;326:916.
5. Bettmann M. Choosing a research project and a research mentor. *Circulation*. 2009;119:1832-1835.
6. Mendelsohn ME. Choosing a research project/mentor. presentation I. of symposium, How to Become a Cardiovascular Investigator. *J Am Coll Cardiol*. 2005;46(7 Suppl A):5A-8A.
7. Zerzan JT, Hess R, Schur E, Phillips RS, Rigotti N. Making the most of mentors: a guide for mentees. *Acad Med*. 2009;84:140-144.
8. Detsky AS, Baerlocher MO. Academic mentoring – how to give it and how to get it. *JAMA*. 2007;297:2134-2136.
9. Santoro N, McGinn AP, Cohen HW, et al. In it for the long-term: defining the mentor-protégé relationship in a clinical research program. *Acad Med*. 2010;85:1067-1072.
10. Straus SE, Chatur F, Taylor M. Issues in the mentor-mentee relationship in academic medicine: a qualitative study. *Acad Med*. 2009;84:135-139.
11. Feldman MD, Arean PA, Marshall SJ, Lovett M, O'Sullivan P. Does mentoring matter: results from a survey of faculty mentees at a large health sciences university. *Med Educ Online*. 2010;15:1-8.