

Academic Spotlight

Dr. Yoshimi Anzai



In addition to your clinical responsibilities as a Professor in Neuroradiology at the University of Utah, you also hold several leadership roles, including the Director of Value and Safety of Integrated Enterprise Imaging. What strategies do you employ to integrate the demands of your professional and personal life?

There is no “one size fits all” regarding the Work-Life balance or integration. I want to share my strategy by organizing a calendar and a priority list. You all have many “to-do lists” in your life, including something related to work, research, teaching conferences, lectures, and manuscript preparation, on the top of family calendars. First, to understand what is important to you and what is urgent. Others are something you must do (Compliance training, for example) and what you want to do. This will help prioritize your action items. Second, I divide tasks into 3 categories based on how long it takes to complete – less than 3 min, 30 min, or more than 3 hours. On a busy clinical day, we do not have much time to do anything. But I skim my emails during lunch break, and responding to those takes less than 3 minutes, and others take longer, flag them. For tasks that take more than 3 hours, we need to block the calendar. If I do not block the time, my administrative assistant will schedule meetings on my calendar. I ended up with a bit of fragmented non-productive time left for me to accomplish something significant. I even put lunch or coffee with my colleague into my calendar so that it will happen. Similarly, family-related activities must be on the work calendar so that we will not miss the most precious event for your family.

Another critical point is to unplug yourself for your wellness and recovery. We must rejuvenize ourselves to work effectively. I shut my laptop Friday evening, trying not to turn it on Saturday. However, Sunday afternoon is something I save for planning for a week or a month ahead.

Can you discuss work-life balance versus work-life life integration and how these concepts apply to female radiologists?

The work-life balance concept implies that work and life are mutually exclusive, whether you are at work or personal life. That is no longer true. Work and personal life have been heavily integrated throughout the day. For example, the COVID pandemic accelerated remote work for diagnostic radiologists. The concept of work-life integration means that we can control and plan our days and how we can get the job done. We have more flexibility to integrate work within our life so that we can fulfill our professional life while enjoying our personal life. We no longer have to choose work or life. Work and life happen at the same time. This is true for both genders but is particularly important for female radiologists with small children. You can wake up early and start reading scans from home. You may be able to squeeze time to make breakfast for your family or drop kids off at school and continue to do clinical work. When working from home, I can prep dinner and food in the oven for 10-15 minutes. By the time my work is done, dinner is ready, too. If you have to work on-site, you can set the food in a slow cooker- another option. Under the work-life integration, the end goal is to complete tasks in whatever way you can accomplish and reach productivity and achievement, not to merely be at work for 40 hours a week.

Are there gender-related challenges in achieving work-life integration, and if so, what suggestions do you have for mitigating them?

Women are often primary caretakers for children or the elderly at home, even though many men also participate in childcare. If you just have a newborn baby or are expecting one, the best thing you can do is to involve your spouse in childcare from very early in the phase of parenthood. It will help you divide the responsibility and also help your spouse build a bond with your child. Do not feel stressed taking on the vast majority of childcare. Delegate and share the childcare duty (and joy) with your spouse.

Another thing is to build social capital, including your parents or in-laws. If they are not around, become friends with neighbors or older children’s school friends’ parents, and share the car-pool responsibility. If that does not work, then hire a nanny or babysitter.

It is one of the most challenging times for women with small children to achieve academic productivity. You are pulled from many directions and may feel like you have no control. But do not worry about it. I did not write any papers or book chapters when my daughter was a baby. But, if you are motivated to accomplish, you must have an army of helpers.

What changes would you like to see in radiology to better support healthy work-life integration for all radiologists, especially women? What role do you think employers can play in supporting these changes?

Supporting work-life integration is critical for faculty retention and recruitment. Especially for women, a flexible work schedule is attractive and perhaps expected. Some people like to work early in the morning or late at night; whatever works for them. Radiology is shift work. Hardly ever any patients come to get imaging and ask a specific radiologist to interpret their imaging study. We just need to fill the clinical coverage with whatever manpower we have.

Remote work using home PACS was introduced early during the Pandemic and accelerated the work-life integration in Radiology. Many institutions, if not all, offer home PACS stations. In fact, we love remote work so much many graduating fellows are taking a teleradiology job. Certainly, a subspecialty, however, some work still needs to be done in person, like Interventional Radiology. Mammograms must be interpreted with extremely high-resolution screens, making a home interpretation expensive, if not impossible. If we can find a way to provide breast imagers to do remote work, that would help.

Being present and visible to referrals is vital. Under the increasing commoditization of radiology, however, we must build relationships with them. You may make lucrative compensation, but being 100% remote, you may miss an opportunity to build collaborative and networking connections. For a while, that might be okay, but in the long run, you may be isolated or not excited to work anymore. My best day in the service is participating in the head and neck tumor board, where I am a part of the multidisciplinary team and feel appreciated by surgeons or oncologists.

Although teaching can be done remotely, in-person teaching is so much more effective and powerful. Furthermore, talking with colleagues, technologists, and referrals face to face is the most joyful part of the work.

Ideal work for me is to have a hybrid model with slightly more in-person. Everyone has different preferences and expectations. That is why one size does not fit all.