

Ep #23: Combatting Imposter Syndrome with Erica Dorn



Full Episode Transcript

With Your Host

Sarah Michelle

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Welcome to *Becoming a Stress-Free Nurse Practitioner*, a show for new NPs and students that want to pass their board exam the first time and make that transition from RN to NP as seamless as possible. I'm your host Sarah Michelle. Now, let's dive into today's episode.

Hey friends, there's so much excitement surrounding passing boards, landing that first job, and then starting into practice as a real deal nurse practitioner. For so many of you out there though, especially in those first few months of practice, some self-doubt and some anxiety starts to inadvertently creep in. And our brains begin berating us with tons of negative thoughts. And as a result, many of you inevitably end up feeling like a giant imposter.

And so today I am bringing a guest on the show with me to help work through some of those thoughts and how to overcome imposter syndrome. We have all felt this at one time or another. But we have so many tools that we can use to overcome it and be the providers that we truly want to be.

And so we're going to welcome Erica to the show today, who's going to shed some light on what exactly this looks like and what we can be doing about it. And so Erica, can you just give us a little insight to you and your nursing journey leading up to this point?

Erica: Yes. So first I want to say thank you for having me on the show today.

Sarah: Absolutely.

Erica: I listened to your first podcast, and I was just blown away with your honesty and sincerity about your struggles. And I think a lot of that is something that we don't always talk about in the nursing field. So thank you for all the work that you do for new nurse practitioners and students also.

Sarah: Thank you so much.

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Erica: So my name is Erica Dorn, and I am a family nurse practitioner at a critical access hospital. And I'm also a coach who helps overwhelmed nurse practitioners overcome burnout and establish work life balance.

So I first got into nursing, declared it in high school because I wanted to make a difference in people's lives. And I learned pretty quick that you don't have time to sit with your patient and hold their hand and say all the right things. And some patients don't want that either. They're kind of the non-compliant type.

So once I started out as a nurse, I had long hours. You know, you get pulled in every different direction. I had a toddler and a spouse at home, and I was not taking care of myself, and I became burned out. Long story short, I slowly learned how to put myself first, set some boundaries at work, prioritize my time, and just ultimately create a better work life balance. And so I have made it my mission to help other nurse practitioners do the same. And that's why I created The Burned-out Nurse Practitioner.

Sarah: Yeah, I think it is definitely so easy to fall into that trap of burnout. And it's definitely something that I have to actively strive to not let myself do. Because it feels like the second I let my guard down I find myself really overwhelmed and really ever worked. And then I'm right back where I started.

And so I really love your mission and your desire prevent other nurse practitioners from doing the same. And so maybe kind of reflecting back for you, when is the first time that you can really remember feeling that inevitable imposter syndrome?

Erica: So, the first time I had imposter syndrome I didn't even know that was the label to give it, but probably before day one. I always have had struggles with feeling that I'm not a good nurse practitioner or I don't know what I'm doing. I've definitely worked on that. And it's gotten way better over time. But I still have those feelings from time to time.

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So, imposter syndrome is that feeling that you get that you don't know what you're doing. That someone is going to call you out for being an imposter in your job. And it can show up in many different ways.

The role change from RN to nurse practitioner is a huge trigger for imposter syndrome. As a RN you might have some experience, you might be feeling somewhat comfortable being at the top of the ladder. And then once you get through school and have to work as a nurse practitioner, it's a completely different role. And just having all of the increased responsibility as a nurse practitioner, the difference in the job, and just all those feelings of imposter syndrome come up.

I also think that if you're changing jobs, even if you worked as like an acute care RN going to like primary care, that's a huge shift of information and knowledge. And so imposter syndrome can definitely show up. And then also anytime you have a new case, new signs or symptoms that you're not really sure, have never seen before, imposter syndrome can show up.

And I also want to note that imposter syndrome can show up in your personal life also. So you might say I'm not a good spouse, or I'm not a good friend, or I'm not a good parent. So, yeah, imposter syndrome has many different roles that it takes.

Sarah: Yeah, I feel like imposter syndrome can just pop up anywhere at any time. It's like it's hide under the bed or something like that.

Erica: Yes, absolutely.

Sarah: Yeah, I think for me the one that you said that really hit home, I can think of a couple big times in my life that imposter syndrome took play. But when you mentioned changing jobs, for me it was changing nursing jobs. Because I worked in oncology for a couple of years and the portion of oncology that I worked in was stem cell transplant. And so it was progressive care. It was like borderline ICU a lot of days.

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And so I felt like I had like a really strong knowledge base, and I knew what I was doing. And so at the time, I thought, "I'll be a better educator, if I go work in PACU and truly do an ICU fast-paced environment. And that way, when I have students in the future, I can show them all these additional skills that we don't do it oncology." But I have the knowledge base to do this.

And I got down there and I panicked. I immediately panicked because it was so different than what I had done for so long at that point. And I was like, "How am I ever going to learn all this stuff? Am I good nurse? Did I just think I was a good nurse and now I've been put in this position?"

And so it can definitely, even unexpectedly, because I never anticipated going to PACU and feeling like a giant imposter. But that was how I felt the entire time I worked there. And then exactly what I did was go back to my old job.

Erica: Yeah, and it's just that overwhelm, the new information, being out of your element. All of those things trigger imposter syndrome.

Sarah: Yeah, and I think when you change jobs too there's a certain level of expectation. You've already been a nurse, so you should have like X, Y, and Z down. And for me working in oncology, I had a very specific skill set too. And so that didn't really translate over into working in the PACU.

Erica: Yeah, a little bit different.

Sarah: Yeah, so now I hope to help people combat that instead of get lost in it. Because it's so easy too when you're feeling that imposter syndrome to do exactly what I did and go back to where you're comfortable. Because that's what a lot of people end up doing. Especially new nurse practitioners going back to that registered nurse role because they know it so well. And they are so comfortable there.

Erica: Yes, absolutely.

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Sarah: Now, how about can you kind of walk us through maybe like three or four solid ways of combating imposter syndrome when it does start to pop up, so you don't run away from your job like I did?

Erica: Yeah, so first off, I just want everyone to know how common it is and how many people struggle with it. Former First Lady Michelle Obama has talked openly about her struggles with imposter syndrome. And I challenge you to ask any experienced nurse practitioner, any doctor, any surgeon. I am going to bet that they've all had some sort of imposter syndrome, especially starting out.

So just know that it is very common and that it's okay. You're not a bad nurse practitioner if you have these feelings. Healthcare is always expanding, there's new medications, new interventions, new treatments. There's no way that you're going to know the perfect clinical guidelines at all times.

I still look up a lot of information from day to day. And I have seen experienced doctors, and I'm talking like over 40 years of work in healthcare, scratch their heads about a new case that they were not familiar with. So just know that healthcare is always changing, and there's no way that you're going to know everything.

I think also acknowledging the feelings. So being aware of what you're telling yourself. What kind of thoughts are you saying to yourself in your head? And by being aware of those would you talk that way to a friend or to a colleague? So then think to yourself, why would you talk to yourself that way? Where are these thoughts coming from?

Has anyone ever said that to you? I mean have you ever had a patient jump up from their chair and say, "You're an imposter, you don't know what you're doing." I'm going to bet that most of us have never had that actually happen, it's just a lot of feelings that are going on in our head.

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So by being aware of our thoughts and making a conscious effort to change that negative talk into something positive, that's going to help you to overcome the imposter syndrome.

And then I also say to look at all of your past accomplishments. Look at your RN experience. Look at your schooling, how many clinical hours you have put in. The fact that you have passed or will pass your certification exam. You have done the work and you are worthy to practice as an RN.

And the more you tell yourself that the less imposter syndrome will creep up. I honestly have a list in my phone under the notes section that is called My Awesome List. And I put all of my accomplishments there. So the fact that I graduated grad school with two young kids. The fact that I paid off my student loans. All of my accomplishments I've just listed under there.

So anytime I am starting to feel insecure or feel that imposter syndrome start to creep up, I look at that list and I say, "You know what? I am worthy because this is everything that I have accomplished."

And then the last thing I would say ultimately is to show up for your patients. So instead of making this about you, you know to say, "These are the things I'm feeling." Just show up for your patients. They are the ones that scheduled an appointment with you.

They are asking for your help. They might be feeling sick, they might be feeling scared, but they showed up, and they need your help. So they need you at your best. So I just challenge you to show up and act confident. And that will help your imposter syndrome.

Sarah: Yeah, you said a lot of good things. I'm running through the list in my head. So awareness is absolutely key. And so it is totally okay to feel this way, but we've got to be able to put a pulse on it so we can recognize it. Because that's the only way we can shift that thought pattern.

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I think a lot of people just kind of get lost, like, “Ooh, I feel really icky. But what's going on underneath the surface here?” And a lot of it is just simply how you're talking to yourself.

Erica: Yes, absolutely. And just by, like you said, being aware of what you're saying and then calling yourself out. Just say, “No, I don't talk to myself like that.” And change the words that are running through your head to something positive.

Sarah: Yeah, I'm really notorious on social media for saying how you speak to yourself is your truth. But if you're telling yourself every day, day in and day out, “I'm an imposter. I'm an imposter. I'm an imposter.” Then you're going to be an imposter.

Erica: Yes, absolutely.

Sarah: So if we can kind of shift that around a little bit and say, “I'm competent. I'm still learning. There's a learning curve.” There's always going to be a learning curve, no matter what job you're doing out there.

Erica: Oh, yes, absolutely.

Sarah: And I think too we have to remember, and I talk about this a lot with board prep, but no one out there is expected to know it all. Even for your board exam you're not expected to get 100% to become a nurse practitioner. You only have to know about 70%. And so there's a lot of leeway to look things up and take the time you need to grow and evolve into the provider that you want to be.

Erica: Yes, yeah. And just know that it's okay to not know everything and it's okay to ask questions and to look things up. That's how you learn.

Sarah: That's how everybody learns. Remember being a new nurse, remember all the questions you asked? You're now a new nurse practitioner, you're now starting over again. So don't feel like I'm expected to know this like I felt in PACU.

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Erica: Yes, exactly.

Sarah: And I think my absolute favorite point that you made, just because it hits home for me so hard. Because in my courses actually I talk about a list of tangibles, which is essentially your awesome list.

And so if you guys out there haven't done an awesome list, it is time to do one so you can use it. So you can have it in practice ready to go, so when you're feeling this way it's already there sitting for you. And you can just kind of reflect and be like, "I do know what I'm doing, I'm just a little anxious in this moment."

Erica: Yeah, it definitely helps to kind of redirect your mind and to give you the confidence for what you have already accomplished.

Sarah: Yeah, absolutely. Those little mini confidence boosters.

Erica: Yes.

Sarah: Now, what do you feel like would be kind of your biggest piece of guidance that you would offer to somebody who's kind of drowning in these feelings and considering leaving the profession? Because ultimately, I don't believe in scare tactics, but there are a lot of people out there that get really uncomfortable and decide they don't want to be nurse practitioners anymore. And I totally get where they're coming from. But I hope that the people out there listening, this won't be you.

Erica: So for me it was ultimately realizing that I am in control of my life. It's so easy to get into that victim mode, to say, "My administration is not supportive. I'm a new nurse practitioner. So I don't know anything." But as soon as you realize that you're in control of your feelings and your reactions to any difficult situation, that really helped me to gain purpose and fulfillment in life.

I remember in high school our principal would come over the intercom every morning with morning announcements. And then at the end he would

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say, "You have the power to make it a great day or not. The choice is yours." And as high schoolers we would just roll our eyes and say, "Oh, that's so silly."

But the older I've gotten I realized; you know what? Yes, I am in control on how I react and how I feel. So I think just realizing that and making kind of that mind shift change can help you to stay in the nursing profession. And I think ultimately kind of reconnecting with your why. Why did you get into nursing?

Like I said, for me it was to make a difference in people's lives. And I don't do that with every single patient, but I still have those moments that I cry with my patients, or I'll hold their hand, or they'll thank me for doing something for them. And those are the moments why I went into nursing.

Sarah: Yeah, that was definitely how I felt in oncology. Because where I worked doing stem cell transplant it could be really fast paced but I was always very intentional. Like I sat down beside my patient, either in their bed, or on their couch, or in their chair, whatever. And I would get on their level every single shift and be like, "What do you need from me today?"

Actually what I would always ask is, "What can I do to make you more comfortable today?" So it's like leave the medicine aside for a little bit. You know, we've got a lot of tasks and things that we need to do, but what can I do for you personally? And so for me that was the epitome of being a nurse. I felt the most connected by being able to show up in that way.

Erica: And I think that's what most patients want too. They're not going to understand why you're giving them this medication or why you're doing that. But just taking that extra moment and connecting with them and asking them what they need really goes a long way.

Sarah: Yeah, and I really like too that you bring up the point of ownership too. All these negative thoughts and feelings that you're having, if you could just take a second, number one, to be aware. But number two, to take ownership of them and know that you are truly in control of your own life

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and truly in control of how you speak to yourself. That alone can be a giant shift in how you view the rest of your profession too.

Erica: Yes, absolutely. That's what helps me to overcome burnout and be fulfilled in my job and my life.

Sarah: Yeah, and everybody out there is looking for fulfillment. I don't think anyone out there becomes a nurse practitioner solely for the money. There is a purpose seeking or a fulfillment seeking or whatever it is for you that people are looking for.

Erica: I agree.

Sarah: And then I'm really notorious on my podcast for asking extra questions.

Erica: Okay.

Sarah: So, extra question, what do you kind of find yourself coaching people about the most? Is there any particular topic, obviously it doesn't have to be imposter syndrome? But is there anything in particular that you find you really connect with people about?

Erica: I think the biggest stress that a lot of my clients have had are the demands from a job as a nurse practitioner. And the way that I help them over that is to kind of take a step back and say, "Okay, what can I control in this situation? What kind of boundaries do I need to set? How do I need to put myself or my family first to kind of overcome that burnout and get that better work life balance?"

And so I think as a new nurse practitioner just starting out, when you're looking for a job, I would say to be honest about those conversations with a potential employer and say, "You know what, I have kids. I really want to be involved, go to most of their activities." That sort of thing. Or even if you're a year into a job and starting to feel that burnout I think having those honest conversations with administration and saying, "Hey, I am going to need

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some more time off. I'm going to need extra time to chart." Whatever that looks like, just being honest and open is going to go a long way.

Sarah: That open dialogue is so important. I'm very patient person and I have very few pet peeves. But one of my pet peeves is when someone reaches out and they're like, "I'm going to leave being a nurse practitioner. I'm going back to being a nurse because I've got this, this and this going on with this practice." And I'll be like, "Oh, well, what did they say when you brought that up?" And they're like, "Oh, I haven't brought it up."

Y'all, you got to have open dialogue, open discussion. You can't expect people to know what you're thinking and feeling.

Erica: Yes, absolutely.

Sarah: And so don't leave a job altogether without at least having, in my opinion, two conversations. Like let's have the initial conversation and then if the kinks aren't still worked out let's have at least two conversations. And then let's explore, okay, maybe do I need to do something different?

Erica: Yes, I agree. You have to try, you have to do what you can control. And sometimes that's having a hard conversation.

Sarah: Yeah, and I know nobody likes to have hard conversations. So I can appreciate that piece of it too. But if we're going to go back to taking ownership a little bit, that kind of comes with the job a little bit too.

Erica: Yep, it does.

Sarah: Well, thank you so much, Erica, for coming on the show and sharing with all of my listeners, what is going to be the best way for them to get into contact with you?

Erica: So you can join me on Facebook at The Burned-out Nurse Practitioner. You can also check out my website, ericadornnp.com. And I also have a free PDF that gives you seven tips to save hours on charting. Which will really help, especially starting out, but also if you're taking charts

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home, if you're spending extra hours at the office, if you're working unpaid time to finish those charts. So you can find that at chart.ericadornnp.com.

Sarah: And I will absolutely make sure that all these links are available for you in the show notes too, so you can get to them easily and get to Erica easily. And, Erica, thank you so much once again.

Erica: Thank you for having me.

Sarah: Yeah, absolutely. And I'll talk to you guys next week.

As an extra bonus friends, if you're looking for support no matter what phase of your nurse practitioner journey that you're currently in, I have communities available for both students and new nurse practitioners. In these communities we work to uplift one another and grow this profession together every single day. Links to join will be included for you in the show notes.

Thanks for listening to *Becoming a Stress-Free Nurse Practitioner*. If you want more information about the different types of support we offer to students and new NPs, visit stressfreenp.com. See you next week.