

Physician jobs from the *New England Journal of Medicine* • May 2024



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The latest physician jobs brought to you by the NEJM CareerCenter

## MD Career Path Edition

Final Year Residents and Fellows, Program Directors

Featured Employer Profile

CompHealth.



May 30, 2024

Dear Physician:

As you near completion of your training, I'm sure that making career decisions is a top priority for you. The *New England Journal of Medicine* is the leading source of information about physician job openings in the United States. To assist you in this important search, we've sent you this complimentary copy of the new 2024 *Career Guide: MD Career Path* edition.

This special resource guide contains practical career articles and job-seeking tips taken directly from NEJMCareerCenter.org and offers expert contributions on the topics that matter to candidates. Also included is a section of career opportunities and employers for consideration.

NEJM CareerCenter continues to receive positive feedback from its physician users. Designed using physician feedback, many clinicians rely on it for their job searches and welcome the confidentiality safeguards that keep your personal and job search information private.

At the NEJM CareerCenter, you will find:

- Thousands of quality, current openings across most specialties
- Customizable email alerts that automatically notify you about new opportunities
- Easy search capabilities to help you pinpoint the jobs that match your search criteria
- A comprehensive Career Resources Center with career-focused articles and job-seeking tips
- An iPhone app that sends you automatic notifications when there is a new job matching your search criteria

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Also available are NEJM podcasts that include "Intention to Treat" and "Not Otherwise Specified," both of which explore timely issues and some of the toughest challenges in health care. These podcasts are available on Apple Podcasts, Spotify, YouTube, and NEJM.org.

Best wishes as you embark on a rewarding career.

Sincerely,

Matthew Clancy  
Director, Recruitment Solutions



Customized job opportunities  
direct to your inbox!



## Preparing for the Virtual Physician-Job Interview

**The interview has become a new world, for now, with the pandemic, and both prospective employers and physician candidates are adjusting**

By Bonnie Darves, a Seattle-based freelance health care writer

Physicians and other health care professionals know well that functioning — and practicing medicine — in a pandemic is a very different and much altered experience from a year ago. Even though physicians and residents are often providing care in fraught and challenging environments, when it comes to looking for a new practice opportunity, they're not likely to find themselves at the point of care but rather in their living rooms. Interviews have gone virtual in a big way as the risks and logistics of the traditional site interview have prompted employers and even candidates to forgo site visits.

What this means is that both parties are having to adjust. Employers are increasingly vetting candidates without ever shaking hands or watching physicians interact in live group settings. Physicians are trying to figure out how to put their best face forward over video platforms such as Zoom, Skype, GoToMeeting, or Cisco Webex, to name a few, and how to make the most of what can be an awkward exchange.

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The good news, for physicians, is that this is a new and evolving experience for all involved. As such, it's important to keep in mind that many people, including employers and senior physicians on the call, might find the video virtual interview challenging. It's not a technology-proficiency test, after all. However, on the technology front, physicians who find themselves in job-search mode during the coronavirus pandemic should do their best to prepare themselves, their environment, and their computers or devices for a successful meeting. The means "attending" the session as professionally as possible and ensuring that extraneous factors or technology don't get in the way of a productive conversation.

Some of the prerequisites for virtual interviews are no different than they would be for a formal site-visit interview. First and foremost, look the part and dress professionally. It might feel awkward to don a suit or, for women, other formal business attire, but that's a must. Physicians should be well dressed, well groomed, and reasonably refreshed when going to a video interview. In other words, treat the experience as if it were a formal site interview that you traveled to and prepared for in advance. Leave the casual demeanor behind, or at least in the other room.

It's key to know exactly who will be on the video call and what their roles are, so that candidates can read bios and prepare accordingly. It's also appropriate to ask about the length of the interview and to request an agenda, if one will be prepared.

Following are some of the most important considerations in preparing for a video interview:

**Prepare and "professionalize" the immediate environment. For starters, the room should be well and brightly lit and the background clean and free of clutter.** That means ensuring that there isn't an unsightly stove or a television or even a stack of books or laundered T-shirts in view. As a background, a blank wall, an unembellished window, or a background cabinet with a non-distracting tasteful décor item all work well. Alternatively, many video platforms enable use of green-screen effects, which replace the actual background with a digital or virtual background. A word of caution is in order here: Candidates whose home environments are unsuitable and who want to use a background should opt for something clean and simple, not a potentially distracting image of a tropical beach, an old-growth forest, or a fake wine cellar. Finally, make sure that the lighting in the room is unobtrusive and doesn't interfere or produce visible glare.

**Do a trial run and then take the time to record a hypothetical session with a friend or family member.** In advance of a virtual interview, candidates should receive specific instructions on the technology that will be used, as well as a link for getting into the session. For those who haven't used the technology that will host the meeting, it's important to get a trial subscription and ensure they're familiar with the way it works and any features that might be used. Many physicians in primary care and internal medicine subspecialties have already had their trial by fire conducting patient virtual visits, but for others, video-meeting platforms might be new turf.

**Get rid of noise and potential distractions.** The interview setting should be quiet and calm. That means ensuring that background noises, including pets and family members, aren't a factor. Ideally, opt for a completely quiet room — and house or apartment — if possible, and close windows to minimize street noise. Even minor background sounds, such as someone starting a washing machine two rooms away, can be bothersome enough to be overheard or, worse, distract the interviewee. Of course, it goes without saying that cell phones should be silenced and that all computer notifications that might chime during the session are turned off.

**Ensure optimal body and face positioning.** Even virtual-meeting veterans have likely found out the hard way that having the face positioned too far up or down, and the computer screen below eye level, can affect the experience. The interviewee's head should be looking straight ahead, not down toward a keyboard, which could be very distracting to the interviewer(s). If a candidate is hunched over, for example, that will be visible to interviewers.

Having the computer or device properly elevated before the interview begins is key, so that the physician doesn't need to make adjustments during the session. And once the session is underway, it's important to maintain focus by not moving the head too much or looking off to the side. Even if that feels somewhat stiff, it won't come across that way to the interviewer. It's OK to use some body language, when appropriate, but that should be kept to a minimum because there's not a large room to "absorb" it. Finally, physicians who aren't sure how best to position their devices should ask for help from someone with virtual-meeting experience before the interview. In any event, the interviewee and the equipment should be positioned to enable natural-seeming eye contact between all parties.

**Get the technology in order.** First and foremost, ensure that the Internet connection is solid, and that the computer or device is fully charged and updated, so that it's not likely to interject with an "update-needed" message.

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It's also a good idea to close out any applications and websites that might be running in the background, not only because of potential distraction but also to ensure that the call loads efficiently.

Second, although computers and devices have built-in speakers and some have microphones, the quality of that audio experience can vary considerably. Physicians who expect to attend multiple video interviews or a period of a few months should consider purchasing and installing high-quality USB audio technology. One of the frequent complaints that business people make these days about video meetings that involve potentially multiple attendees is that poor-quality audio from an attendee's computer is distracting.

The same goes for the video quality. Most laptops have an integrated web camera, but some might not, and older desktop computers likely don't have one. If the video quality on the computer is poor, it might be worthwhile to purchase a good-quality web camera. Then, ensure that it's optimally positioned — ideally above the screen, and look at the camera, not the screen, while speaking.

Finally, if the physician candidate might be asked to share a document or other item onscreen, preparing in advance is crucially important. Spending a fretful minute or two trying to get the requested item in view can be nerve-wracking for the physician and possibly annoying for the interviewer.

### **Some aspects of interviews haven't changed**


After physicians have prepared their environments and equipment to support a successful interview, they should remember that even with the pandemic, the expectation is that the proceedings will be business focused. Just because there's not a conference room in the mix, it doesn't mean that casual behavior is okay. It isn't. The session likely will be conducted formally and highly professionally. As such, interviewees should avoid chitchat or lengthy discussion about the pandemic unless the interviewer raises the topic and seeks their perspective.

One thing to watch for in the video interview is that people sometimes talk over each other more than they might in a room, when they're anxious to make a point. That's never okay in a face-to-face meeting, and it's potentially more distracting (and apparent) within the confines of a video session. Because there is sometimes a brief lag after someone speaks, depending on the technology in use, it's advisable to wait an extra second or two before speaking.

As with any interview, candidates should ask questions at the end of the interview — about culture, team makeup, and roles and responsibilities — and during proceedings if it's appropriate. Those questions should be prepared ahead of time. Candidate should also spend extra time researching the organization and reviewing any information that's available online about both the practice and the community. Without the benefit of a facility walk-through, the physician candidate might need to elicit important information about the actual working environment, available equipment, and other factors that would affect daily practice. It also helps to keep the names of interview participants handy in any virtual roundtable interview involving more than three participants.

As with any type of interview, timely follow-up is important. Candidates should send an email thank-you note to key interviewers and any recruiter or staff member(s) who arranged the session, ideally within 24 hours. If the candidate is highly interested in the position, it's appropriate to express that in the thank-you note and to inquire about possible next steps.

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## How to Decline a Job Offer Tactfully

By Nisha Mehta, MD, a physician leader whose work focuses on physician empowerment, community building, and career longevity in medicine

The job search is hectic and stressful, and we put so much effort into finding the right job and trying to get the job offer that we rarely think about how to decline an offer. And yet, it is prudent to do this well.

Many people mistake dragging their feet on contracts while they entertain other offers, and then just letting the discussions fade away instead of formally telling a potential employer that they're not interested. I've been guilty of this myself. In general, it's always good to close the loop and make sure everyone is on good terms. We know how frustrating it can be when an employer doesn't get back to us about the status of an application, and this goes both ways. Each side invests time and money into the process, and in many cases, other decisions are contingent on the hire.

Additionally, you never know if your paths with the people you interviewed will cross again. Maybe the job you took instead doesn't work out, and this was a close second choice, and you want to approach them again. While you are looking in a particular job market, and the partners at the practice you turned down go to school with your children. Or perhaps you find yourself searching for a new job and someone you interviewed with is now associated with another practice you're interviewing at or happens to have been a co-chief resident with members of the new practice.


In reality, the physician world can seem very small. Although there may be about 1 million practicing physicians in the United States, you'll see that worlds often collide throughout your career. In today's interconnected world, it's more and more likely that someone you interact with in one context will turn up in another. Maybe your practices will be part of the same network, or maybe you'll see people at a conference.

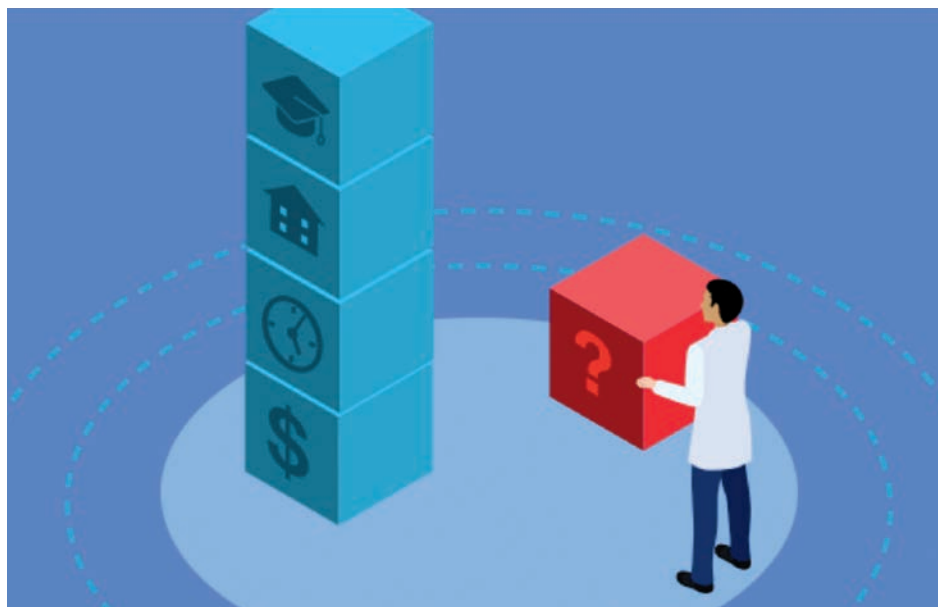
Consequently, it's best to let the other party know as soon as you're sure you're not interested so that they can move on with the hiring process and adjust any related plans accordingly. Furthermore, how you do it, matters. If this is a group you've spent a lot of time talking to who was recruiting you heavily, get on the phone with them and explain why you went in another direction instead of notifying them via an email or text. Take the time to reiterate that you appreciated the offer and their time, and hope to stay in touch, if there's constructive feedback, you can give them about why the job ended up not being the most attractive offer, do so (tactfully). Maybe it's just that your spouse couldn't find a job in that town or you decided you wanted to move closer to family, but sometimes it is about the salary or the call structure or a vibe you got at the practice. Most groups will appreciate the feedback so that they know how to market themselves in the future.

The hiring process is very personal, and chances are, you've gotten to know multiple people on the other side of the process very well, and it likely warrants a few personalized messages to express appreciation, rather than one communication to the head of the group. Maybe there's an HR director or realtor you've worked with extensively, or a partner who really took the time to answer all of your questions or host you at their home for dinner. Take the time to email them separately and let them know how much you appreciated their help. Ideally, don't drag your feet on this because you'll likely forget to do it later. As an added reason to do this, if you ever need to interact with or ask a favor from any of these people in the future, it'll be a lot less awkward to reach out.

When in doubt, think about how you'd like to be treated if you were the one who was being declined in that particular situation. Who would you like to hear from, and what feedback would you have wanted based on your conversations and interactions? Although these things add yet another item to your to-do lists, your networks are your greatest assets, and ensuring positive residual feelings will likely end up being a worthwhile investment.

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## Unusual Parts of Compensation Packages

By Nisha Mehta, MD, a physician leader whose work focuses on physician empowerment, community building, and career longevity in medicine

In speaking to so many about their job offers, I've realized that we're often myopic in terms of what we think can be negotiated when discussing a contract. There are the traditional things everyone asks about — salary, bonus structure, call responsibilities, vacation schedule, and signing bonuses, to name a few. However, when talking to people about what their ideal job looks like, there's often more random things on a wish list. What we fail to realize is that those are all things that can be asked for, but that nobody else would even think to offer them to sweeten the deal.

Some examples of these?

- An early start and end to the day
- Dedicated academic or administrative time
- Unique FTEs such as 0.7 or unique structuring of their FTEs, such as alternating four- and two-day weeks
- Bonuses for creation of alternative revenue streams for the practice

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- Changes in the amount of allotted CME money or money for office furnishings or technology
- The ability to work from home a certain number of days a week (for example, doing telehealth)
- A specified patient population according to their area of academic interest/desired practice panel
- An increased number of support staff such as scribes or medical assistants
- The speaker system which you will have in your operating room

Some of these may sound silly to you to ask for, but I know of physicians who have asked for and received these things as part of their contract negotiations. Remember, what brings happiness in your day-to-day life as a physician is very individualized, and therefore, asking for those things that will enhance your satisfaction (e.g., career longevity) at that job is not unreasonable.

Of course, asking for these things can be an art form. Understand that every institution has different flexibility or bandwidth for accommodating individual requests. You may want to look at what other accommodations have been made for other physicians on staff as precedent for what may be realistic prior to compiling your list of asks. Also, be careful about how many of these additional things you ask for. If you have 10 unusual requests, even if they are relatively minor, the message to the employer could be that this is a pattern of behavior where you will always be asking for exceptions to normal operating procedures.

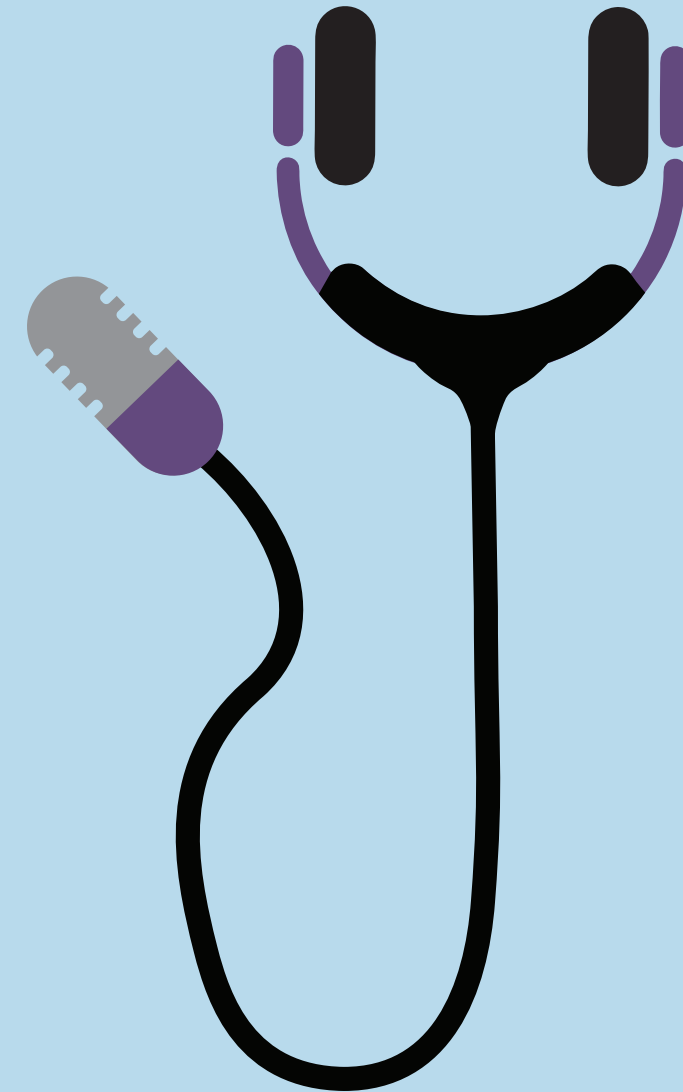
Figure out which ones mean the most to you. Also figure out which ones are going to be harder to negotiate later, as your negotiating power is always greatest before you sign a contract. Be prepared to justify the asks so they understand why they would make accommodations. For example, if you are able to clearly articulate why something will lead to increased efficiency, lead to better patient outcomes, or contribute to your career longevity and prevent burnout, this would help your case. It would also help them to explain to others who question why these special accommodations were granted.

As demographics in medicine change, unusual asks will become more frequent. The sustainability of our health care workforce requires out-of-the-box solutions, and for some of you, these may be part of them! If you don't ask, you won't get it.

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Classified Advertising Section

Sequence of Classifications

Table listing various medical specialties such as Addiction Medicine, Allergy & Clinical Immunology, Ambulatory Medicine, Anesthesiology, Cardiology, Critical Care, Dermatology, Emergency Medicine, Endocrinology, Family Medicine, Gastroenterology, General Practice, Geriatrics, Hematology-Oncology, Hospitalist, Infectious Disease, Internal Medicine, Internal Medicine/Pediatrics, Medical Genetics, Neonatal-Perinatal Medicine, Nephrology, Neurology, Nuclear Medicine, Obstetrics & Gynecology, Occupational Medicine, Ophthalmology, Osteopathic Medicine, Otolaryngology, Pathology, Pediatrics, General, Pediatric Gastroenterology, Pediatric Intensivist/Critical Care, Pediatric Neurology, Pediatric Otolaryngology, Pediatric Pulmonology, Physical Medicine & Rehabilitation, Preventive Medicine, Primary Care, Psychiatry, Public Health, Pulmonary Disease, Radiation Oncology, Radiology, Rheumatology, Surgery, General, Surgery, Cardiovascular/Thoracic, Surgery, Neurological, Surgery, Orthopedic, Surgery, Pediatric Orthopedic, Surgery, Pediatric, Surgery, Plastic, Surgery, Transplant, Surgery, Vascular, Urgent Care, Urology, Chiefs/Directors/Department Heads, Faculty/Research, Graduate Training/Fellowships/Residency Programs, Courses, Symposia, Seminars, For Sale/For Rent/Wanted, Locum Tenens, Miscellaneous, Multiple Specialties/Group Practice, Part-Time Positions/Other, Physician Assistant, Physician Services, Positions Sought, Practices for Sale.

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Obstetrician/Gynecologist ... = 1 word
A ..... = 1 word
Dalton, MD 01622 ..... = 3 words

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This advertisement is 56 words. At \$10.85 per word, it equals \$607.60. This ad would be placed under the Chiefs/Directors/ Department Heads classification.

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Classified Ad Deadlines

Table with 2 columns: Issue, Closing Date. Rows: July 18 (June 27), July 25 (July 3), August 1 (July 12), August 8 (July 19)

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Internal Medicine (see also FM and Primary Care)

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Pulmonary Disease

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Surgery, General

ACUTE CARE/GENERAL SURGEON FOR WENTWORTH-DOUGLASS HOSPITAL — Requires Medical Degree, completion of Surgical or Emergency Medicine Residency and completion of Surgery Fellowship, BC/E in Surgery with ABS, eligible for NH medical license. Send CV to: Irene McCain, Medical Staff Offices, Wentworth-Douglass Physician Corp., 789 Central Ave, Dover, NH 03820; imccain@mgb.org

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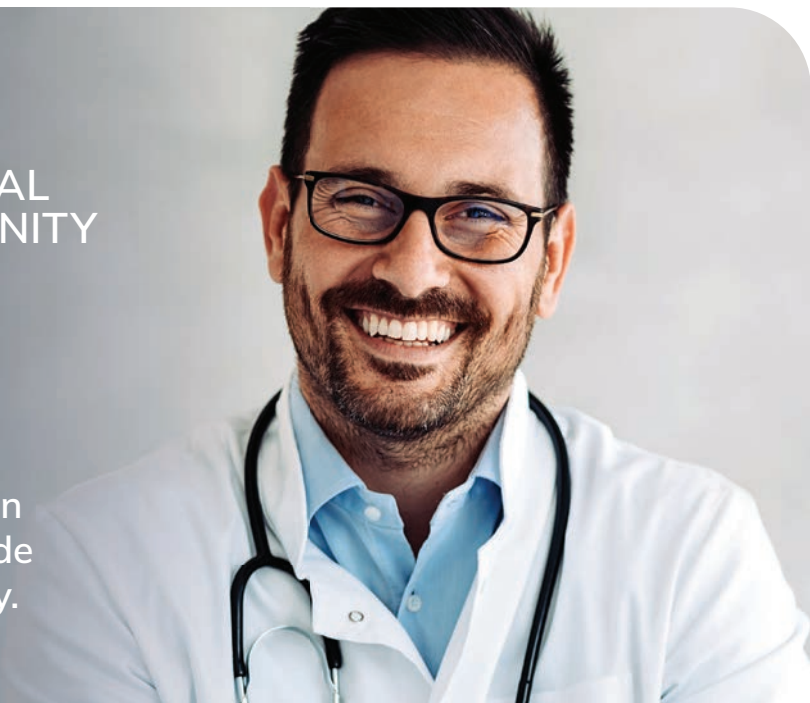
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**Joseph Li, MD - Chief of Hospital Medicine**  
JLi2@bidmc.harvard.edu

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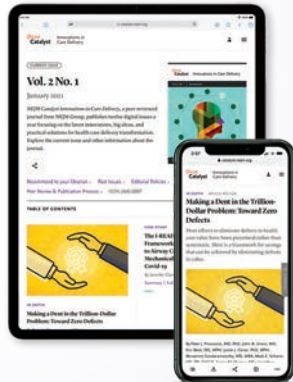
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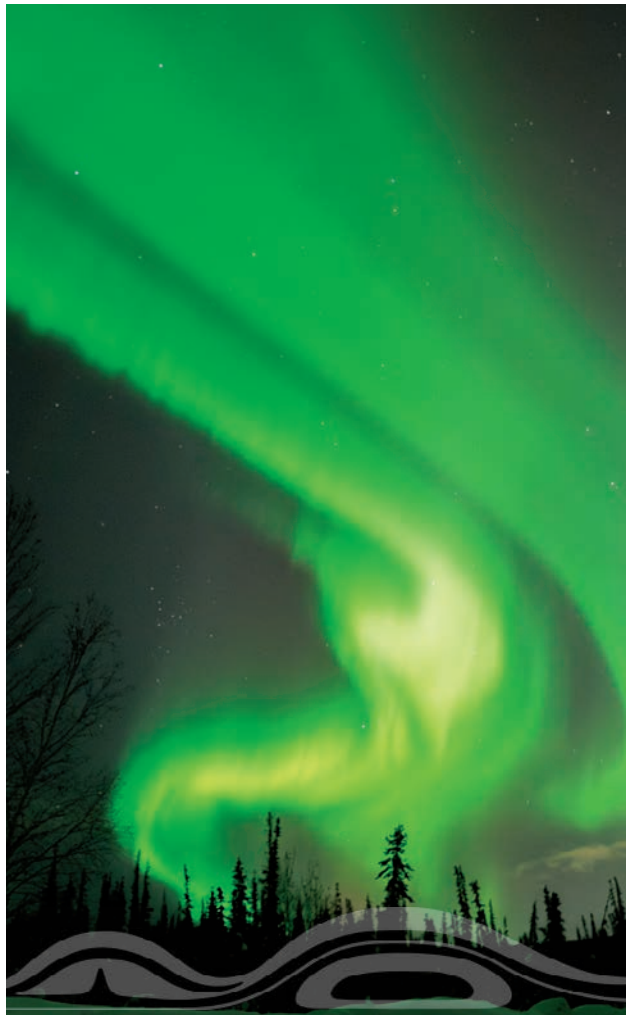
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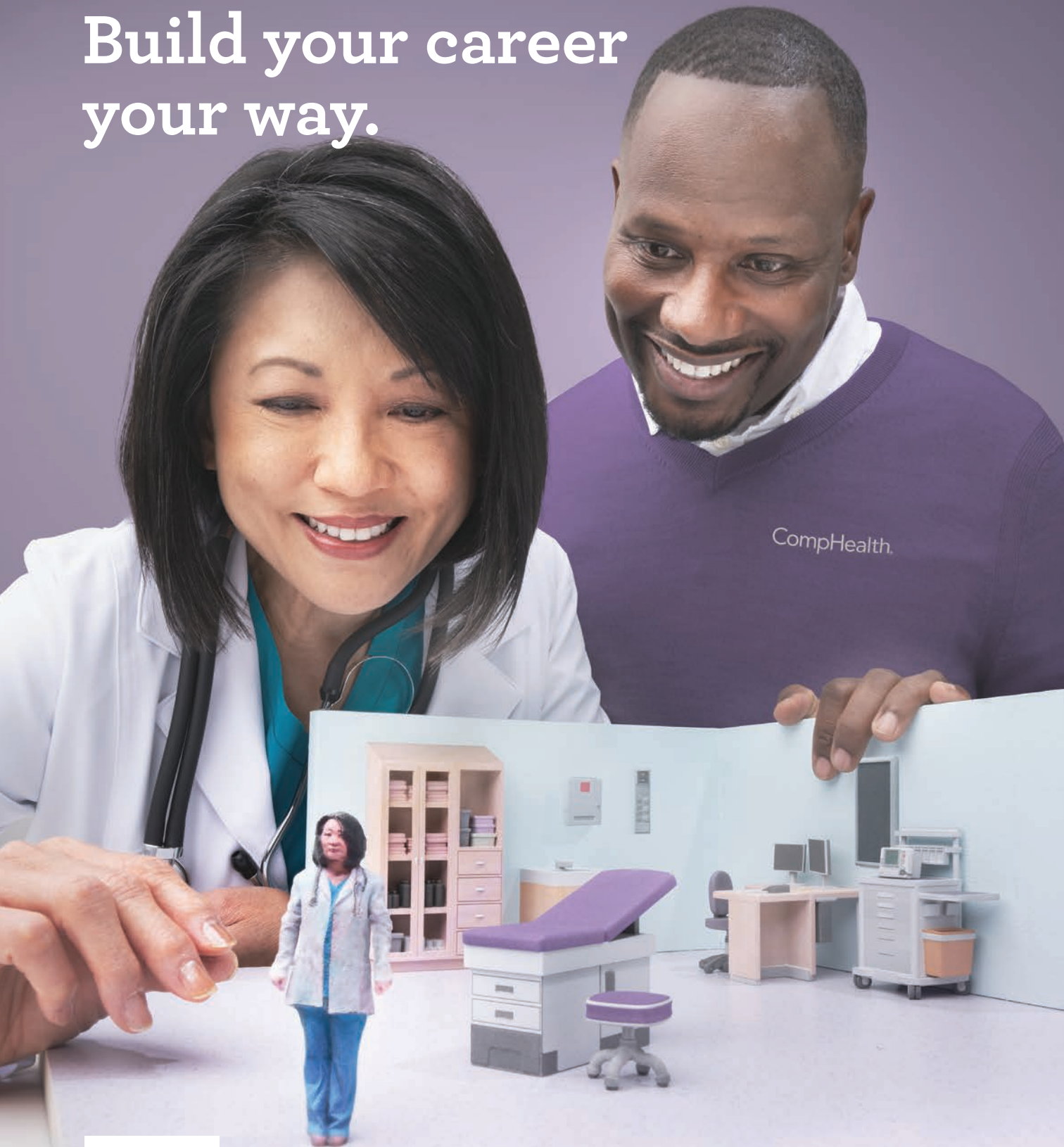
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