



Association of Women Surgeons

35 E. Wacker Drive, Suite 850, Chicago, IL 60601 | 312-224-2575 f: 312-644-8557 | WomenSurgeons.org

Finding and Keeping Your Job as a Surgeon: Maximizing Success

It has been estimated that 50% of physicians change jobs within the first two years.¹ A major contributor to physician turnover is a mismatch in expectations and practice culture. The three top reasons for leaving a practice are (1) poor cultural fit with the practice (51%), (2) relocating closer to family (42%), and (3) compensation (32%).² Low compensation correlates with dissatisfaction, whereas high compensation does not as clearly match satisfaction.³

Prioritization

The first step in the job search is to inventory what is important to you and to your family. What are your priorities? Consider *your* goals and things of importance, not the priorities of your attendings. If family time is a top priority, then becoming an internationally known chairperson of a program may not fit. This personal inventory should include spouse/partner input. Set long-term five- and ten-year goals, and differentiate needs versus wants. What will be your commitment to medicine, and what will be your commitment to yourself and your family?⁴ What are their needs and priorities?

The following topics might be included on a priority list:

- Family
- Predictability
- Income
- Proximity to Family
- Autonomy
- Vacation
- Security
- Call
- Location
- Weather
- Power
- Sports
- Diversity
- Work Type
- Excitement
- Recognition

When prioritizing, two big decisions are often opposing: (1) location vs. job and (2) opportunity vs. job. The first tradeoff is that you can settle on a location based on desire, family, or lifestyle, but compromise

¹ United States Department of Labor. *Occupational Outlook Handbook, 2008–09 Edition*. Available at www.bls.gov (accessed June 6, 2009).

² Primary care. *The Physician Recruiter* 15(3): 2–4, 2007.

³ Larkin H. Good idea, bad location. *American Medical News*. July 31, 1995, p. 7.

⁴ Helmer L. Living a balanced life. *Medical Economics*. Nov 3, 2006, p. 18.

on your choice of position. Perhaps the ideal job may not be in the ideal location. Consider if an urban/suburban or rural location is a good start for you, then weigh criteria such as family, leisure opportunities, or access to sporting events. The second tradeoff is accepting a job offer rather than embracing an opportunity. A job opening is often available because it has been vacated by someone else. Why? Chaos provides opportunity; thus, a hospital or department in transition may provide that opportunity to you. So, do not eliminate an opportunity just because the environment seems to be in flux.

Expectations

- Income vs. Lifestyle
- Industry vs. Family
- Environment vs. Opportunity
- Location vs. Patient Pool
- Benefits vs. Retirement
- Security vs. Reimbursement

Things to Consider When Planning a Job Search⁵

DO think about your work style, ideal work environment, and personal needs before you launch a job search.

DO take your significant other's needs into consideration.

DO learn something about an area — including the housing, economy, amenities, and malpractice climate — before assessing job opportunities there.

DO research various practice types, and decide which is more likely to mesh with your personality and career goals.

DO talk to mentors, medical school faculty, residency program alumni, colleagues, and others to gather information and help clarify your goals.

DO think about getting additional training if you are unhappy in your current job.

DON'T limit yourself to one type of practice. As a physician, you have many options to choose from.

DON'T move anywhere *just* for a job.

DON'T rush your job search. Give yourself time to develop and implement a strategy.

Networking

Three-fourths of jobs are not advertised.⁵ You therefore need to network beyond your inner circle, i.e., healthcare consultants, representatives, attorneys, or accountants. Networking means tapping into the collective experience at your disposal. A non-threatening way to begin is to solicit an attending from your program to introduce you to several people at a conference. At each interaction, appeal to the ego by first asking for advice, not a job.

⁵ Weiss GG. Finding a job—step 2: start looking. *Medical Economics*. Nov 5, 2004, p. 14.

Search Firms

Search or recruitment firms function either as your agent or as your practice's agent. If the firm represents the practice, ask yourself why this job needs a recruitment firm. It may be due to location or high turnover in staff. Most agencies work for contingency fees under which the practice pays the recruitment agency, for example, one-third of your first year's salary. The price of their networking for you is that their commission erodes your upfront pay.

Career Counselors

The "sister" to the recruiter is the career counselor. Career counselors are paid for by you and, as such, you utilize them as a career coach. Their motivation can be directed toward your interests.

Networking and Recruitment Do's and Don'ts

DO start networking before you need a job. Keep in contact with your network through email, telephone calls, and visits.

DO write a thank-you note to professional contacts who go the extra mile to help you.

DO always have a business card handy.

DO keep networking even after you've found a job. You never know when you might need assistance again.

DO limit yourself to search firms with at least five years' experience in physician recruiting, not in placing allied health-care personnel.

DON'T assume that because someone isn't in the medical field, he or she isn't a possible contact.

DON'T ask more than two or three recruiters to help you. Remember the "too many cooks" rule.

DON'T work with a search firm that charges you. Recruiters are supposed to collect their fee from the employer not the job applicant.

DON'T allow recruiters to distribute your CV without your permission.

DON'T just accept information from a recruiter alone. Speak to the employer at the job site.

Types of Jobs

Practice type is important to consider since each has trade-offs. The list below offers some types of practice types. Asking which type is demonstrated within each practice setting is an important way to weigh competing opportunities.

- Academic
- Private Practice
- Group Practice
- Multi-Specialty Group Practice

Job Factors

There are several aspects of evaluating a potential job to keep in mind:

- (1) Job Description — This includes what job you will be performing, on whom, and for how many hours per week. On-call responsibilities are an important point to be negotiated if this matters to you.
- (2) Compensation — Low compensation correlates with dissatisfaction, whereas high compensation does not correlate so clearly with satisfaction. A fair compensation is essential. Individuals need to work for what they think they are worth as long as that is not inflated. Salary needs to be defined, as does the bonus structure. That is, upon what measure of productivity will raises and bonuses be based? Acceptable measures are RVU, charges, and collections. The RVU scale is the only measure of true work because charges are dependent on what fee structure is utilized and collections are dependent on the payer mix. Profitability, or residual money left after gross income minus expenses, is a common model, but it does not favor physicians because expenses are not a variable which they directly control.
- (3) Benefits — Insurance, retirement, and personal development expenses should be covered. Costs of attending meetings are real expenses for surgeons, as are multiple hospital dues and license fees.
- (4) Malpractice — What is important is not what the employer pays, it is what is not covered. There are two types of malpractice insurance: (1) occurrence-based, which covers you indefinitely for acts that occurred during coverage; and (2) claims made, which only covers for claims filed while the policy is in effect. The latter is much cheaper, yet requires a tail policy to cover suits after you leave the practice. Who pays for this must be defined.
- (5) Termination Clauses — There are two types of termination: (1) not for cause, which usually provides a notice period of 3, 6, or 12 months. This clause works to the benefit of both parties. Six months is a good compromise for a surgeon; and (2) for cause, which sets forth on what ground(s) you can be fired. Clear infractions, such as loss of license or felonies, are simple, but you must consider lesser issues. What happens if one of the other partners simply does not like you?
- (6) Partnership and Governance — You need specific parameters to buy into a partnership. What is the track, what is the time frame, and what is it tied to? Do not be too aggressive on this point as it is their assets at stake. Remember, it is their hard-earned practice at stake. More importantly, is it spelled out?
- (7) Loan Agreements—Sometimes, hospital loan agreements or salary support is included. What are the repayment terms, what is forgiveness, and what are the repercussions if you leave prematurely?
- (8) Receivables—Who owns your uncollected money when you leave or retire? This can realistically be \$400,000 or so. It changes the impetus of how productive you will be in your last months.
- (9) Restrictive Covenants — There are three components of a non-compete agreement: (1) non-competition, which sets forth the area and period of time in which you cannot practice close to your old job; (2) non-solicitation, which sets forth rules about attracting patients to leave with you (this needs to be balanced with patient care interests); and (3) non-employment, which sets

forth rules about poaching staff when you depart. Appreciate that these restrictive covenants are written to protect the practice, not you or the patients' interests.

Do's and Don'ts of Beginning a New Job

DO find out what the other physicians in the practice typically wear and dress accordingly

DO try to find a mentor who can show you the ropes

DO use your lunch hours to get together with your new colleagues and get to know them better

DO volunteer for projects that will help you get noticed in the community

DON'T complain about the practice administrators, your colleagues, the staff, or your previous job

DON'T hesitate to ask questions. No one expects you to know everything at once.

DON'T make assumptions about what your colleagues expect of you. Again, ask.

DON'T utter the words, "That's not how we did it at my old practice."

Please refer to the [AWS Pocket Mentor](#) for additional information about maximizing your success as a surgeon.