



# Hospitalist Career Guide

Society of Hospital Medicine & Doximity

shm | doximity

## Contributing Editors

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# Introduction

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### Interview with Eric Howell, past President of SHM (2013)

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There are multiple reasons why a career in hospital medicine is a great choice for young doctors and doctors-to-be. One is that the clinical work is very rewarding; ill patients depend on hospitalists to heal them so they can be sent home from the hospital. Another is, that while the clinical work is rewarding, it's not all consuming. Most hospitalist programs are set up so that when you're off, you are really off (no call). A third is that the pay is really good and has gone up every year for more than a decade. The most recent data show the median hospitalist salary is in excess of about \$275,000. In fact, it is one of the few specialties where salaries are still climbing. Fourth, there is no need for a fellowship, which takes time and delays a full salary. Last but not least, becoming a hospitalist is "risk free". If a hospitalist of any age decides to follow another career path, all of those options, from a fellowship to outpatient care, remain available at any time.

I went into hospital medicine because I loved taking care of sick patients with a variety of intellectually stimulating medical problems. In the hospital setting I find I can develop close, and extremely rewarding relationships with my patients in the short time they are hospitalized. I also really enjoy the team dynamic of the hospital setting. Interacting with nurses, other physician colleagues, with house-staff and medical students has been incredibly fulfilling for the more than 20 years I have been doing it. Lastly, I love the ability to change the medical system for the better, which is something that we are uniquely positioned to do.

Hospital medicine is currently and continues to change health care for the better. In all the hospitals I am affiliated with, electronic health records EHRs have worked better when hospitalists helped implement them, or the CMIO was a hospitalist her/himself. Quality improvement in the hospital, as well as reducing waste, is still a major objective of the health care system. No other specialty is better positioned, has more skills or more resources from their national society than the hospitalists. Many hospitalists have already reduced medical errors, improved the discharge process, have collaborated with ED physicians and PCPs to care for complex patients and reduced the incidence of DVT/PE of hospitalized patients.

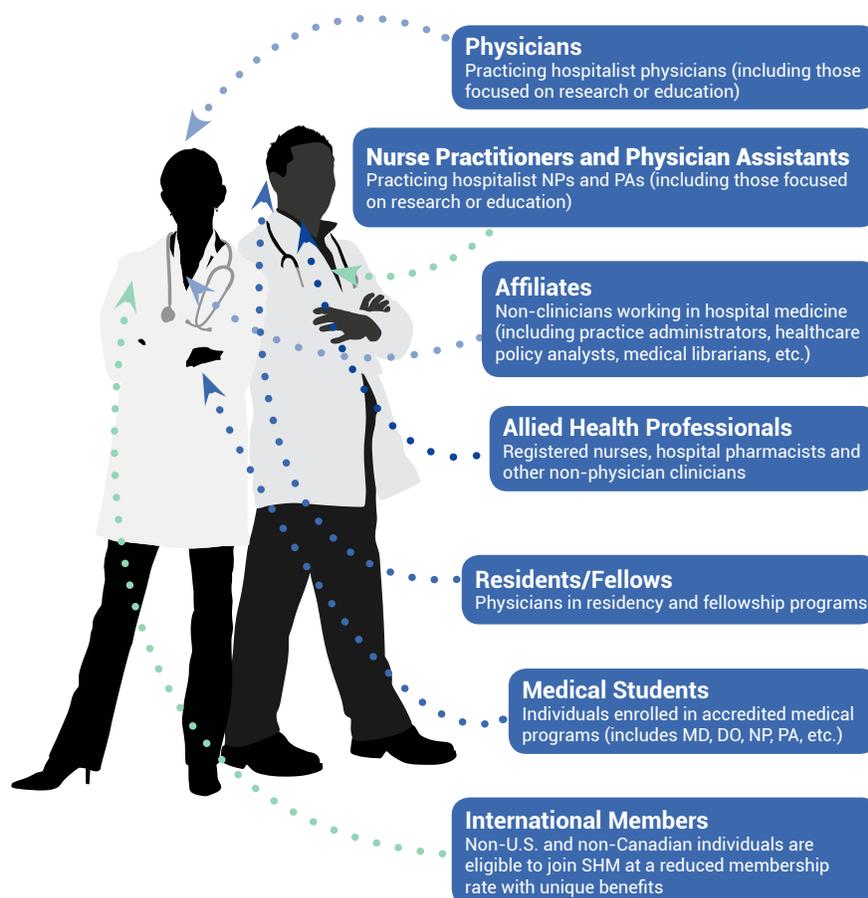
*The Society of Hospital Medicine, or SHM, is an organization full of thousands of excited hospitalists willing to collaborate, is a tremendous resource for practicing hospitalists; complete with clinical skill building, QI programs and leadership development.*

SHM has a number of ways it works to help the house-staff and trainees develop a career in hospital medicine. From dedicated lunches at the annual meetings (with >100 attendees), QI grants for learners, local SHM chapters with meetings dedicated to recruitment, local SHM chapters with poster sessions (an some pay for the session winner to attend the SHM annual meeting) to even a list of hospital medicine fellowships for those wanting to really sharpen their skills as a hospitalist.

# Hospital Medicine Overview

A medical specialty dedicated to the delivery of comprehensive medical care to hospitalized patients. Practitioners of hospital medicine include physicians (“hospitalists”) and non-physician providers who engage in clinical care, teaching, research and/or leadership in the field of general hospital medicine. In addition to their core expertise managing the clinical problems of acutely ill, hospitalized patients, hospital medicine practitioners work to enhance the performance of hospitals and healthcare systems by:

- Prompt and complete attention to all patient care needs including diagnosis, treatment and the performance of medical procedures (within their scope of practice)
- Employing quality and process improvement techniques
- Efficient use of hospital/healthcare resources
- Safe transitioning of patient care within the hospital, and from the hospital to the community, which may include oversight of care in post-acute care facilities
- Collaboration, communication as well as coordination with physicians and healthcare personnel caring for hospitalized patients





## Hospital Medicine Overview

### Compensation

A hospitalists compensation typically consists of 80% base pay and 20% supplemental income based on production and performance.

Because hospitalists will not often generate enough revenue from patient care alone, their value to the hospitals can be measured by their assistance with different challenges, including:

# 40%



of hospitalists are employed directly by the hospital

- Patient satisfaction
- Core measures
- Readmission rates
- Early morning discharge orders/times
- Citizenship (e.g. committee participation, grand rounds presentations, community talks, research publications, lectures, etc.)
- ED response time, time from ED notification to orders, or other ED flow measures
- Transitions of care measures (e.g. PCP communication, discharge instructions, follow-up appointment scheduled, post discharge call)
- Referring physician or other stakeholder satisfaction
- Other patient flow/throughput measures
- Mortality rates
- Other medical record measures (e.g. record completion, verbal orders, timely dictation, etc.)
- Average length of stay, cost per case or other utilization-related measures
- Utilization of HER/CPOE
- User of order sets, clinical protocols or pathways
- Medication reconciliation
- End of life care

The mean annual compensation by year is

# \$278,746

for a non-academic hospitalist

That's an increase of

# 4.84%

from annual compensation rates in 2014

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## Clinical Services Provided by Hospitalists

- Admission/care of unassigned patients from the ED
- Admission/care of patients referred by primary care physician
- Surgical co-management
- Medical sub-specialty co-management
- Care of patients in an ICU setting
- Code blue or cardiac arrest team
- Procedures
- Observation/short stay unit
- Procedures
- Observation/short stay unit
- Nighttime admission or “tuck-in” service
- Nighttime cross-cover services
- Primary clinical responsibility for rapid response team
- Care of patients in other specialty units and facilities
- Care of patients in post-acute care units and facilities
- Palliative care consults
- Care of newborns

## Staffing and Scheduling

Most practicing hospitalists have completed their residencies in internal medicine, however other specialties that lead to hospital medicine can include: family medicine, pediatrics, medicine/pediatrics, emergency medicine and geriatric medicine.

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*Hospital medicine offers flexible schedules & positive work-life balance*

*On average, a hospitalist completes 182 shifts per year with each shift ranging from 12-14 hours.*

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Hospitalists in larger groups typically have 7 days on 7 days off or variable schedules. The smaller the group size, the more likely you are to see Monday through Friday scheduling.



## Introduction

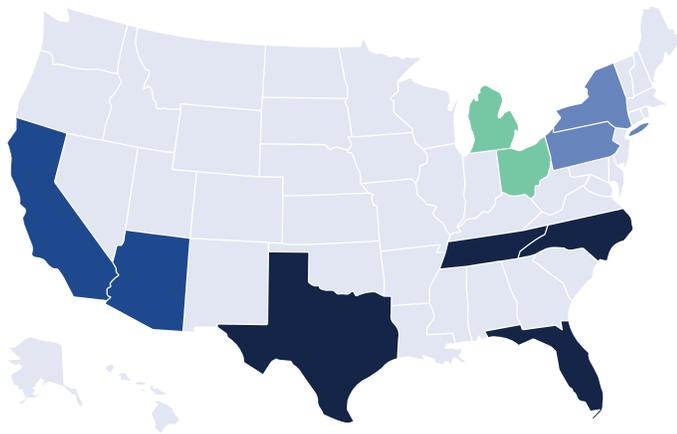
# Hospital Medicine Overview

### Where do Hospitalists Work?

Armed with the understanding of different practice options, a prospective hospitalist will be able to choose a program that best meshes with individual, family and career goals. Hospitalists work in a variety of environments including:

- Hospital, Health System or Integrated Delivery System
- Multi-State Hospitalists Management company
- University, Medical School or Faculty Practice Plan
- Private Multi-Specialty or Primary Care Medical Group
- Private Local or Regional Hospitalist Only Medical Group

### Top 10 States Where Hospitalists are Employed



*Regions based on ranking:*

**South:** 41.1%

**East:** 18.2%

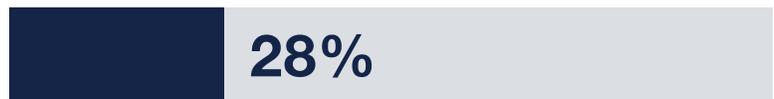
**West:** 20.4%

**Midwest:** 20.2%

**New Adult-Only Hospitalists  
from Residency**



**New Children-Only Physicians  
from Residency**



**New Adult/Children Physicians  
from Residency**



## What Does a Hospitalist Career Look Like?



About **40%** of hospitalists are employed directly by the hospital.



A hospitalists compensation typically consists of 80% base pay and 20% supplemental income based on production and performance

The mean annual compensation by year of a non-academic hospitalist is

**\$278,746**

an increase of 4.84% from 2014.

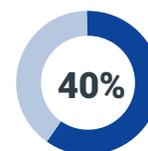


On average, a hospitalist completes 182 shifts per year with each shift ranging 12–14 hours.

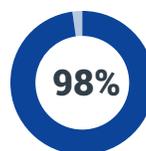
Hospitalists treat **10 to 20** patients per shift, making them one of the largest influencers on the quality of a patient's visit.



Hospitalists are employed at 68% of hospitals nationwide.



of new hospitalists came straight from residency – proving hospitalists are in demand.



of large hospitals (over 200 beds) employ hospitalists.



Hospital Medicine is growing fast. 2/3 of hospital medicine groups have existed for less than 10 years.



While the majority of hospitalists have internal medicine or generalist backgrounds, an increasing number of family medicine, pediatrics and sub-specialties are embracing the hospital medicine movement.

### Typical Educational Path

**4**

YEARS

at a college or university to earn a BS or BA degree, usually with a strong emphasis on basic sciences.

**4**

YEARS

of education at one of the U.S.-accredited medical schools. Usually the first two years are classroom based and the last two are typically hospital-, clinical- and office-based rotations.

**3-9**

YEARS

in a residency program. Through a national matching program, newly graduated MDs enter into a residency program that is under the supervision of senior medical educators.

**1-3**

YEARS

of additional training in a subspecialty is an option for those desiring to be specialized in hospital medicine.



## Why I Chose Hospital Medicine

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### Matt Harrington, MD

In the 20 years since its inception, hospital medicine has had the rare opportunity to define its own identity. Responding to the unmet need in the late 1990s for general internists dedicated to inpatient practice, and thriving in the dynamic healthcare landscape of the early 2000s, hospitalists were proven highly adaptable to a myriad of career arcs. Clinicians first and foremost, hospitalists apply their skills to quality improvement, health information management, hospital and practice administration, public health and medical education, among numerous other pursuits.

Hospital medicine is portable, flexible and in demand. Our clinical focus is management of acute illness — an entity present in every community, at every moment. We practice in a full spectrum of environments, such as urgent care centers, observation units, inpatient wards in community and academic hospitals, as well as intensive care units. We even provide post-acute care at rehabilitation centers and skilled nursing facilities.

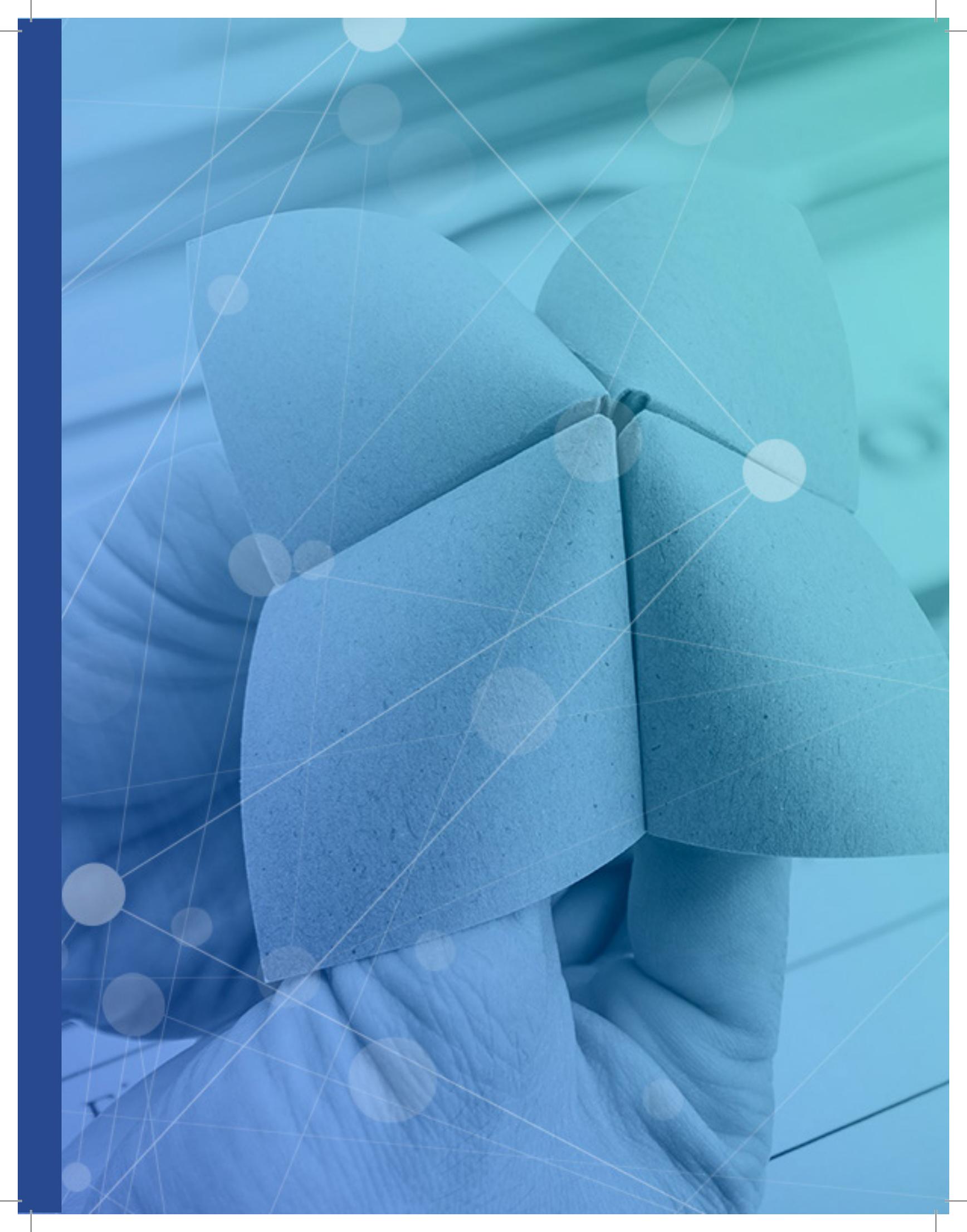
For those entering academics, hospital medicine is ideal. We work closely with medical students and house-staff on inpatient wards, which fosters the opportunities for bedside teaching, didactics as well as mentorships.

Hospitalists develop curricula and teach courses for medical schools. Hospitalists direct many residency programs. Professional societies such as the Society of Hospital Medicine (SHM) organize conferences for career development and showcase clinical vignettes and research projects.

Many people receive initial diagnoses of cancer, heart failure or HIV/AIDS while under care of a hospitalist. Each physician that's practicing clinical medicine will encounter persons struggling with new and life-altering diagnoses — hospitalists care for such patients every

day. We listen, comfort, dry tears and soothe anxieties. For patients suffering from terminal or critical illness, we guide patients and families through life's most challenging decisions.

Hospital medicine offers flexibility and fulfillment. Regardless of whether a physician will seek to pursue academics, quality improvement or purely clinical work, a career in hospital medicine accommodates any path. I chose hospital medicine for my career — I'm confident many young physicians will continue to do the same.





# Where to Begin

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## Where to Begin

# High Level Timeline

To allow yourself sufficient time, here's a suggested timeline on when to start your hospitalist job search.

*Spring Before Final Year of Residency*

Consider your preferences and goals to define your ideal work environment and job. Evaluate both your personal demands (e.g., geography, significant other's job needs), and professional criteria (e.g., type of practice, work setting, compensation).

*June, July & August*

Network and research to gather information about potential job opportunities. Tap into your network to understand what different kinds of jobs are like day to day, to help hone in on which factors matter most to you.

Write your CV, and share it with peers and mentors for review. Develop your online presence, putting your CV on networking sites such as [www.doximity.com](http://www.doximity.com).

Establish your references. Speak to the physicians you would like to use as references to get their permission and understand what they might say about you.

*August & September*

Look for job opportunities via online job postings, journals and recruiters. Reach out to your network to let them know what you are looking for and to learn more about potential opportunities.

Apply to the jobs that align with all of your preferences. Include a cover letter highlighting your specific interest in a position to help distinguish your CV from the crowd.

*September, October & November*

Schedule and prepare for interviews. Become very acquainted with your interviewers' backgrounds, and practice your personal "pitch," explaining why you are the best candidate for the job.

*November & December*

Evaluate and negotiate your job offer. Take a look at the practice, community and compensation to ensure that it's the best fit. Hire an attorney to review the employment agreement.

## Lots of Factors to Consider

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Dan Ricotta, MD & Josh Allen-Dicker, MD

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*Start your job search by focusing on what's under your control*

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The growing field of hospital medicine provides an abundance of opportunity for young physicians looking for a job. However, seemingly boundless choices can be a double-edged sword. How does one make the daunting decisions needed to narrow the field?

First, consider your ideal job. Do you want to work in a large academic center in a large practice group or would you rather work in a smaller setting, such as a community practice? Next, think about where you want to live and work. Do you prefer an urban area or is the rural life for you? Or maybe you are looking for the rotating variety of experiences and locations that will come with locum tenens work. Knowing the answers to these questions will help narrow your initial search.

Next consider your career and life goals. These can help you navigate the sometimes overwhelming landscape of job listings, even when the finer details of a job aren't initially obvious. Early in your career, mentorship can be the only difference between growth and

stagnation. Look for other physicians working in your area(s) of interest. Additionally, look for places where hospitalists have been successful, even outside of your area of interest, whether it be locally or on the national organizational level. Achievement is frequently a sign of supportive hospital and group leadership. This remains true, whether your interests relate to patient safety, medical education or pure clinical care. In many cases, this is information you can find with a quick Internet literature search or informational phone call.

Specific details about a program can be difficult to find during an initial search and will require a site visit. However, the use of surrogates may help you clarify characteristics in advance. For instance, the location of a program may give insight into patient population. Reviewing a hospital's mission statement may provide insight into the work environment and gauge personal fit. Ensuring that your personal values align with the program's is an initial screen to assess compatibility.





# Building Your Professional Footprint

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## Harness The Power of Your CV

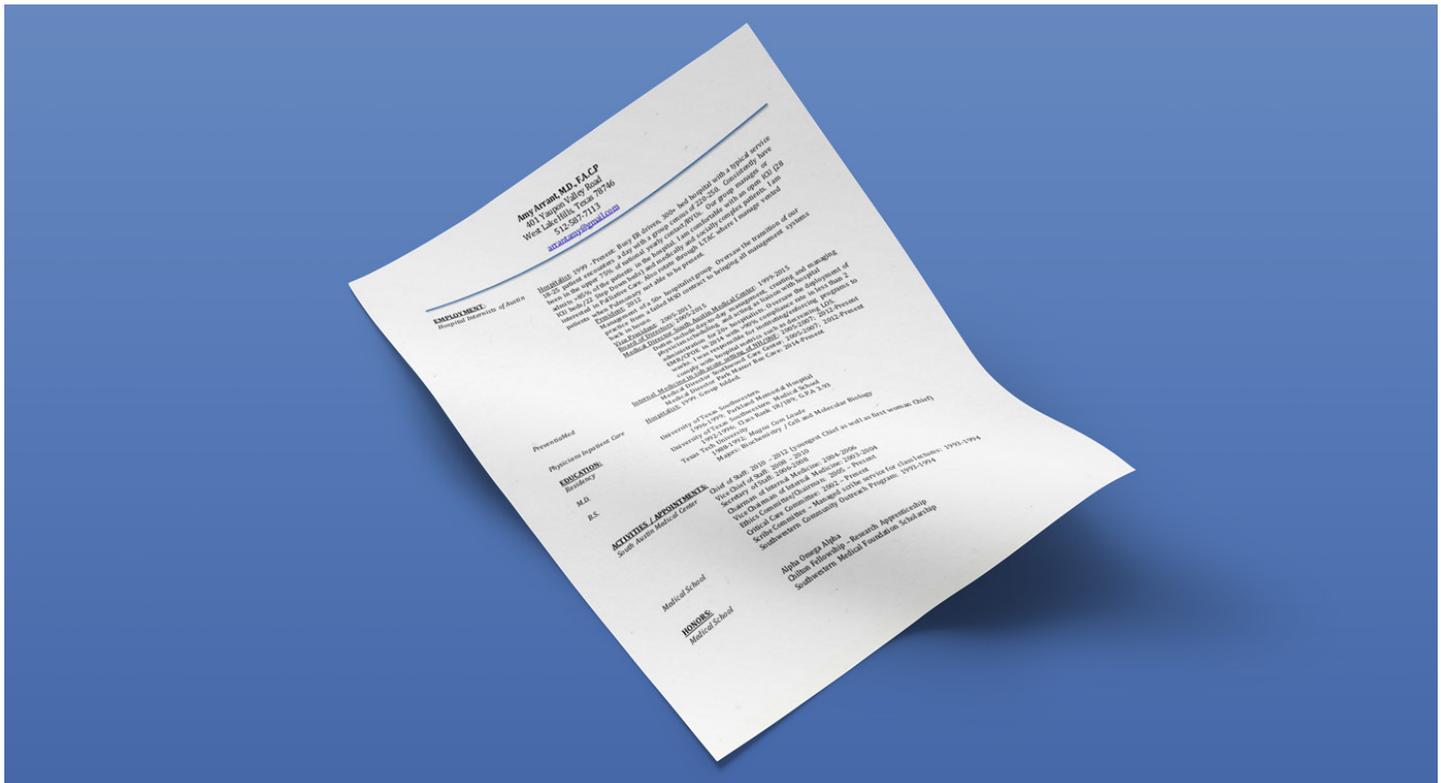
### Your Curriculum Vitae

Preparing your curriculum vitae (CV) is one of the most important steps to finding the right job opportunity. A good CV tells a compelling story about your education, experience, interests and background. It provides the context about your experience and accomplishments to tell the reader why he or she should interview you.

Once you have written your CV, share it with mentors and peers for review and feedback, to ensure you are presenting yourself in the most compelling way.

A CV should be approximately two to four pages in length, and include the following information:

- Contact information
- Education
- Internships, residencies and fellowships
- Research and publications
- Professional memberships
- Board certification
- Licenses
- Work experience (including volunteering)
- Other activities and interests
- References



## Doximity & Your Online Persona

### Take Advantage of Tools that Allow You to Market Yourself Online

With the advent of the Information Age, the role of the CV has evolved, and positioning yourself for top career opportunities goes beyond merely maintaining your paper CV. Today, employers are using the internet to assess potential candidates, and the best way to build your reputation outside of your wards is to control your online persona. According to a Jobvite survey, 94% of recruiters use or plan to use social media in their recruitment efforts. And 78% of recruiters have made a hire through social media. A good online presence goes a long way.

On Doximity alone, there are thousands of hospitals and physician groups who are currently looking for top candidates. And an up-to-date Doximity profile will not only make you stand out to potential employers—it will make you look good in Google search results, too: 85% of physicians are on the first page of Google because of their Doximity/U.S. News profiles. Public information from your Doximity profile syncs to your U.S. News profile instantly, and a completed Doximity profile can rise above doctor rating sites and stand out to potential employers.





# 8 Secrets to Improving Your Doximity Profile

Bryan Vartabedian, MD

While you may already be a member, do you know how to make the most of the CV on your Doximity profile? Here are eight pro-tips to help make you the most of your Doximity physician profile and help with your job hunt:

1

### *Let Doximity Scour the Web For You*

Patients and professionals never stop searching for information on physicians online. Your public facing professional profile represents a 24/7 representation of who you are and what you have accomplished. While keeping everything updated represents a big challenge for all of us in medicine, Doximity does the heavy lifting. The professional network scans the web for the latest information on publications, awards and speaking engagements related to your professional CV. The average physician's profile receives 30 automatic data updates each year from Doximity. If you have been away from your Doximity profile for a while, log in and check it out.

3

### *Take a Top-Secret Shortcut*

It's not publicized, but Doximity will upload your CV information for you. Just send over your most recent resume to:

[cvupload@doximity.com](mailto:cvupload@doximity.com)

Their crackerjack team of CV elves will do all the work. The average curriculum vitae received by Doximity is 21 pages long — that's a lot of typing you get to skip. Since about 85% of Doximity profiles appear on the first page of a Google name search, you should maximize the chances that your hard work gets connected to your name.

2

### *Add "Clinical Interests" to Make Your Profile More Interesting*

List your clinical interests in your Doximity profile. Just start typing and Doximity will provide you an intelligent list of commonly selected clinical subjects. Here's why these interests are important: they allow a more targeted outreach for referrals as well as better curation of Doximity's DocNews.

4

### *Claim your very own custom URL*

Click "Edit" on your Doximity profile and you will see a section to claim a custom link at the top. You can shorten your URL link and optimize it for your own expertise. Include your Doximity profile link in your signature for email, on other social media profiles and in your bio when you speak/publish to boost the quality of your professional presence online. Your Doximity profile should represent who you are and what you're about. This link offers a simple, consolidated connection to that information.

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5

*A Picture is Worth A Thousand Clicks*

A quality headshot has truly become a key element in every online profile. Make a good first impression by choosing a headshot that is clear, professional and high-resolution. Your headshot should probably be updated at least every two years. While Doximity will find and suggest photos that match your profile automatically, uploading your own is a best practice. Doximity profiles with photos appear first in search results and get more interest than those without pictures.

6

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7

*Make Yourself Automatically Available to New Job Opportunities*

There are thousands of jobs available for physicians, NPs and PAs on Doximity. Get matched with the best jobs by indicating your salary and career preferences in the Doximity “careers” section. You can select specific areas where you want to work (like Hawaii!) and can choose between full-time, part-time and locum tenens. Each opportunity is highly targeted, which means physicians only receive a handful of offers specifically matched to their CV each year. Plus, all of the recruiters are required to provide a salary range with each job message.

8

*Your Doximity Profile Works for You – Keep it Updated*

After you have updated the information on your Doximity profile, turn your attention to establishing an online professional network. Doximity members have an average of 53 professional connections on the network — can you do better? Connect with alumni from medical school and residency training. Reach out to your referral network on the platform. Set Doximity to share your direct contact information within your private network and you will be amazed at how quickly the new opportunities start to arrive from colleagues.



# Harness The Power of Your CV

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## SHM Career Center

The job application process can be overwhelming, especially when searching for hospitalist positions. Having one central location to apply and be recruited is key to streamlining the process and maintaining an effective search.

The SHM Career Center, the job board dedicated to hospital medicine online, connects you with hospitalist

job postings throughout the country on one website. Create and update your Career Center profile and search for jobs by simply entering your specialty and state. Uploading your CV will allow potential employers to connect with you if your qualifications match their requirements.

Visit [www.shmcareers.org](http://www.shmcareers.org) to begin your search today.



SIGN IN / REGISTER EMPLOYER

Visit Our Journals

sm Career Center

Home Job Search Profile/CV Job Alerts Career Blog



Your next great practice opportunity

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# SHM: Get Involved

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## You're in the Driver's Seat as A Hospitalist

### *Volunteer and Engagement*

SHM strives to provide its members with meaningful engagement and networking opportunities and volunteer experiences to build their professional profile, while making a difference for their patients, their practice and the specialty as a whole. Opportunities to get involved are available through chapters ([hospitalmedicine.org/chapters](https://hospitalmedicine.org/chapters)), at your areas of interest through special interest groups and committees ([hospitalmedicine.org/committees](https://hospitalmedicine.org/committees)), and distinguished as a Fellow through SHM's Fellowship Program ([hospitalmedicine.org/fellows](https://hospitalmedicine.org/fellows)).

Let your voice be heard. Join other hospitalists in working toward shared goals — to advocate for hospital medicine, hospitalists and patients they serve. The Grassroots Network is mobilizing hospitalists across the nation to become the voice of hospital medicine in healthcare policy.

Strong advocacy for hospitalists and their patients depends on building and maintaining relationships. The Grassroots Network provides tools, resources and opportunities to grow connections between colleagues, policymakers and SHM.

In addition to taking part in Action Alerts for SHM's legislative priorities, members of the Grassroots Network are able to:

- Stay current on developments in healthcare policy and the priorities of hospital medicine
- Share their experiences with healthcare policies and programs
- Participate in Grassroots Network events such as congressional visits and policy forums

Connect Online. The Hospital Medicine Exchange (HMX) is an online community exclusive to SHM members. With over 11,000 unique users, HMX features dedicated forums for special interest areas, including quality improvement, practice management, family medicine, public policy and more. Participants can connect with fellow hospital medicine professionals to ask questions, share best practices, crowd source ideas and more. HMX is available at: [www.hmxchange.org](https://www.hmxchange.org) and via a dedicated mobile app.

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## *Education and Research*

**Medical Students:** SHM has two opportunities for educational grants related to hospital medicine. Students select between a summer program (10 weeks) or longitudinal program (16 months), where they will work with an SHM member-mentor and be exposed to meaningful inpatient clinical work, hospital-related administrative responsibilities and educational activities. Recipients receive up to \$5,000 in grant funding, complimentary registration to SHM's annual meeting and an automatic acceptance into the national RIV competition.

**Residents:** SHM is offering a resident-travel grant where the recipients will receive complimentary registration and \$1,000 to help cover the costs of travel and accommodations to SHM's annual meeting. The application timeline will run concurrent with SHM's national abstract submission timeline. Abstract and poster competitions are held at both the national level and local level through your chapters. Contact your local chapter leader now to find out what opportunities are available.

**SPARK ONE:** A comprehensive online self-assessment tool created specifically for hospital medicine professionals. The activity contains 450+ vignette-style multiple-choice questions covering 100% of the American Board of Internal Medicine's Focused Practice in Hospital Medicine (FPHM) exam blueprint. This online tool is your complete resource for successfully preparing for the FPHM exam, or assessing your general knowledge in hospital medicine. Used as a self-paced study guide, it engages learners through an open-book format, allowing the users to review detailed learning objectives and the discussion points, as well as defining individual areas of strengths and weaknesses. As a resident member, you receive FREE access to SPARK Research, Innovations and Clinical Vignettes: Abstract and poster competitions are held at both the national level and local level through your chapters. Contact your local chapter leader now to find out what opportunities are available. Visit the site for resources for the Early Career Hospitalist Track: [hospitalmedicine.org/abstracts](https://hospitalmedicine.org/abstracts).

**SHM's Annual Meeting:** The largest medical meeting focused solely on hospital medicine, offering an array of educational and networking opportunities created expressly for the hospital medicine professional. The Annual Meeting offers an Early Career Hospitalist track and a special program including speed mentoring, luncheons and socials, a scientific poster competition and an interview workshops. Learn, network and be a part of the movement each year by attending SHM's annual meeting."

**Leadership:** Build your leadership skills by attending Leadership Academy or by taking on a leadership role within SHM. The SHM Leadership Academy prepares clinicians, academicians and administrators with vital leadership skills traditionally not taught medical schools or in typical residency programs, tailored specifically to hospital medicine. There are three courses that run concurrently over the span of four days and are led by world-renowned faculty.

- Strategic Essentials
- Leadership: Influential Management & Mastering Teamwork





# Research & Networking

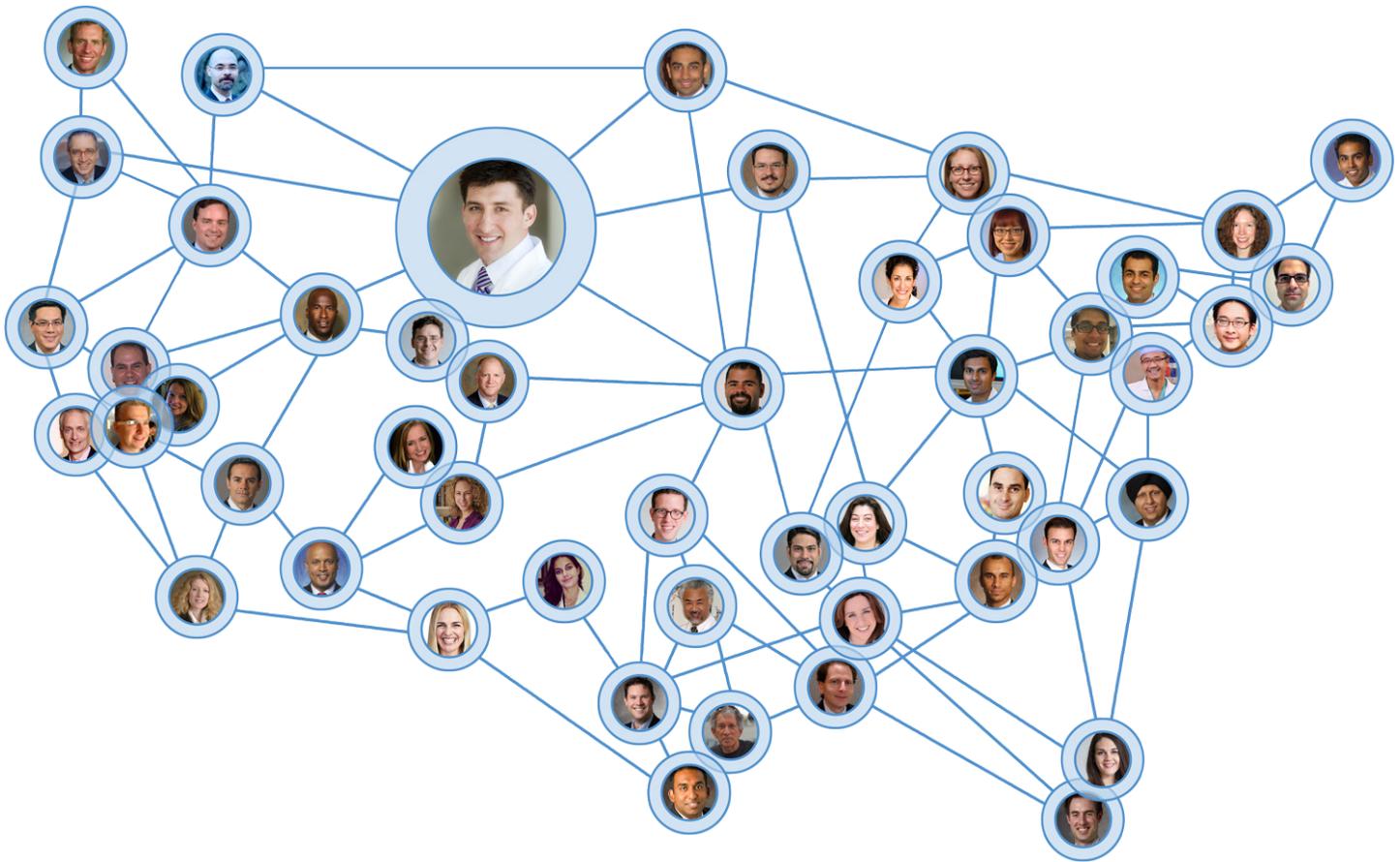
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## Tap Into Your Potential

The best place to start gathering information about potential opportunities is networking with the people you already know. The benefits of networking are long lasting and will pay off when you least expect it. Since the very day you applied to medical school, you have unknowingly been building social capital — your old classmates, peers and professors in medical school,

co-residents and attendings during training, and all your professional contacts in between. Social capital is especially handy while job hunting. In fact, 88% of employers rate employee referrals above all other sources for generating quality new hires. All while evaluating your career options, you can easily tap into your network to help discover opportunities.



### *How can you find all levels of connections?*

Leverage Doximity's physician search feature to locate physicians you may know at hospitals at which you'd like to work. Doximity's network will uncover the 1<sup>st</sup> degree, 2<sup>nd</sup> degree and 3<sup>rd</sup> degree connections, making it easier to send a warm note.

### *How can you network with hospitalists through SHM?*

Leverage the communities in the Society of Hospital Medicine's online communication platform, Hospital Medicine Exchange, local chapter meetings and annual meetings to meet like-minded hospitalists, connect with mentors and truly network both on- and offline.

## Search, Find & Reach Your Network

To get a better idea of career opportunities available for hospitalists with your background, take a look at the alumni from your program with Doximity's Residency Navigator. You're able to leverage program alumni at a

specific hospital or certain geographic locations to help get your foot in the door. Similarly, you can look up your own medical school class on your Doximity profile and see if alumni are at institutions at which you'd like to be.





# The Informational Interview

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## You Found a Colleague You'd Like Some Career Advice From. Now What?

One of the most valuable networking tools is the informational interview.

### *Informational Interview*

It's the term for a conversation you have with someone else to learn about their professional experience, in an effort to explore your own career options. Even if you are searching for a job, an informational interview is meant to be used for gathering information, not a job.

## How to Ask Someone For An Informational Interview

*Dear Dr. Smith,*

*I recently spoke with Dr. Nate Gross, who suggested that I reach out to you. I'm in my final year of internal medicine residency program, and for the past few months have been speaking with a number of hospitalists about their overall experience as seasoned hospitalists at urban hospitals. Dr. Gross mentioned your experience at Columbia, and thought that you could share some valuable insight on the subject.*

*Would it be possible for us to meet for half an hour? I would appreciate hearing about your current position, job search process and any advice you may have for a graduating resident considering a career in hospital medicine.*

*Regards,*

*<Your Name>*

After your interview, be sure to send a thank-you note to your mentor. Write and send a thank-you note within 24 hours, and send a follow-up email a few weeks later to touch base.



# Outreach to Physicians When Looking For A Position

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Josh Allen-Dicker, MD

When considering reaching out to a physician regarding a job opportunity, think about two potential types of contacts: connectors and bosses. Connectors can help put you in touch with someone who can offer you a job, and bosses are those who can actually offer one. Each are equally as important as you build a network and search for a hospital medicine position.

The concept of a connector is quite simple: everyone you meet is a potential connector! Although the world of hospital medicine is experiencing unprecedented rapid growth, and in many ways it remains a close interconnected group. It is often quite easy to find someone who can connect you to a desired contact.

If you're a resident, this means starting with mentors, program directors and letter writers. If you're already a hospitalist, this means that your director, division or department chair, colleagues or mentor. These are the folks who know you the best and may also, as a result of their status, have a broad variety of contacts in hospital medicine. Communicate your interests to these folks, whether they be a particular geographic area, job type or a specific aspect of hospital medicine (e.g., teaching, quality improvement, communication).

There's a good chance that they'll be able to provide a list of potential contacts (connectors or bosses) for you to connect with. Don't shy away from asking if you may mention their name when you reach out to a boss. In some situations, this person may also be willing to introduce you to a boss, via mail or even in-person.

Outside of this core group, focus on building your network. Attend local, regional or national events in hospital medicine and/or general medicine. Don't limit yourself to in-person events: consider joining online communities of your preferred national organization (e.g., Society of Hospital Medicine) and participating

in online events (e.g., Journal of Hospital Medicine's Twitter #JHMChat).

Physicians and administrators with whom you interact through these experiences are all potential connectors — keep track of (and in touch with) them! Keeping in touch with connectors can occur passively, as through “connecting” or “following” them on your preferred method of social media, whether it be on Doximity, LinkedIn, Twitter or other medium. It can also occur actively, through ongoing phone calls, messaging or emailing.

In the context of interacting with your connectors, don't be shy to discuss common interests, long-term career goals or even the details of your job search. If there are particular connectors whose career paths you would like to emulate, consider asking them about setting up an “informational interview.” This differs from a job interview in that it's not about being hired or obtaining a specific job, but more about understanding a particular person's professional trajectories and obtaining their career advice. Depending on your rapport with an individual connector, you even can consider asking about obtaining an introduction to potential bosses, or obtaining their permission to mention them as a mutual connection.

When reaching out to a boss, your approach should be dependent in part on your history with that person. In some cases, you might have already met and/or even developed a relationship with this boss as part of your networking activities described above. In these cases, contacting a boss can be as simple as reminding them of your prior connection (e.g., “As you will remember, I am a third-year internal medicine resident at State University who is interested in quality improvement and hospital medicine”). For those bosses with whom

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you do not have a common connector, prepare a brief introduction and summary about yourself. This should not exceed one paragraph for written contact with a boss, or one minute for in-person contact.

In general, bosses are looking for applicants to be knowledgeable about their group before making initial contact. Help them understand why you are interested in a position with their particular group. Information about a hospital medicine group can be obtained from connectors, but should also be easily accessible via online searches (e.g., Google, Pubmed, review of a hospital's website). As part of this, if you have obtained permission from a connector to mention their name, now would be the time to do so (e.g., "I recently had a chance to speak with Janette Smith from your group – I was very impressed to hear about your group's ongoing work in patient safety").

Next and last, be sure to close with a clear ask. It is important that the boss understands why you are contacting him or her. In most cases, an ask is quite simple (e.g., "I would be interested in learning more about career opportunities with your group"). By following this, be sure to take your cues from the boss. Be respectful of a boss's time constraints – they may immediately wish to tell you more about their group and their needs (either in-person, via phone or email), or they may ask you to set up a time for a more formal discussion. End by thanking them for their time and providing them with your contact information.







# How to Apply for Jobs

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## How to Apply for Jobs

### Cast A Wide Net

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There are many places to look for job opportunities, so consider casting a wide net to find as many positions as possible that meet your criteria.

#### ✔ *Leverage personal connections*

Tapping into your network can be one of your most powerful resources as you hunt for jobs. Let mentors, colleagues and other connections know what you are looking for, and ask if they know of open positions.

#### ✔ *Recruiters*

There are two kinds of recruiters: search firm recruiters, and in-house (or staff) recruiters. Their job is to connect physicians with open positions, so leverage their expertise.

#### ✔ *Journals, Society of Hospital Medicine*

You can often find open positions listed on the job boards of various organizations and publications that align with your specialty.

#### ✔ *Medical conferences*

Regional and national SHM conferences are a good place to network and participate in on-site recruiting.

#### ✔ *Online job postings*

There are a variety of websites that focus on posting job opportunities for physicians, and many make it very easy to gather information about positions and apply online. Remember to check out [www.shmcareercenter.com](http://www.shmcareercenter.com).

#### ✔ *Doximity Career Navigator*

Through networks like Doximity, you can browse jobs, average salary, and see who else you may know at places at which you want to work.

Visit: [www.doximity.com/careers](http://www.doximity.com/careers)

#### ✔ *Doximity Career Match*

Describe your ideal job and get matched with multiple opportunities in the location of your choice. Once you place through Doximity, you'll get a \$3000 bonus to help you get settled post-training.

Visit: [www.doximity.com/career\\_match](http://www.doximity.com/career_match)

Understanding the overall market can provide the necessary context to analyze various job opportunities while you go through this process. For example, it is helpful to research potential locations and practice settings, as well as current compensation trends for your specialty.

As you discover potential openings and evaluate where to apply, ask yourself whether each job is a place where you could see yourself working and living for at least a few years if not long term. If a position meets your criteria, then don't wait to submit your CV! It's a best practice to include a personalized cover letter with your CV, to explain why that position is a good fit in terms of work and location.

## 4 Things I Wish I Knew Before Applying For A Job

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Daniel Ricotta, MD

Applying for your first position as an attending is an exciting time. The prospect of more reasonable hours, better pay and independent practice is attractive to the young doctor in training, counting down the days until residency graduation. In the flurry of excitement it can be easy to make mistakes in accepting a position.

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### *Be patient*

Don't rush to accept the first offer you are given. Investigate other programs and obtain as much information as you can by talking to other hospitalists practicing in the region.

3

### *Hours and responsibilities*

Ask how much time will be spent working at each site and ask to increase your clinical time at a community site or academic center depending on your interest. On the other hand, what are your responsibilities during non-clinical time? Are you expected to be at the hospital during your non-clinical weeks, engaging in hospital committees, etc.?

2

### *Diverse options*

Look at practices with different characteristics, academics, community and community based-university affiliations. If you receive a job offer, it's because the hospital medicine group wants you. Don't be shy negotiating and when negotiating, think outside the box. Salaries might be inflexible at a few different institutions but you may still be able to negotiate for time, reducing clinical workload for non-clinical time, or leadership positions in quality improvement, education or practice management. In the process, ask about the clinical duties and responsibilities. Many academic centers are consolidating hospital medicine groups at community affiliates with the academic practice.

4

### *Career growth potential*

It's important to understand the potential for career growth. Are there mentors who can help advance your career? Who will push you to develop your clinical skill? Lastly, what opportunities are there to be a leader at your institution?





# Interview Prep

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# The Most Common Interview Questions & Pearls To Ace It

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Kimberly Eisenstock, MD

*As a physician employer, what are the most important qualities you look for in a candidate (ranging from clinical skills to personal skills)?*

I look for someone with enthusiasm for hospital medicine and teaching along with an excellent set of interpersonal skills. I try to determine their long-term career trajectory based on what they have chosen to expose themselves to during training. Candidates with committee work that represents quality initiatives, education or even administrative duties consistent with hospital medicine rise to the top as hospital medicine focused candidates. When they discuss their committee work, the level of detail they provide and the way in which they discuss the importance of their work helps me to determine their level of commitment, passion, team-player abilities, etc.

*Provide an example of a time an interviewee made a positive impression.*

My recent most impressive candidate had a solid knowledge about general issues facing hospital medicine today and asked questions that attempted to sort out how our particular program was tackling these issues. Her command of knowledge around these issues for someone who is still in training was very impressive.

*What questions should the candidate ask during the interview?*

Of course at some point the candidate needs to know the nuts and bolts about salary and schedules, but more importantly they should try to ask questions that help them to understand if the work culture of a particular group fits in with their professional needs.

*Give an example of the most common mistake candidates make during an interview.*

Candidates who start the interview with a long checklist of the structural aspects of the program — e.g., hours, the number of shifts, weekends, call, etc. — turn me off. I'm not so old-school that I have to have the first opportunity to ask questions but if you are going to ask questions first, make sure they are about the big picture such as what types of opportunities for professional growth exist within your division/organization.

*Following an interview, what best practice do you recommend to the candidate?*

If you are interested, follow up with a thank-you email as quickly as possible expressing your interest.

*If you would like to provide any other tips, please use the space below to do so:*

Never begin an interview asking about schedules and salary. While these are important aspects of your professional life, they do not make up the sum total of whether or not you will be satisfied long term. They are a real turnoff to the interviewer and make you appear shallow with regards to your career planning. Instead, ask questions that are broad to get your interviewer talking but give you insight into the program such as, "What types of committee work do your hospitalists get involved in?" or "What professional development supports and programs are available to hospitalists in your program?"

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## Eileen Barrett, MD, MPH

*As a physician employer, what are the most important qualities you look for in a candidate (ranging from clinical skills to personal skills)?*

Clinical skills, compassion, communication skills, systems-based thinking, ability to work in a team.

*Provide an example of a time an interviewee made a positive impression.*

Arriving on time, professionally dressed, asking questions that reflect they would have already done research about the position, good interpersonal skills.

*What questions should the candidate ask during the interview?*

Work culture; degree of support from senior leaders in the organization; how long most hospitalists stay and why they leave; gender balance in the group; call schedule; support for protected time to work on QI, safety, patient satisfaction and hospital committees; existing involvement of hospitalists on QI, safety, patient satisfaction as well as hospital committees; support for provider wellness/sustainability initiatives; most common diagnoses treated; if there is an open ICU and if there is intensivist and palliative care support; expectations for night call.

*Give an example of the most common mistake candidates make during an interview.*

Appearing disinterested, asking about salary and benefits up front (before asking for details about the position).

*Following an interview, what best practice do you recommend to the candidate?*

Follow-up email to thank their contacts and restate their interest, and also a handwritten note if they felt like they made a connection with an interviewer.

*If you would like to provide any other tips, please use the space below to do so:*

A good marker for how happy a group is can be how long their providers stay, and if they go why they leave. I'd recommend always asking about this.



# The Most Common Interview Questions & Pearls To Ace It

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George Hoke

*As a physician employer, what are the most important qualities you look for in a candidate (ranging from clinical skills to personal skills)?*

1) high-quality training/clinical skills; 2) empathy and excellent communication skills that lead me to believe they can quickly establish rapport with patients they are just meeting; 3) the ability to work in teams and lead them; 4) something special that enhances my group, could be anything like fluency in Spanish, MBA training, procedural skills, IT training; 5) genuine passion for hospital medicine.

*Provide an example of a time an interviewee made a positive impression.*

An applicant with nine years of experience in a community setting interviewed at my academic institution and was crystal clear about what she wanted out of a new position. She expressed a deep love for caring for patients at crucial moments in their life. She wanted time to practice high-quality, efficient care and share her approach with medical students. She had the clearest vision of what she desired of anyone I have ever interviewed. I have largely been able to provide that environment for her and she has excelled.

*What questions should the candidate ask during the interview?*

Why are you interested in hospital medicine? Describe your ideal position to me. Where do you see yourself in five years? What special talents/experience do you have? Why should I hire you?

*Give an example of the most common mistake candidates make during an interview.*

Inadequate preparation for the above questions. Bringing up compensation too early. Not researching my program or institution in advance. Treating administrative staff with inadequate respect during the recruiting process (that is a deal killer).

*Following an interview, what best practice do you recommend to the candidate?*

Before you leave, ask what the next steps in the recruiting process might be. Wait a few days and then reach out to declare your interest with comments on why you would be a good fit. Reply to all requests for information, repeat interviews, etc. promptly.

*If you would like to provide any other tips, please use the space below to do so:*

Demonstrate energy and enthusiasm. Always ask questions when given the opportunity to do so (it's a good idea to have some stock ones ready).

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## Brian Markoff, MD, FACP, SFHM

*As a physician employer, what are the most important qualities you look for in a candidate (ranging from clinical skills to personal skills)?*

I want a person who communicates well. I think the personal skills are as or more important than the clinical skills as long as the person is a competent physician. The candidate must be a team player and be a good fit with the rest of the group. An outstanding clinician who won't work well with our group is not as interesting to me as a slightly less accomplished clinician with excellent interpersonal skills.

*Provide an example of a time an interviewee made a positive impression.*

A candidate was interviewing with me and we had a great conversation about quality and safety and how it really intertwined with reimbursement and was so important to hospitals and hospitalist groups.

*What questions should the candidate ask during the interview?*

Anything that shows they have an interest in your particular group. Also it shows that they did some homework before the interview.

*Give an example of the most common mistake candidates make during an interview.*

Asking too many day-to-day detail-type questions about the group. Schedules, etc. Too much of those questions is off-putting when talking to the head of the group. Save that for other folks they meet or a later conversation.

*If you would like to provide any other tips, please use the space below to do so:*

I think a simple thank-you email is a best practice.



# The Most Common Interview Questions & Pearls To Ace It

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Andrew Dunn, MD, MPH, FACP, SFHM

*As a physician employer, what are the most important qualities you look for in a candidate (ranging from clinical skills to personal skills)?*

Passion. I look for enthusiasm both for direct patient care and for related activities, such as improving the hospital systems, QI and/or education. The most important characteristic for me is to have the sense that this is someone you and your team will want to work with and will fit in well with the other members. This usually comes from the candidate having an enthusiastic, positive and an overall confident demeanor. Clinical confidence is important. Prior participation or leadership in projects is important when QI activities will be a part of the role. If the candidate did not get the opportunity to participate they should be able to describe the reason (no time or opportunity at their prior position), and be able to state an area or idea they would have liked to pursue had they had that opportunity.

*Provide an example of a time an interviewee made a positive impression.*

A candidate had the opportunity in their training program to take a leadership role in QI activities across the program and described with great enthusiasm his involvement in multiple projects. He could describe these in detail. The genuine passion for the projects and improving hospital operations and patient safety was impressive.

*What questions should the candidate ask during the interview?*

Fine to ask about the basics, such as schedules, census, EMR, interaction with house-staff and NP/PAs. Not asking about these implies either an apathy or lack of focus. Should ask about opportunities to have their ideas heard and participate in or lead projects. Should ask about the structure and resources for development, such as mentorship and CME. Can ask about the career development and advancement record for other faculty members, and about retention. Can ask about departmental and institutional support for the program and reliance on the hospitalist group. Support can be general stature and also resources (like funding, administrative, clerical). Can ask about the possible future direction or anticipated changes for the group. Can ask about whether any challenges are foreseen for the group. Can ask what will define “success” for this role.

*Give an example of the most common mistake candidates make during an interview.*

Asking about compensation at the initial interview. Focusing excessively on negative aspects of their prior training institution or position. Showing enthusiasm for all activities except for caring for patients. Candidates should be sure to reflect that patient care is the foundation and the other activities enhance their position.

*If you would like to provide any other tips, please use the space below to do so:*

A follow-up email expressing continued interest and, when it’s relevant, inquiring about follow-up steps (such as references), is appreciated.







# Insider Tips from Program Directors

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# How To Stand Out

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Darlene Tad-Y, MD

The time has finally come for you to begin the next phase of your career: getting your first job after training! This is truly an exciting time for you as you now have the opportunity to really consider a variety of factors and circumstances that you would like to incorporate into your day-to-day work. You will have choices and options for how you'll structure your job. Your task now is to figure out exactly what is the best job for you and then to be hired for that job. As an applicant, you'll be potentially competing with many other qualified candidates for any one position. As human beings, we naturally connect with a really good story, and can remember details of well-told fables. Success as a candidate will rely on your ability to share Your Story. You can think about Your Story in three parts: who you are, what you want to do and why, and why you're the right person for the job. Exploring each of these will provide insight on how to be a memorable physician candidate.

Your Story begins with describing who you are to your potential employers, which starts well before an interview. Employers want to know about your training and educational history, your past record of accomplishments and special interests. Your CV and cover letter, or an application, serve to introduce you, and can also provide a tremendous amount of insight into the kind of person that you are. For example, attention to detail, or lack thereof, can be apparent if there are grammatical errors or typos in your correspondences. Right from the start, you want to communicate that you're a professional and attentive candidate. Ensure that your communications with any potential employer are well crafted and error-free. Additionally, spend the time to prepare well for your interview and understand what any employer is looking for in their candidates.

The second part of Your Story is explaining what you want to do and why you want to do it. Importantly, this

begins with you understanding with great depth what your interests may be, and how those interests can be fueled by your future job. Spend some time thinking about what you want to be doing in your day-to-day role. Are you enthusiastic about teaching or doing research? Do you find that communication with your patients on a daily basis is the best part of your job? Knowing the answers to these questions for yourself will make it much easier to explain what you're looking for to someone else. You should be able to hone this message to a very succinct statement similar to a TV commercial.

Finally, the last part of Your Story lets a potential employer know why you are the right person for the job. Take the time to understand exactly what the employer is looking for in a candidate for the job and consider if you have the qualifications and interest for that role. Directing your energy toward establishing that you are the best fit for the job will go a long way to making you a memorable applicant.

In the remainder of the Career Guide, we share additional strategies to help you stand out and make Your Story memorable. Congratulations on reaching this next great step in your career, and happy job hunting!

# Non-Traditional Pathway to Hospital Medicine

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Patricia Seymour, MD, FHM & Diana Stewart, MD, FAAP

Early on, hospital medicine was a career path for physicians trained in traditional internal medicine, but increasingly, physicians trained in other disciplines comprise a substantial proportion of hospitalists. However, there are special considerations when planning a hospital medicine career for those trained in other disciplines. All elements of this Career Guide are still applicable and should be reviewed. Additionally, we recommend connecting with a hospitalist mentor who has a training background similar to your own for guidance during the job search process. When you have identified institutions for potential employment, research their experience and protocols for hospitalists trained in your discipline.

There are some specialty-specific considerations:

- ***Family Medicine***

Most hospital medicine programs will now consider family medicine trained candidates even if that is not expressly advertised. As a new graduate, be sure you can demonstrate sufficient inpatient exposures and procedures obtained through training logs or similar means. Be aware that there is geographic variation in family medicine trained hospitalist employment. The SHM's Hospitalists Trained in Family Medicine (HTFM) subgroup may be useful as you negotiate the job search.

- ***Medicine/Pediatrics***

Finding a hospitalist role for a med-peds physician will depend on the institution and geographic region. An institution might combine its adult and pediatric inpatients within one institution, and others may house these services in separate hospitals. The latter may require appointments in both of the departments if in an academic setting or dividing your time between practice locations. Again, mentorship may be useful here.

- ***Pediatrics***

Some examples of ped hospital medicine practice settings include the pediatric ward, newborn nursery, neonatal intensive care unit and pediatric intensive care unit. Currently, this specialty is seeking approval for sub-specialty certification.

- ***Sub-specialty Practice***

Numerous sub-specialty services now utilize physicians whose practice is confined to the inpatient setting. Many positions require sub-specialty training, and others are staffed by physicians with an interest in certain sub-specialty areas. The opportunities will usually vary by the needs of the institution. It's really important to ask about these unique options when searching for a job as they may not be openly advertised.



# What Advice I'd Give to a Family Member Applying

Patrick Rendon, MD

Start thinking about jobs early. As it turns out, hospitalists are sought-after individuals, but it's not all rainbows and butterflies. It is a competitive market out there, especially for the top positions in the country. Even if you are thinking about becoming a hospitalist, it is important to start as early as possible – start seeking jobs in your second year. This'll allow you to capitalize on open positions before the hiring season commences. Not to mention that employers pay particular attention to residents who are more proactive and apply early.

Thinking early allows you to prepare needed items for your application as well. Preparing that CV in May of your second year of residency will leave you the time you need to refine it, show it to a mentor and get feedback in time to make edits. Also be prepared to meet requirements of the position including writing a statement of interest or cover letter. Writing a thoughtful letter and creating an organized CV take time, and starting early will benefit you in the long run.

Do a check on your values, preferences and interests. There are many hospitalist jobs out there. So how do you decide which one is right for you? Sit down and write out what you're interested in and what you value. Many prospective applicants are looking to make a career in quality improvement, for example. Knowing this will allow you to focus in on those positions that train hospitalists to conduct quality projects or learn QI principles. Perhaps you have concerns about loan repayment. You may have more than \$200,000 in loans and value an early payment plan (e.g., 10 years). This will change your perspective and the jobs that you look for. Based on your value system it could be that it's more important to have a robust salary to help you pay off your loans sooner than later. What about a position related to education or academics? In this scenario it would be important to consider applying to academic institutions (such as where you completed

residency or medical school) where you can teach or participate in educational endeavors.

Other values should also play a role in seeking a new position. Do you have a spouse or children who need to be included in the decision-making? Have you been away from family for some time and now you've been thinking of moving back closer to home? It is quite possible that you have less concerns about paying off your loans in the near future, but more important that you spend time not working given that you've young children or other responsibilities at home (e.g., family members who need care). Considering values when getting ready to apply for hospitalist positions will allow you to narrow the options and decide where you want to apply.

Determine the general location for your future practice. Ask yourself, "are there certain parts of the country where you feel that it is important to practice?" You have to think to yourself whether you want to live in the mountainous regions of New Mexico or live the big city life of New York. Perhaps there is a part of the country where you want to live, or alternatively don't want to live. Once you have decided on the general location, determine the number of hospitals in the area. If you are looking for a more rural location and there is only one hospital, then your job is done. If you are looking to live the big city life, for example, there may be 10 hospitals to choose from. Depending on your value system, this could make your decision easier or harder. Given consideration of your value system, it could very well be that you want to move closer to an area that offers the type of life you want to live (e.g., boating in the plentiful lakes of Montana). The bottom line is that location matters. After all, you'll likely be living in the city where you work for at least one year.

Do your research. Now that you've decided what you

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value, have found the location of your dreams and have at least two or more options from which to choose, you need to do your research. Are general salaries given on a website or perhaps some details on what the job has to offer you? Is the ratio 25 patients to one hospitalist or 10 patients to one hospitalist? What about nights? Are you a night owl looking to work 10 night shifts per month or are you wanting to focus on a day job? With the latter, it will be important to determine how many night shifts a particular hospitalist group has to cover and how often. It could very well be that three night shifts per month is a “deal breaker.” In that case you don’t want to apply to hospitals with such schedules. Alternatively, it could be that the night shifts are just what you’re looking for as they typically pay more and the extra income can be used toward those student loans. Also consider what the potential packages offer. Although you are just beginning your career and are

likely in good health, thinking about retirement, health insurance and life insurance is an incredibly important consideration.

Apply sooner than later. Once you become interested in a hospitalist position it’s important to make contact with the hiring committee chair, chief or lead hospitalist sooner rather than later. Positions can fill up quickly, and you want to ensure that you are “in the running” for your hospitalist dream job. Don’t let that ideal job slip away because you thought that applying October 1st was safe. Many hospital medicine programs begin their hiring processes at the beginning of the fiscal year, which typically occurs in the summer (e.g., July). Applying early on also demonstrates a proactive and organized nature, a characteristic that’s very appealing to hospitalist hiring committees.







# Pros & Cons Working with a Recruiter

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# To Work or Not To Work With a Recruiter: Employer Perspective

John V. Jurica, MD, MPH, CPE

You're nearing the end of your fellowship or residency. You've narrowed your choice of practice to pursue: academic, governmental or private; small, medium or large group; and physician-owned or hospital-based.

And you've settled on a particular part of the country.

One of the questions you may be considering is whether or not to work with a recruiter.

As a chief medical officer of a hospital, my duties included recruiting and negotiating employment agreements with physicians. At our organization, we generally used our own recruiting professionals. But it was not always so.

Prior to developing our own recruiting department, we used other methods to find potential candidates:

- ✔ When our recruiting efforts were limited, the medical staff office or the human resources department would post openings on job boards and coordinate interviews.
- ✔ We occasionally engaged an independent recruiting firm when we were having trouble filling difficult-to-recruit specialties such as urology.

## Benefits of Using a Recruiter

For employers like us, there were benefits to working with a recruiter:

- ✔ They could sometimes find candidates who we were unable to find, by advertising and cold calling lists of candidates.
- ✔ Confidentiality could be maintained, which was sometimes important.
- ✔ Candidates seemed to have a better understanding of the process, and more pertinent questions during interviews.
- ✔ Candidates came with necessary documents, such as transcripts, diplomas, licenses and references.

Candidates could potentially benefit from working with a recruiter for several reasons:

- ✔ They were given advice about benefits, tail coverage, restrictive covenants and other contractual issues to think about.
- ✔ Recruiters could provide data from salary surveys to help clients evaluate offers.
- ✔ Recruiters might know of employment opportunities not found elsewhere.

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## Limitations of Using a Recruiter

Much of the limitations that come from working with a recruiter stem from the costs involved. On a contingency basis, the cost will typically be 20% to 30% of the first year's salary. This could run from \$30,000 to \$80,000.

Employers are often not interested in candidates sourced by a recruiter because they believe they can recruit their own physicians without incurring those costs.

Since employers need to follow a budget, paying for recruitment means there's less for sign-on bonuses, loan repayment or starting salaries. That can make the employer's ability to compete for candidates more difficult.

Because of the cost, recruiters are more likely to be working with large multi-specialty groups, hospitals or health systems. Small physician-owned groups cannot afford the fees. If you are seeking a small group opportunity, the recruiters are not going to be very helpful.

Other concerns about working with a recruiter from the candidate's standpoint might include:

- How much time will you need to interview and check references on a recruiting firm before agreeing to work with it?
- Is the recruiter steering you preferentially to an offer based on his or her fees?
- Find offers for which the recruiter is not being paid?

## The Bottom Line

Most recruiters are professionals who can offer education and assistance to physicians that are seeking a new position. They may be able to offer opportunities candidates cannot find.

However, much of the information they provide can be garnered through your own research or from your attorney. And there are certainly jobs that the recruiter will not present to you. Given the fact that there are many more jobs than candidates available, most physicians should have no trouble finding a good offer.

The best approach may be to consider using one recruiter after some vetting, while also aggressively job hunting on your own. That way, you will optimize your chances of finding that ideal position. Just don't be lured into signing an exclusive contract, or paying for the assistance personally.



### Pros & Cons of Recruiters: Resident Perspective

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Bo Liu, MD

I want to preface this article by saying I am a resident physician still in training. I have not personally worked with physician recruiters. What I did do is talk to many newly minted attending physicians to get their experiences on the topic, some of whom went through recruiters, others found their jobs by negotiating with employers directly. On the next page is my summary analysis of their perspectives.

I hope this gives you some basic considerations when deciding whether to use a physician recruiter.

Best of luck in your job search!



**Pro #1:**  
***Recruiters Save You Time***

Think of physician recruiters like real estate buyer's agents — you acquire their expertise so you do not have to go through the nitty-gritty of analyzing each and every individual house listing by yourself. You give them a list of criteria; price, location, number of floors, bedrooms/bathrooms, etc, and you count on them to find one or more candidates. Similarly, you can expect recruiters to do the same for your job search and present you with several “good fits,” hopefully one of which will be your dream job.

**Pro #2:**  
***Recruiters May Help You Find “Secret” Jobs***

You may or may not know this — but many jobs aren't listed on publically available career sites. Of course, it's difficult to know how many such jobs exist given the fact that they are unlisted, but I've heard Radiology attendings mention numbers as high as 50%. Experienced recruiters may have built social networks over their careers to reach those “secret” jobs, essentially giving you more doors to knock on. Keep in mind that while they may find jobs that are otherwise unknown to you, and recruiters can not create jobs — that rests with the employer alone.

**Pro #3:**  
***Recruiters Can Assess Whether You're a Good Fit***

For many large healthcare systems that employ internal recruiting and physician development teams, the recruiter's and your incentives are aligned. Their goal is to find physicians who can help the system thrive, because when the system succeeds, they do too. Therefore, internal recruiters will often have a better understanding of the company work culture and therefore can help assess whether or not you would be a good fit. That's not to say external recruiting firms are automatically bad, but they would obviously be at a disadvantage when it comes to understanding the inner workings of a potential employer.

**Con #1:**  
***Recruiters Cost You Money***

Just like buyer's agents, recruiters cost you money. While they may tell you — correctly — that there is no direct cost to you, there are indirect costs to using a physician recruiter. Employers pay a recruiting fee when they acquire your talents through a recruiter. While many large health systems have some internal recruiters at a built-in fixed cost, others contract recruiters as a third party, paying a commission every time a talent signs the contract. So if you forgo a recruiter and negotiate directly with an employer, you may get a better contract. I say “may” because there isn't a guarantee that an employer will pass on the recruiting fee savings to you, they can choose to hang onto that savings for themselves.

**Con #2:**  
***Recruiters are Salespeople***

Physician recruiters may go by a lot of different names — career advisors, counselors, job market experts — but their fundamental role is that of a salesperson. Their sales product is two-fold: they are trying to sell an open job position to you as well as you to a potential employer. That is not necessarily a bad thing — many career paths are dependent and thrive on sales and marketing. As you are aware from the recent Wells Fargo controversy — sometimes the incentives of the salesperson may not align with yours. Again, not all Wells Fargo employees were “bad apples”, but you shouldn't mistake a friendly recruiter for a personal friend.

**Con #3:**  
***It's Difficult to Pinpoint the “Bad Apples”***

Unlike pet food, there's no readily available Amazon reviews for recruiters. You also won't find any Consumer Reports reviews and ratings on the physician recruiting firms. This means that it remains really difficult for a candidate to know whether he/she is working with a “good” recruiter whose goal is to find you your dream job or a “bad” recruiter who is ready to push you toward the first job offer that will come across his/her desk.





# Accepting an Offer

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# Important Considerations for Your First Contract

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Bo Liu, MD

I want to preface this article by saying I am a resident physician still in training. I've not personally gone through the grueling process of contacting employers or recruiters, getting job offers and sitting down to review each contract in detail. What I did do is talk to many newly minted attending physicians to get their experience on the topic.

Consider the next page a case series.



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### *Show me the money!*

Let's face it. While none of us went into medicine just for the money, money is a major consideration in everyday life. After more than a decade of higher education, you're ready to live the good life. You can finally see the light at the end of the tunnel. But how do you know whether the salary you are offered is "fair"? Here are a few tips:

1. [Doximity Salary Map](#) - amazingly useful tool. You must look at this before you review a contract.
2. Salary Surveys - from the usual suspects like [MGMA](#) and [AMGA](#). Keep in mind these are surveys.
3. Talk to as many new attendings as you can, literally anyone you can find who's willing to give you a piece of his or her mind—soak it all up like a sponge.

### *What are the benefits?*

Make sure you understand the benefits being offered. The details may vary drastically from practice to practice and are well beyond what can be discussed in this article. The basic considerations would include: bonus structure, paid vacation time, paid CME allowance, retirement plans, child care assistance, student loans assistance, malpractice insurance and disability insurance, just to name a few. Some practices even offer fringe benefits such as a car or housing allowance. If there is something you don't understand, consult Dr. Google. Other great resources include the [White Coat Investor](#), [Physician on Fire](#) and, of course, a little website called [Future Proof, MD](#).

### *What's the call/backup system?*

Unless you're going into a specialty like emergency medicine, chances are good you will have some level of call responsibility. Make sure you understand the call requirements – every week, two weeks or three weeks? Also, what is the backup system like? What happens if you are overwhelmed while on call? What happens when a colleague gets sick or passes away? Setting expectations early will help you avoid unwelcome surprises later.

### *What happens when you don't live "happily ever after"?*

As much as we would all love for our first job to be our last, that's not always the case (same goes for marriages). According to [AMGA](#), nearly one-third of all new physicians will switch employers within their first three years of practice. So make sure you understand the termination clause of your contract. It is an incredibly uncomfortable subject to talk about when you're looking for your first job. But just like a pre-nup, it can save you later. As a primer, check out this post: [How Termination Agreements Get Expensive](#).

### *Consider using a professional contract review firm.*

Ok, we're all type A people; otherwise we wouldn't be in medicine. But sometimes it's ok to relinquish control of certain things. And for me, reading legalese is another one of those things. There are plenty of contract review firms out there that will gladly take your money and, just like physician contracts, they're not all created equal. The one tip I have would be to seek out the firms that specialize in physician contracts, like Contract Diagnostics. Sure you will end up paying at least a few hundred dollars for it, but trust me this is not something you want to skimp on.



[www.hospitalmedicine.org](http://www.hospitalmedicine.org) | [www.doximity.com](http://www.doximity.com)

