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Passion in the gut – Will your General Surgery search meet the cut?

By Cliff Zeller, MD - Vice President, Rocky Mountain Medical Search

Of the upcoming shortage of physicians predicted for the next 20 years, perhaps most critical of all will be the shortage of General Surgeons. General Surgery will be one of the most difficult recruits to fill as fewer graduating medical students are choosing this specialty.

In 1981, 12 percent of graduating US medical students chose General Surgery, while in 2002, only 5 percent chose General Surgery as their career.

Why are students not choosing General Surgery? And what does that mean if you are recruiting General Surgeons?

According to the American Medical Association's 2007 Medical Student Graduation Questionnaire, students viewed onerous work hours with perceived lack of controllable lifestyle, inadequate compensation for time spent in training, and the stress of dealing with life-threatening illness as important barriers for specializing in General Surgery.

AMA data also shows there are approximately 32,600 General Surgeons with nearly 1,000 retiring or dying each year. In addition, about 7,000 of the total are over age 60. An approximate 50 percent increase in surgical workload needs is being forecasted over the next 30 years due to aging of the population. There are about 1,100 new board eligible General Surgeons graduated per year with about 600 choosing to stay with General Surgery and enter the workforce.

These numbers indicate a significant shortage looming.

Ladies first

There is evidence that some residency slots are being filled by international medical graduates but a more important trend is the increased percentage of women going into General Surgery. Currently, approximately 24 percent of newly certified General Surgeons are women, with almost a third of PG1 surgical residency slots being filled by women.

According to Dr. Bruce Stabile in an article published in the Archives of General Surgery 2008, there are several critical factors important to attracting new surgeons. In the past, women tended to perceive surgery as a macho specialty with an "old boys club" attitude. Therefore, a sense of connectedness to other surgeons, especially among female surgeons to other female surgeons, has ranked particularly important to those choosing a surgical career.

A 2002 article in the American Journal of Surgery indicated that extroversion and conscientiousness were two important traits found in young surgical candidates. However, according to Dr. Stabile, the most critical personality trait in the attraction of young surgeons to their specialty is passion – the special willingness to invade the human body in order to heal it.

Geoff Lawton, Vice President of Business Development for Littleton Adventist Hospital in Denver, believes that General Surgery is an important component within a hospital's infrastructure, especially in conjunction with trauma and oncology teams.

"General Surgery just touches so many service lines," Lawton said. "General Surgeons are extraordinarily valuable to the whole hospital."

Looking ahead

What does this mean in the recruitment of General Surgeons? During the recruitment process, the team should demonstrate an understanding of the character traits of conscientiousness and extroversion by showing the candidate that they would be quickly integrated into the social stream of the hospital and the mainstream of hospital politics.

Describing the opportunities to join volunteer clinical faculty with recognition and promotion of honors, as well as monetary stipends to support attendance at scientific meetings (the opportunity to connect with other surgical colleagues), would be important in the recruiting process. Administration should demonstrate an acceptance and empathy for the strong passion of these physicians for their career choice.

About one third of new recruits will be female, so it is particularly important to introduce the candidate to other female surgical colleagues on staff during the recruitment process. It would be important to demonstrate a sense of welcoming collegiality, particularly from the male surgeons – "no old boys clubs here" should be the recruitment mantra.

The surgeon's need for connectedness and extroversion may indicate that the final year of residency is too far along to begin the recruitment process. This would necessitate projecting physician staff surgical needs several years earlier than usual.

The use of recruiters (in-house and external) to identify target residents in specifically desired residency programs will be critical to get a jump on the competition. Recruiters may begin working with appropriate candidates several years before the completion of their full training program. Initial recruitment contact could take place earlier in the candidate's training at seminars and medical conferences. The recruiter needs to facilitate personal contact between key hospital physicians and identify early candidates. The implementation of a mentoring relationship would help as well.

In summary, quality-of-life issues, a sense of connectedness to other medical staff, fostering a sense of control over the workload, and the recognition of the unique special surgical passion, will all be critical factors in the competition to attract General Surgeons in the upcoming decades.

Top 10 Tips for Evaluating Candidate CVs & Resumés

By Julie Sherriff – President, Sherriff & Associates

When advertising for an open medical provider position, you may receive many CVs or resumés. How do you choose the most favorable candidates? Here are 10 tips to help you evaluate candidates on paper:

1. Is the CV/resumé professional, with clearly defined sections, correct spelling and word usage? If not, this may be a sign of disorganization, lack of attention to detail or poor communication skills.
2. Does the candidate provide clear contact information including mailing address, cell and home phone numbers, and a personal e-mail address? It is crucial this information is available so you can communicate with the candidate.
3. Carefully review the education, training, and experience to determine if the candidate meets the requirements of the job description. Set aside those that do not meet the criteria.
4. Create a checklist of additional core competencies and attributes you are seeking. Check all CVs/resumés against this list and set aside those that do not meet the criteria.
5. Does the candidate have ties to your area? This may be a candidate you want to pursue first. But don't exclude others who are interested in the opportunity for different reasons. Speak with each candidate who interests you and find out why they're seeking a change.
6. Closely examine the beginning and ending dates of all education, training, and experience to uncover any gaps in work history or evidence of short tenure in multiple positions. If you find gaps and are still interested in the candidate, ask for an explanation.

7. Check the public domain to learn more about the candidate. Search the web using Google or Yahoo. You can also search these networking sites: Facebook, LinkedIn, YouTube, MySpace or Twitter. But, be cautious – if you find the candidate's name, do a little more research to make sure it is the same person.
8. Review the CV/resumé for evidence of achievement in their specific field including awards, research grants, publications, and other accomplishments.
9. Assess the candidate's state licenses for current status. If in question, contact the state licensing board directly. To verify license information, visit <http://www.docboard.org/docfinder.html>.
10. Consider the candidate's volunteer work and personal interests to help determine how well he/she will fit into your practice environment and community.

In next month's edition of *Focus: Physician Recruitment*, look for the Top 10 Tips for Conducting Candidate Telephone Interviews.

Surgicalists: An excellent way to improve the recruitment and retention of General Surgeons

By Regina Levison - President, Levison Search Associates

Surgicalist is a relatively new specialty – it is a General Surgeon who works onsite at a hospital and handles primarily emergency cases. While most Surgicalists are hired to work directly for hospitals, others are hired by large single-specialty and multispecialty groups to handle call cases. For medical groups using Surgicalists, this allows their other Surgeons to focus on elective and scheduled cases.

Like Hospitalists, the Surgicalists must earn the respect of their colleagues in the community. There is often a concern by local General Surgeons that the Surgicalists will take part of a shrinking pie. However, some recent studies have shown that the overall number of cases actually increases for local Surgeons.

How do Surgicalists impact your recruitment and retention of General Surgeons? First and foremost, a better quality of life for your existing and newly recruited Surgeons. You will have a competitive advantage by providing your General Surgeons a more predictable schedule. While this specialty was created in response to high turnover and fewer Surgeons willing to take call, it also has a positive impact for hospitals being asked to pay for call coverage.

If you would like to learn more about the benefits of utilizing Surgicalists, please contact Sherriff & Associates at 800-533-0525 or bsherriff@sherriff.com.

Locum Tenens Corner: General Surgery

By Joan Pearson – President, Catalina Medical Recruiters

With the continuing physician shortage, locum tenens may be a solution for hospitals and medical groups who are struggling to meet their patients' needs. Statistics show a shortage of approximately 1,300 General Surgeons in the United States within the next two years; therefore staffing agencies are anticipating a huge increase in the need for locum tenens General Surgeons.

Fortunately, locum tenens is appealing to many Surgeons. A temporary Surgeon can work short or long-term assignments and focus strictly on scheduled procedures and operations and not worry about the administrative tasks of private practice. The locum tenens firm arranges for the malpractice insurance, reimbursement to the physician, roundtrip travel and lodging. The facility is charged a daily rate and retains all fees generated by the surgeon while all administrative details are taken care of by the staffing agency.

Locum Tenens is growing in popularity with physicians and mid-levels in all specialties. In the past, locum tenens physicians were older physicians looking to cut back on their workload. But this is not the case today – many mid-career physicians are accepting locum tenens assignments. Also, young physicians just out of training and building their practice are providing locum tenens coverage to augment their

income. Locum tenens coverage has become popular among the 7,000+ female Surgeons too. They enjoy it because it allows them to work part-time, freeing up more time to spend with their families.

Locum tenens physicians realize they have flexibility in their work schedule and have a quality of life they never experienced in private practice. They are eager to put their time and energy into strictly patient care.

If your facility has a need for additional staffing, you may want to consider locum tenens coverage.

If you would like more information, please contact us.

Compensation Corner: Family Medicine

By regions, the median compensations are:

East:	\$280,000
Midwest:	\$361,000
South:	\$305,000
West:	\$331,000

Surgeons who complete fellowships (vascular, hand, trauma, pediatric, etc.) will earn 10-30% or more than a bread and butter General Surgeon.

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