

Navigating the Job Search

BY S. K. STEVEN HOUSTON III, MD, WITH CARL D. REGILLO, MD; ALLEN C. HO, MD; PRAVIN U. DUGEL, MD; AND TIMOTHY G. MURRAY, MD

It is that time of year again: Current second-year vitreoretinal surgery fellows are scurrying to line up jobs for next year. Unlike applications and interviews for residency and fellowship, the first "real" job search has many more personal and professional variables. I recently sat down with several established, internationally recognized vitreoretinal surgeons—Carl D. Regillo, MD, director of the retina service at Wills Eye Hospital in Philadelphia, Pennsylvania; Allen C. Ho, MD, director of retina research at Wills Eye Hospital; Pravin U. Dugel, MD, senior managing partner at Retinal Consultants in Arizona in Phoenix; and Timothy G. Murray, MD, MBA, founder and director of Murray Ocular Oncology and Retina in Miami, Florida—to pick their brains about navigating the job search.



— S. K. Steven Houston III, MD

Among the first questions that arise when thinking about the job search is "When should I start?" After residency, fellows often want to settle into fellowship and begin mastering medical retina and vitreoretinal surgery. Frequently, new fellows think that 2 years is a long stretch and that they have ample time to begin a job search. However, experienced retina surgeons appear to agree on one thing: It is never too early to start. That does not mean that fellows need to have jobs lined up before performing their first vitrectomy, but the panel assembled for this article recommended that fellows get the ball rolling early.

PERSONALIZING THE JOB SEARCH

Pravin U. Dugel, MD, suggested sitting down and reflecting on your personal and professional goals before beginning your job search. Self-reflection allows you to determine what kind of job you would like and guide your job search with this in mind.

"Be honest with yourself," Dr. Dugel said. "Ask yourself lots of questions." Are you interested in an extremely busy clinical and surgical practice, or would you prefer a relaxed schedule? Are you interested in research, clinical trials, traveling, and presenting at meetings? Do you want to start a spinoff company or other entrepreneurial ventures? Think about what you want from your job and career, and then find the job that fits your goals.

Although many retinal specialists recommend starting a job search early, Dr. Regillo cautioned against committing to a job too early. Committing too early may result

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in missing out on a better opportunity that may open up at a later time. On a general timeline, he said, you should start thinking about your goals at the end of residency and the beginning of fellowship.

THE USEFULNESS OF RETINA MEETINGS

Make sure to attend retina meetings as a second-year fellow, and arrange informal meetings with practices seeking employees. After these initial meetings, prepare to visit your top choice practices to meet the other partners and learn more about the practice. If all goes well, contract talk will follow these meetings, so be prepared with the terms you wish to negotiate in your contract.

Timothy G. Murray, MD, MBA, suggested initiating contact with potential practices after attending your first American Academy of Ophthalmology (AAO) annual meeting. He also recommended getting involved in the Vit-Buckle Society (VBS) and the American Society of Retina Specialists (ASRS), both of which have programs to aid fellows in the job search. The ASRS offers a

fellows-in-training section and incorporates speed networking, which connects fellows with practices seeking to hire in a speed-dating format, at its annual meeting.

GEOGRAPHIC CONSIDERATIONS

"What if you are geographically constrained?" is a question Allen C. Ho, MD, frequently encounters. His answer is simple: "Go to where you want to live."

Dr. Ho and Carl D. Regillo, MD, recommend early contact with potential employers in your desired geographic location, as many practices start mapping plans to hire 1 to 2 years in advance. "It may be beneficial to contact potential employers early, as it may stimulate a practice to consider their needs," Dr. Ho said. He explained that practices often consider hiring if the right person comes along.

Dr. Dugel warned not to be too rigid with geographic constraints because you may have to sacrifice some important career elements just to be in a specific location. "Do not think backwards. Prioritize what you want from a job," he said.

THE VALUE OF MENTORS

All of the doctors I spoke with agreed that the best way to initiate contact with potential practices is to have your mentors start the conversation. After a line of communication has been opened, speaking informally over the phone or at meetings is a good way to learn more about each other. Remember that this is a long-term relationship, so it is best to get to know the personality of the practice to make sure that you fit with the group.

If your mentors do not have contacts at your practices of interest, Dr. Murray suggested sending the practices in question a letter or e-mail stating your interest along with your CV. He also recommended that you be visible during your fellowship. This not only means performing hard work in the clinic and the OR, but also continuing to research, publish, and present at meetings. Many potential employers are at retina meetings (eg, ASRS, AAO, Retina Society, Macula Society, and VBS), and a solid podium presentation may turn heads.

PRACTICE SETTINGS

Retina jobs come in many flavors; your personal preferences and goals will determine whether the details of a particular job are pros or cons. Commonly, fellows seeking a job can choose from 5 work settings: an academic/university setting, a large retina-only group, a small retina-only group, a multispecialty group, and solo practice. You should talk to mentors and prior fellows regarding each setting.

"The right fit for 1 person may be the opposite for someone else," Dr. Ho said. It is important to reflect on your goals and choose a practice with similar ones that will allow

you to thrive. The panel of retina specialists recommended understanding key factors when considering different practice models, such as the in-practice decision-making process, compensation, resource allocation, travel, satellite office coverage, call schedules, and partnership tracks.

"Know why you were hired," Dr. Murray said. Are you covering a satellite office? Starting an office in a new location? Taking over the practice of someone retiring? Make sure you understand your incoming role and how your future with the practice will develop.

The lines between clinical productivity and research have blurred in recent years. Many private practices actively engage in clinical research, and many academic positions emphasize clinical volume and productivity. Understanding how your time, money, and research will be budgeted will help you choose the work setting that is right for you, Dr. Murray said. He noted that fellows must weigh the clinical, teaching, surgical, and research responsibilities of every position they seek.

GETTING TO KNOW YOUR FUTURE PARTNERS

Making sure a practice fits your personality is easier said than done. It may be difficult to determine the personality of a practice prior to signing on for a job, and each retina doctor on the panel recommended spending as much time as possible with future partners.

"Ideally, you will have worked with doctors from your future practice before signing on for a job there," Dr. Murray said. If you have not worked with the doctors before, do not fret. Talk with someone with knowledge of the practice of interest to glean anything you can regarding the practice and its staff. Prior and current fellows; mentors from medical school, residency, and fellowship; and even pharmaceutical and surgical reps can offer useful information on a practice's strengths and shortcomings.

Be sure to meet informally with practice partners at meetings and arrange plans to visit the practice. Plan to spend a long weekend (Friday through Monday) at the practice so you can observe the clinic and the OR on weekdays and meet with practice partners in nonclinical settings (ie, dinners) during the weekend.

Observation is key during time in the clinic and the OR. "Be particularly observant of staff interaction in the clinic and the OR," Dr. Ho said. Further, Dr. Murray recommended getting to know the practice partners in various settings: "The more time spent together, the better. Move beyond cursory introductions and develop a depth and breadth to your personal relationship."

Do not rule out your instincts when deciding whether or not a particular practice is right for you. "Ultimately," Dr. Ho said, "you should go with your gut."

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DO NOT FORCE YOURSELF INTO A PRACTICE

“Your professional goals must align with the goals and practice style of your future job,” Dr. Regillo said, noting that personal compatibility is only a single aspect of a practice to consider. Dr. Regillo echoed Dr. Dugel’s observation that self-reflection is a key aspect of your job search. Choosing a job that matches your goals is as important during the job search as it was when choosing a residency or fellowship program.

Trying to force something that does not fit is a quick way to make yourself unhappy. “It is very difficult to change the personality of a practice,” Dr. Dugel said. “It may take enormous effort to make it change.” Therefore, find a practice that fits you instead of a practice that you think you can change.

HISTORY LESSONS

You would not buy a business without researching the company’s structure and history. “Learn about the history of the group, including the doctors who have left the practice,” Dr. Ho said. Doctors leaving a practice, especially at key transition periods such as at the precipice of changing from an associate to a partner, raise red flags. Dr. Murray suggested that you investigate why these doctors departed: “Talk to people that have left, as most people are willing to talk. This will give you an idea whether their departure was personal or associated with the practice.”

EVOLVING METRICS

Dr. Dugel noted that as the structure of health care changes, so too do the metrics for judging practices. “You can no longer determine the strength of a practice based on how long it has been around, how many partners it has, or how it sets a path for each new associate,” he said. “Practices must be willing to adapt and adopt and not remain stagnant in the changing health care landscape.

“Look for a practice poised to make the most of changing times, one that strives to grow the practice and incorporate entrepreneurial skills to utilize other medical and nonmedical opportunities,” Dr. Dugel continued. He advised that fellows seeking jobs with a practice look for

future partners who will "bring new ideas to enhance the practice."

CONTRACT NEGOTIATIONS

You may be offered a contract to join a practice following completion of fellowship if the practice believes that you would be a good fit. Unlike binding contracts for residency and fellowship, your job contract has many variables to consider. Although fellows often focus on starting salaries, the panelists recommended focusing on long-term details. The first 1 to 3 years are often similar across the country regarding starting salaries, they said, and Dr. Murray suggested that unusually high starting salaries may be an indication that something is off with that particular practice.

Each practice structures the first few years, also called the associate period, differently. Usually, compensation during the associate period is structured as a base salary plus a bonus based on a percentage of your revenue after covering 100% to 300% of your base salary. During the associate period, Dr. Ho said, "The existing practice is at more risk than the new doctor."

Partnership tracks may vary from practice to practice, and Dr. Regillo suggested that all details should be clear in the contract. Dr. Murray agreed and he stressed that young doctors in a retina practice understand the partnership phase so that they know what to expect as they continue with the practice. Clear explanations of the partnership phase prevent those in the associate period from being blindsided by unexpected news. Contracts in large retina-only or multispecialty groups are often less negotiable than those for smaller practices. "Make sure your contract is similar to other recent hires," Dr. Regillo said.

Buy-ins and buy-outs vary considerably from contract to contract, and you should have a general understanding of how the practice calculates these numbers. Partnership compensation is a key aspect of a contract to consider and can be a direct function of productivity (ie, the "you eat what you kill" approach), shared by the physicians in the practice (ie, the so-called communist approach), or a combination of these structures.

"Contracts are compromises, so you need to prioritize," Dr. Murray said. Make sure to understand the expectations for clinical volume, call schedules, meetings and travel, and the location of clinics and satellites. If you wish to practice in a specific geographic location, Dr. Ho suggested that you avoid restrictive covenants: Under such agreements, you may be locked out of a particular geographic location for a significant period of time if you depart the practice. Having mentors or lawyers review your contract may provide additional benefit.

FINAL TIDBITS FROM THE PANEL

Dr. Murray aptly summarized a feeling all members of the panel shared: "Find the right job that aligns with your personal and professional goals."

"The key is to stay involved," Dr. Ho said. "Continue to be active through publishing, attending and presenting at meetings, joining societies, participating in clinical trials, and collaborating with others."

Dr. Murray, Dr. Regillo, and Dr. Dugel all agreed that mentors play an integral role in professional development and that the right practice and continued hard work will open doors.

Dr. Ho's final piece of advice was to be proactive: "Show initiative. Do not let it happen; make it happen." ■

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