

HIGHLIGHTS  
OF AN  
INDEPENDENT  
STUDY  
CONDUCTED  
FOR THE  
NEW ENGLAND  
JOURNAL  
OF MEDICINE

# HOW YOUNG PHYSICIANS SEARCH FOR JOBS





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# HOW YOUNG PHYSICIANS SEARCH FOR JOBS

When young physicians look for a new job, what are their priorities? Which job search tools are they most dependent upon? How helpful are recruiters?

To answer these and numerous other job hunt-related questions, the *New England Journal of Medicine* commissioned an independent study of 2,000 physicians who completed their training in the last five years.

The result is a highly nuanced picture of how physicians, at the beginning of their careers, decide it's time for a new job, search for that position, and ultimately decide to accept or reject it.

## **ABOUT THE STUDY**

### **CONDUCTED BY**

Zeldis Research Associates

### **PURPOSE**

To determine current job-hunting trends among young physicians

### **DATE**

April 2004

### **METHODOLOGY**

Blinded mail survey with \$2 incentive, using aided and unaided-recall methodologies

### **SAMPLE**

2,000 total, consisting of physicians in practice five years or fewer

### **SOURCE**

Random selection, AMA physician file

### **USABLE RESPONSES**

486 (24.9% response rate)

### YOUNG PHYSICIANS STAY AT THEIR FIRST JOB FOR A WHILE

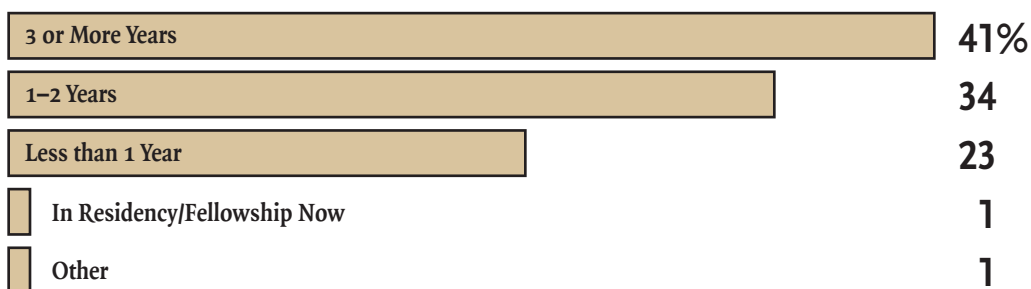
Seven out of 10 physicians surveyed have had one job since finishing their training.



Base = 471 respondents

### RESPONDENTS ARE RECENT JOB-SEEKERS

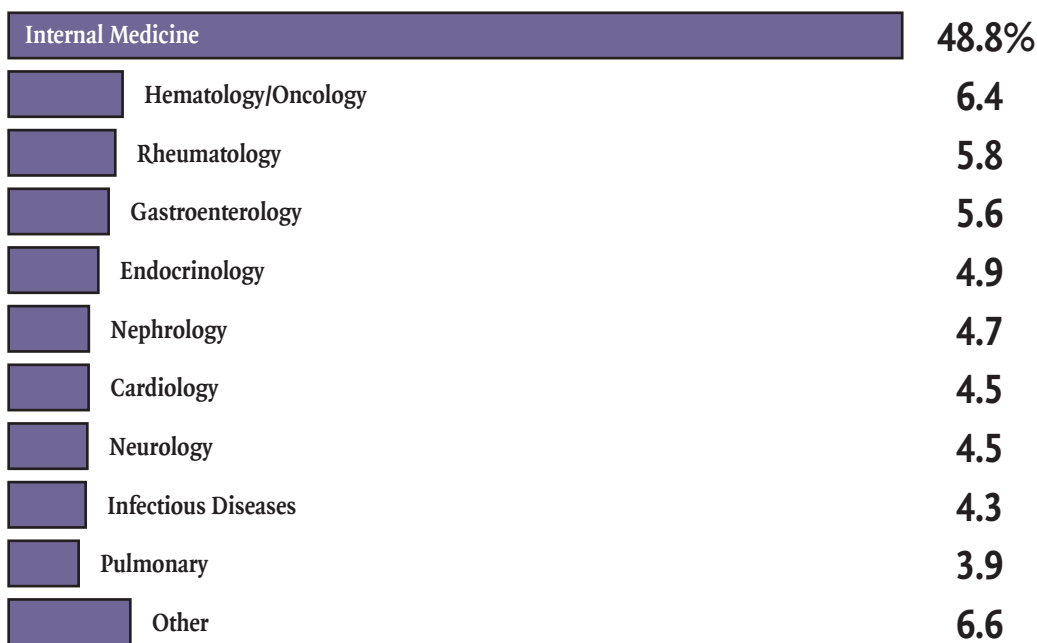
More than half of the respondents looked for a job recently, considering that 57% have been in their present position for only two years or fewer.



Base = 476 respondents

### RESPONDENTS ARE SPLIT EVENLY BETWEEN INTERNISTS & SUBSPECIALISTS

The split between internists and subspecialists was almost even at 48.8% and 44.7%, respectively.



Base = 486 respondents



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# EXECUTIVE SUMMARY

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## **MOST PHYSICIANS STILL WORK AT THEIR FIRST POST-TRAINING JOB**

Seven out of 10 respondents have had just one position since completing their training. On average, 3 of these 7 physicians have been in their first job two years or fewer. Three of 10 respondents have held two or more jobs since finishing their training.

## **WHEN CHOOSING A JOB PHYSICIANS RANK LOCATION AS #1**

Desirable geographic location was named by 65% of respondents as the top reason they accepted their current position. Family considerations and the type of practice setting tied for second place. Although compensation is considered only the fifth most important reason for choosing their current job among all respondents, physicians 41 and older place it at the top of their lists.

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**MALPRACTICE INSURANCE IS BY FAR THE MOST IMPORTANT BENEFIT**

Seventy-five percent of respondents view malpractice insurance as one of the top three elements of their benefits packages. Physicians consider the signing bonus and CME time allowance – respectively – as the second and third most important benefits.

**LOCATION IS THE MOST COMMON DEAL BREAKER**

For 52% of physicians, an undesirable location would cause them to turn down a new position. Compensation and a poor call schedule rank as the second and third most common reasons for rejecting a job offer.

**PHYSICIANS LEAVE JOBS DUE TO AN ORGANIZATION'S LACK OF STABILITY**

After concerns about an organization's stability, respondents consider limited opportunity for growth and office politics to be the second and third top factors in deciding to leave a job.

**ONE-THIRD UTILIZE RECRUITERS AND REPORT POSITIVE EXPERIENCES**

Slightly more than a third of respondents used search firm recruiters, while 27% utilized hospital staff recruiters. Three-fourths of respondents say they would be most likely to use personal/professional referrals if they were to start a job search today, compared with 40% who say they would use search firms. While a majority of physicians had positive experiences with both types of recruiters, hospital staff recruiters are rated highest on the site visit, while their search firm counterparts are considered most effective at the identification of new practice opportunities and the interview process. Direct mail and e-mail are the best ways to contact physicians about job opportunities.



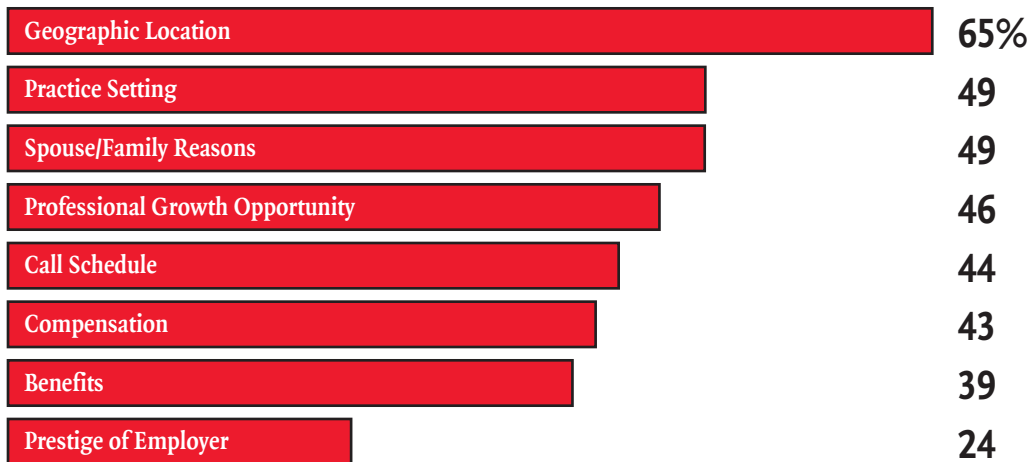
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# CHOOSING A JOB

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## GEOGRAPHIC LOCATION IS CRITICAL WHEN CHOOSING A JOB\*

More than 6 out of 10 respondents say that when choosing their current job, a desirable geographic location was very important to them. Spouse/family considerations and practice setting were considered critical by almost half of the respondents. Physicians ranked the opportunity for professional growth, call schedule, and compensation – in that order – as the next most important factors.

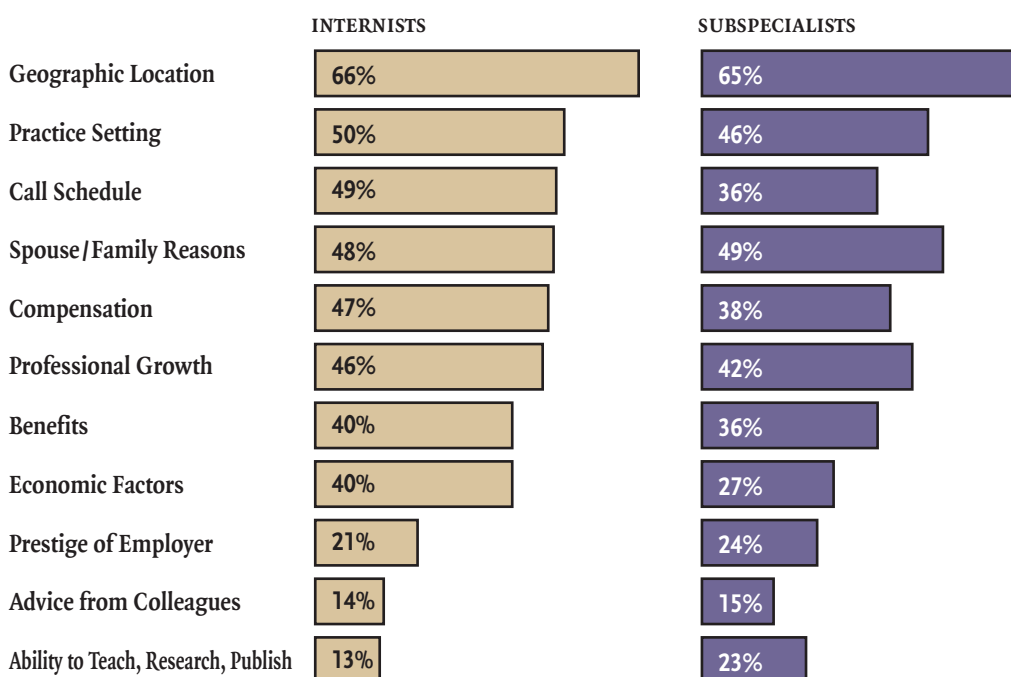


Base = 458 respondents

\* Percentages reflect respondents who ranked each criterion as 9 or 10 on a 10-point scale, with 10 being the most important.

### MOST IMPORTANT FACTORS WHEN CHOOSING A JOB BY SPECIALTY\*

Both internists and subspecialists placed geographic location at the top of their priority list when choosing their current job. Spouse/family reasons is of roughly equal importance to both. Call schedule and economic factors, like malpractice insurance rates and cost of living, loom larger for internists than for subspecialists.



\*Percentages reflect respondents who ranked each criterion as 9 or 10 on a 10-point scale, with 10 being the most important. Base = 398 respondents

### MOST IMPORTANT FACTORS WHEN CHOOSING A JOB BY AGE\*

Among physicians 35 and younger, almost 9 out of 10 said location was critical when choosing their current job, and 73% deemed the call schedule a top priority. Among physicians 41 and older, 78% said compensation was most critical to their choice.

	35 AND UNDER	36-40	41 AND OLDER
Geographic Location	86%	76%	70%
Call Schedule	73	61	62
Practice Setting	72	71	72
Compensation	67	73	78
Professional Growth Opportunity	65	66	66
Spouse/Family Reasons	65	65	65
Benefits	59	61	67
Economic Factors	50	58	54
Prestige of Employer	43	48	40
Advice from Colleagues	33	32	29
Ability to Teach, Research, Publish	29	30	31

\*Percentages reflect respondents who ranked each criterion as 9 or 10 on a 10-point scale, with 10 being the most important. Base = 398 respondents



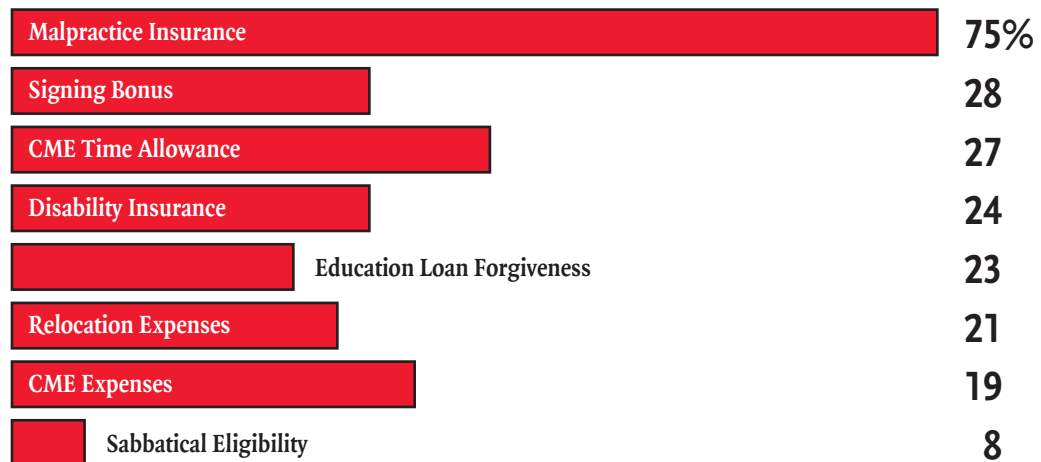
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# VALUING JOB BENEFITS

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## MALPRACTICE INSURANCE IS BY FAR THE MOST IMPORTANT BENEFIT FOR JOB SEEKERS\*

Three out of 4 respondents said that malpractice insurance is a must-have benefit. The signing bonus and CME time allowance were the second and third most important benefits, respectively.

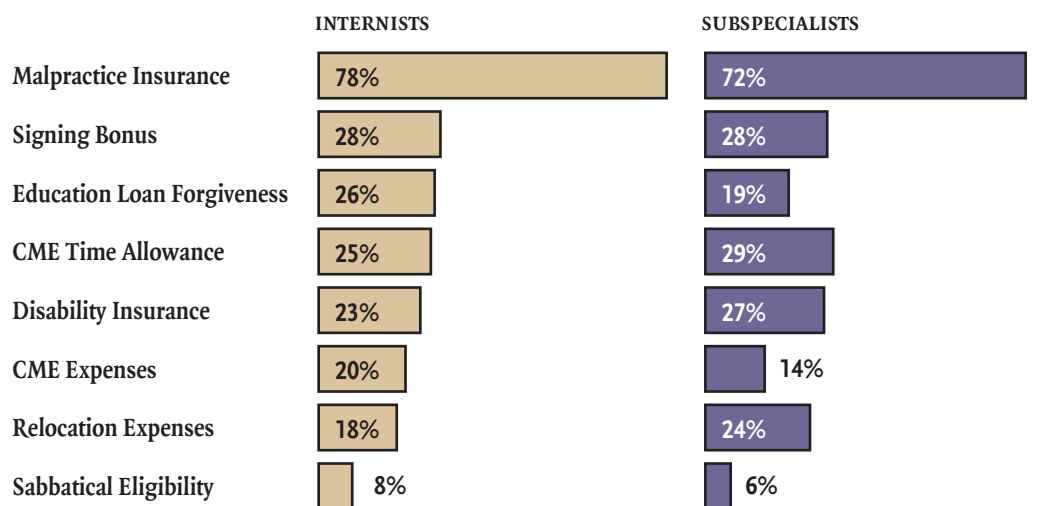


Base = 412 respondents

\* Percentages reflect respondents who ranked each criterion as first, second, or third in importance.

**AFTER MALPRACTICE INSURANCE AND THE SIGNING BONUS, INTERNISTS AND SUBSPECIALISTS DIVERGE ON PRIORITIES\***

Loan forgiveness and CME expenses were more important to internists, while subspecialists valued relocation expenses more.



Base = 384 respondents

\*Percentages reflect the proportion of respondents rating this benefit as first or second in importance.

**YOUNG PHYSICIANS VALUE SIGNING BONUSES AND LOAN FORGIVENESS; OLDER PHYSICIANS WANT DISABILITY INSURANCE\***

Education loan forgiveness is more important to physicians 35 and under than it is to their older counterparts. Physicians 41 and older place greater value on disability insurance than physicians 35 and under. Across all ages, malpractice insurance is a top priority.

	35 AND UNDER	36-40	41 AND OLDER
Malpractice Insurance	75%	73%	75%
Signing Bonus	29	22	29
Education Loan Forgiveness	28	18	20
CME Time Allowance	24	33	31
Relocation Expenses	20	19	23
Disability Insurance	17	31	33
CME Expenses	14	24	24
Sabbatical Eligibility	6	6	14

Base = 408 respondents

\*Percentages reflect respondents who ranked each criterion as 9 or 10 on a 10-point scale, with 10 being the most important.



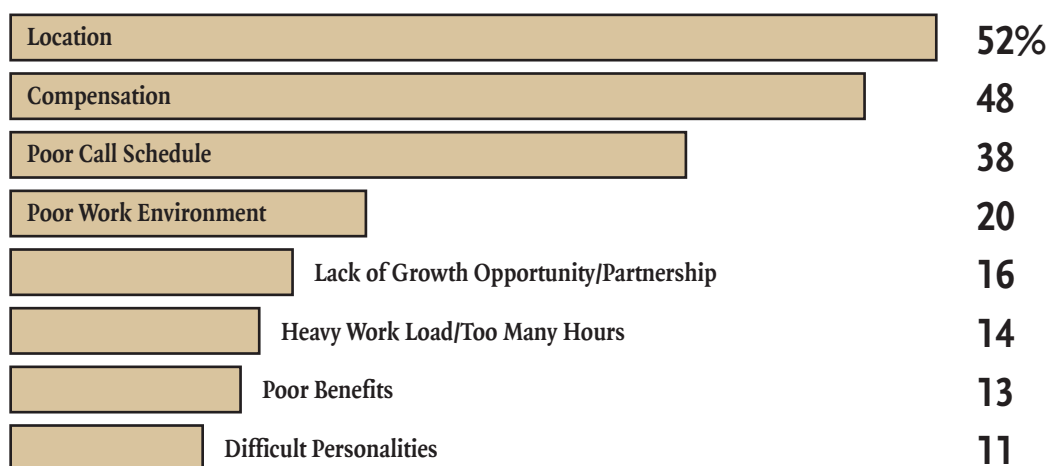
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# TURNING DOWN A JOB OFFER

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## LOCATION, COMPENSATION, AND POOR CALL SCHEDULE ARE THREE LEADING DEAL BREAKERS\*

Although a poor call schedule is a key factor in turning down a job for all ages, it is more important to internists than to subspecialists (42% vs. 33%). Physicians 35 and younger are more likely to turn a job down due to poor call schedule, than physicians 41 and older (31% vs. 16%). Subspecialists are more likely than internists to reject a job offer because of lack of growth opportunity (20% vs. 12%). Older physicians are more likely to reject an offer for compensation reasons, as compared to physicians 35 and younger (55% vs. 46%).



Base = 328 respondents

\* Percentages reflect total group response across all specialties and age groups.

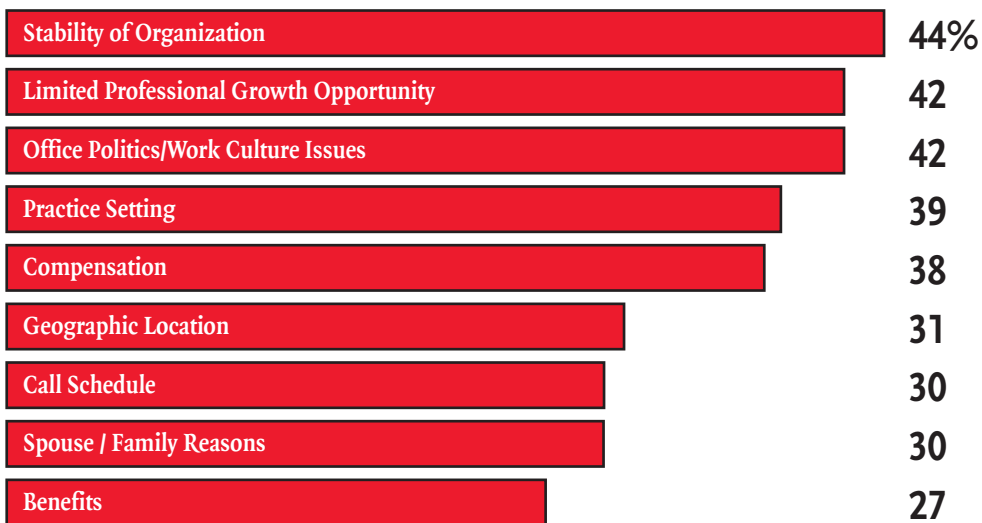
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# LEAVING A JOB

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## STABILITY OF ORGANIZATION IS THE #1 REASON FOR LEAVING LAST JOB\*

After the organization's stability, respondents gave equal weight to limited professional growth opportunity and office politics when asked why they left their last job. For internists, the organization's stability was even more important than for subspecialists (47% vs. 42%). It is interesting to note that compensation was not among the top factors for leaving a job.



Base = 131 respondents who held two or more jobs since completing training

\* Percentages reflect respondents who ranked each criterion as 9 or 10 on a 10-point scale, with 10 being the most important.



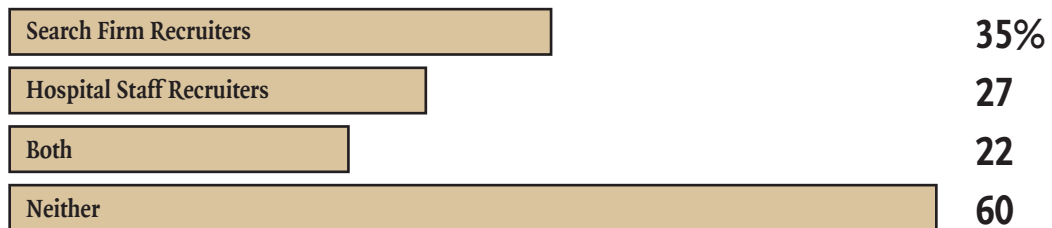
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# EXPERIENCE WITH RECRUITERS

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## UTILIZATION OF RECRUITERS IN LAST JOB SEARCH

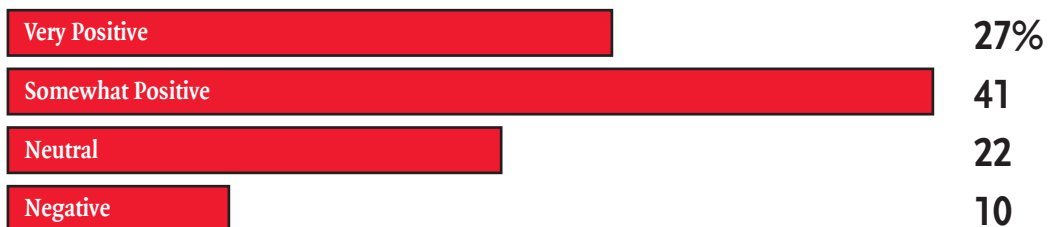
About one-third of the respondents utilized recruiters and reported positive experiences. Obtaining information on the position, the practice and the job's location is the most helpful information physicians could have received when looking for a job.



Base = 420 respondents who have looked for a job

## MOST PHYSICIANS HAVE HAD POSITIVE EXPERIENCES WITH HOSPITAL STAFF RECRUITERS

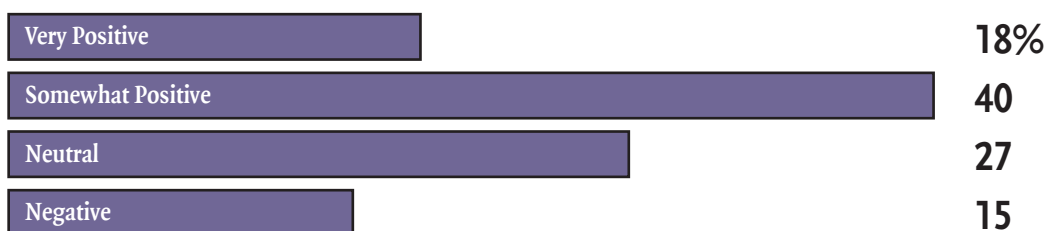
Two-thirds of respondents reported positive experiences with hospital staff recruiters, and gave the highest ratings on the site visit and the interview process.



Base = 124 respondents

**SEARCH FIRM RECRUITERS ARE VALUED BY MANY PHYSICIANS**

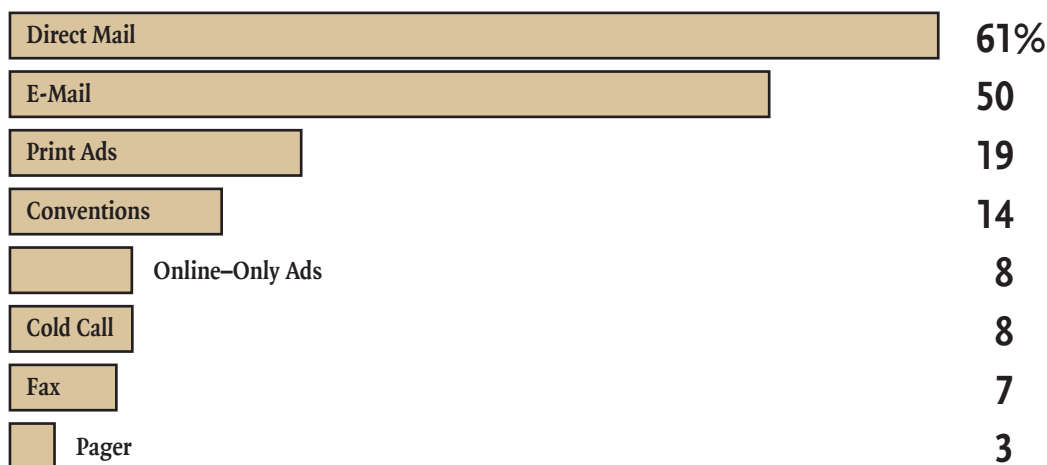
Nearly 6 out of 10 physicians say they have had positive experiences with search firm recruiters, and ranked them high for identifying new practice opportunities and the interview process.



Base = 163 respondents

**PHYSICIANS PREFER DIRECT MAIL TO OTHER METHODS OF CONTACT\***

More than 6 out of 10 physicians say direct mail is one of the best ways to contact them, while e-mail ranked second. Paging them is their least favorite mode of contact.



Base = 462 respondents

\* Answers total more than 100% due to multiple responses.



# DEMOGRAPHICS

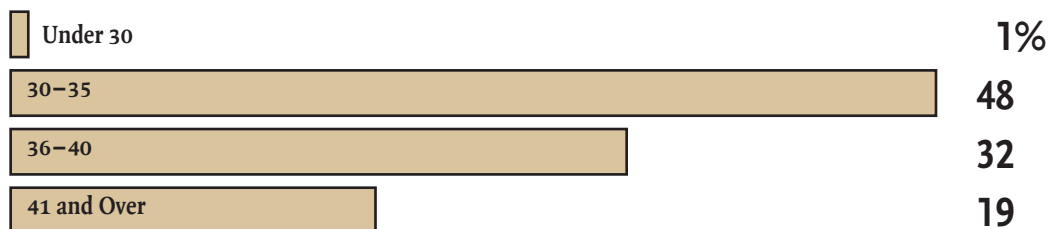
The majority of the physician respondents surveyed are male, with a median age of 35. Most graduated from medical school after 1990 and trained at a tertiary care or university-affiliated hospital.

## GENDER



Base = 440 respondents

## AGE



Base = 474 respondents

## SITE OF MOST RECENT TRAINING\*

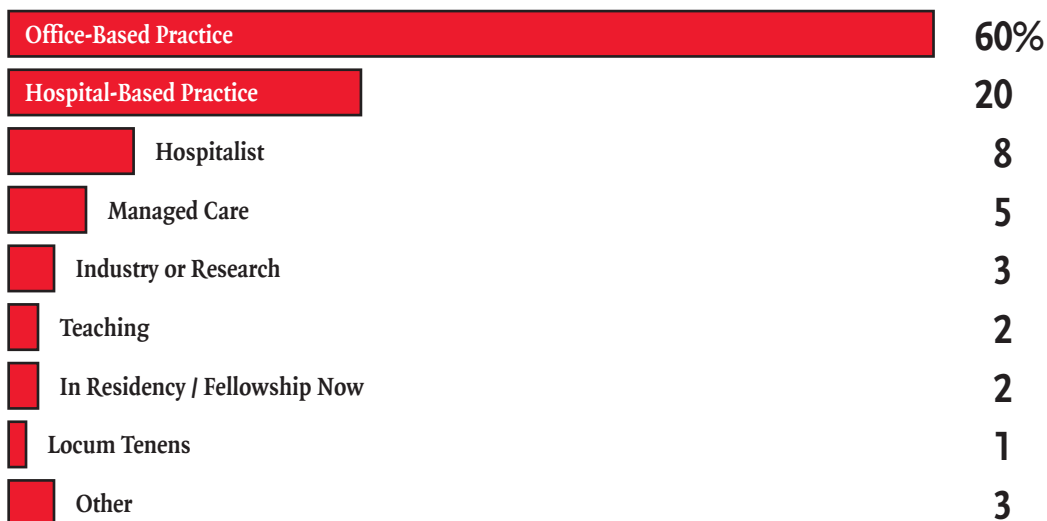


\*Answers total more than 100% due to multiple responses.

Base = 475 respondents

**HOW PHYSICIANS DESCRIBE THEIR PRIMARY WORK ACTIVITY\***

Six out of 10 physicians work in an office-based practice, while 20% are based at a hospital.



Base = 477 respondents

\*Answers total more than 100% due to multiple responses.

METHODOLOGY

This study was conducted by Zeldis Research Associates of Pennington, New Jersey, among 2,000 physicians in practice five years or fewer. Recipients were randomly selected from the AMA physician list. Specialties represented included both Internal Medicine and IM subspecialties, including cardiology, endocrinology, gastroenterology, hematology, infectious diseases, nephrology, neurology, oncology, pulmonology, and rheumatology.

A survey package consisting of a cover letter, two-page questionnaire, return envelope, and \$2 incentive was mailed to recipients on April 19, 2004. The survey was mailed on Zeldis Research Associates stationery, and the *New England Journal of Medicine* was not identified as the sponsor. A repeat mailing was done on May 3, 2004.

The response period ended on May 17, 2004, when 486 usable responses had been received (response rate: 24.9%).

Responses were compiled and analyzed by Zeldis Research Associates using standard statistical methodologies.

To receive additional copies of this study please contact:



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