

ELSEVIER



healthtalent.com

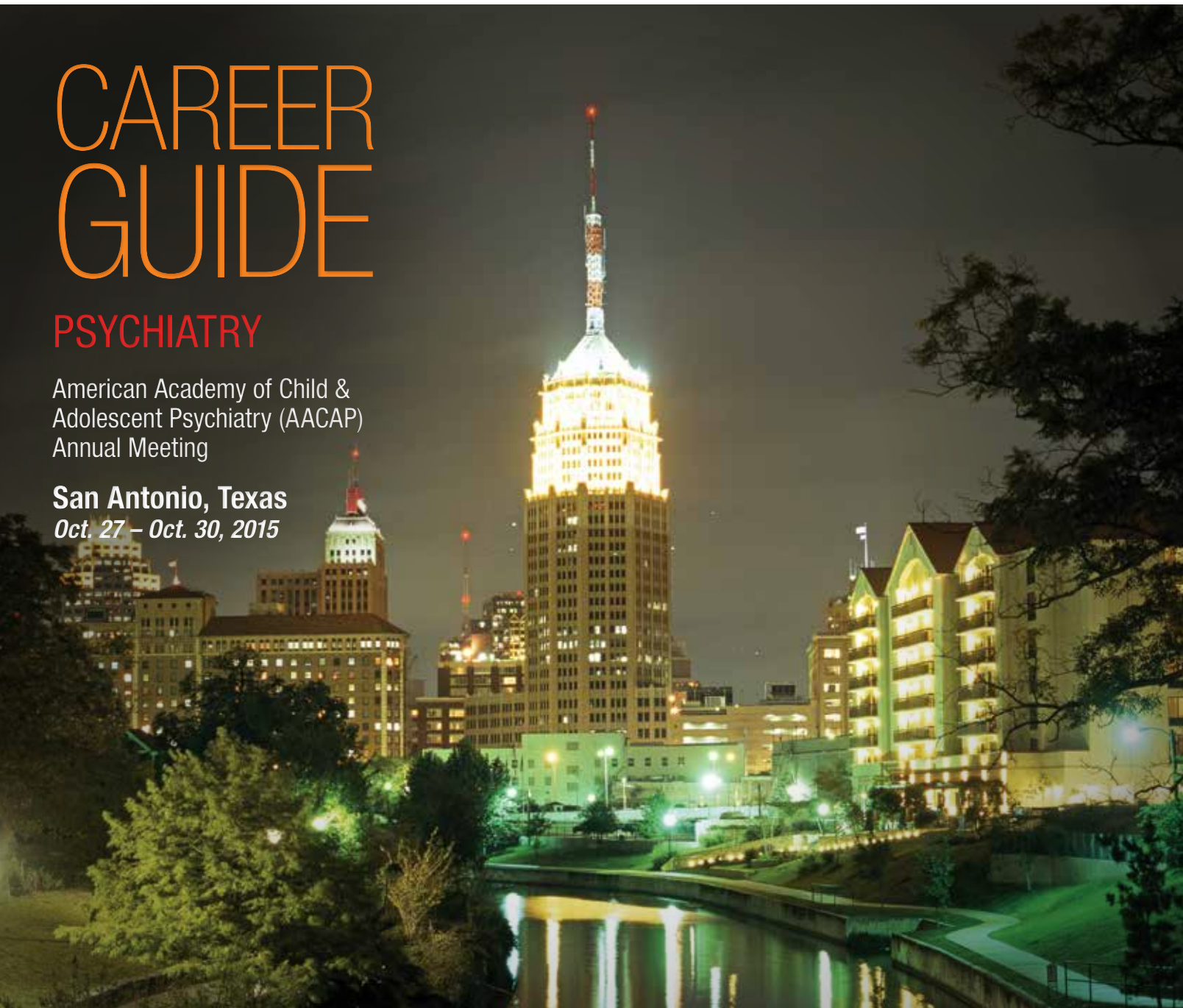
CAREER GUIDE

PSYCHIATRY

American Academy of Child &
Adolescent Psychiatry (AACAP)
Annual Meeting

San Antonio, Texas

Oct. 27 – Oct. 30, 2015



ARTICLE HIGHLIGHTS:

- Dr. Executive: *The Growing Popularity of the MD/MBA*
- Investing in Your Children's Future
- Work-Family Balance During Training: *Advice from a New Mother*
- Careers Beyond Clinical Practice
- Choosing Your Mentor

BE/BC Child & Adolescent Psychiatrists Portland, Oregon



Randall Children's Hospital part of **Legacy Health** in collaboration with **Oregon Health & Science University**, **Kaiser Permanente** and **Adventist Health** will open Unity Center for Behavioral Health in the fall of 2016. The Unity Center for Behavioral Health is expected to be a national model for providing compassionate mental health care in times of need. This unprecedented collaboration of four health systems shares the goal of providing care for all those in need through a combination of emergency, inpatient and robust transition to outpatient services and embraces the concepts of hope, recovery and resilience. The center will serve as a model setting to train a wide range of future healthcare providers.

The Unity Center will include 22 beds for adolescents, 79 adult patient beds, a Psychiatric Emergency Service and will also collocate navigators from organizations that provide community behavioral health services, helping to coordinate continued support to patients after discharge.

We are actively recruiting for the following:

Medical Director Child and Adolescent Psychiatrist - This position will be 50% leadership and 50% clinical. We are seeking an experience Board Certified Child and Adolescent Psychiatrist wishing to lead this exciting opportunity to further develop excellent inpatient child and adolescent teaching hospital, engaged in a community system of care.

Inpatient Child and Adolescent Psychiatrist – These are clinical positions providing care for adolescents on the Inpatient Unit. We have both full and part time opportunities for BC/BE Child and Adolescent Psychiatrists.

These positions include academic appointment and will be employed by **Oregon Health & Science University**. The Division is a fully accredited training program that seeks to deliver collaborative, high quality, compassionate, cost effective service that promotes education, research and clinical leadership.

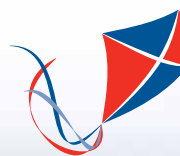
These positions are open now and will work at Randall Children's Hospital providing services in the Adolescent Psych unit until the Unity Hospital opens. The current unit is staffed by highly experience professionals motivated to continue a long tradition of excellence throughout this transformative process.

Portland is a sophisticated city offering diverse cultural activities and communities that appeal to a wide variety of needs and tastes. Beautiful parks and more biking paths per mile than any city in the US, promote an active lifestyle. The temperate four seasons, spectacular surroundings of the Columbia River Gorge and majestic Cascade Mountains, as well as close proximity to ocean beaches and long skiing seasons make this an opportunity for both a dynamic position and a wonderful lifestyle.

The partners in the Unity collaboration are committed to delivering comprehensive and family-centered care with compassion and excellence. As we consider qualified candidates, we are committed to building a culture that values diversity and is reflective of those we care for.

For additional information for these positions or to connect regarding Adult Psychiatry opportunities, please stop by booth #616 at the AACAP conference or contact **Vicki Owen** at **503 415-5403**. Additionally you can email your CV to **vowen@lhs.org**.

AA/EOE/Disabilities/Veterans



**RANDALL CHILDREN'S
HOSPITAL**
LEGACY EMANUEL



CAREER GUIDE

PSYCHIATRY

CONTENTS

- 4 Dr. Executive: *The Growing Popularity of the MD/MBA*
- 8 Work-Family Balance During Training: *Advice from a New Mother*
- 10 Choosing Your Mentor
- 12 Investing in Your Children's Future
- 14 Careers Beyond Clinical Practice

Produced by



630 Madison Ave, 2nd Floor,
Manalapan, NJ 07726

Publisher Elsevier
Managing Editor Eric Raible
Art Director Ari Mihos
Assistant Art Director John Salesi



FACULTY CHILD AND ADOLESCENT PSYCHIATRIST ROANOKE, VIRGINIA

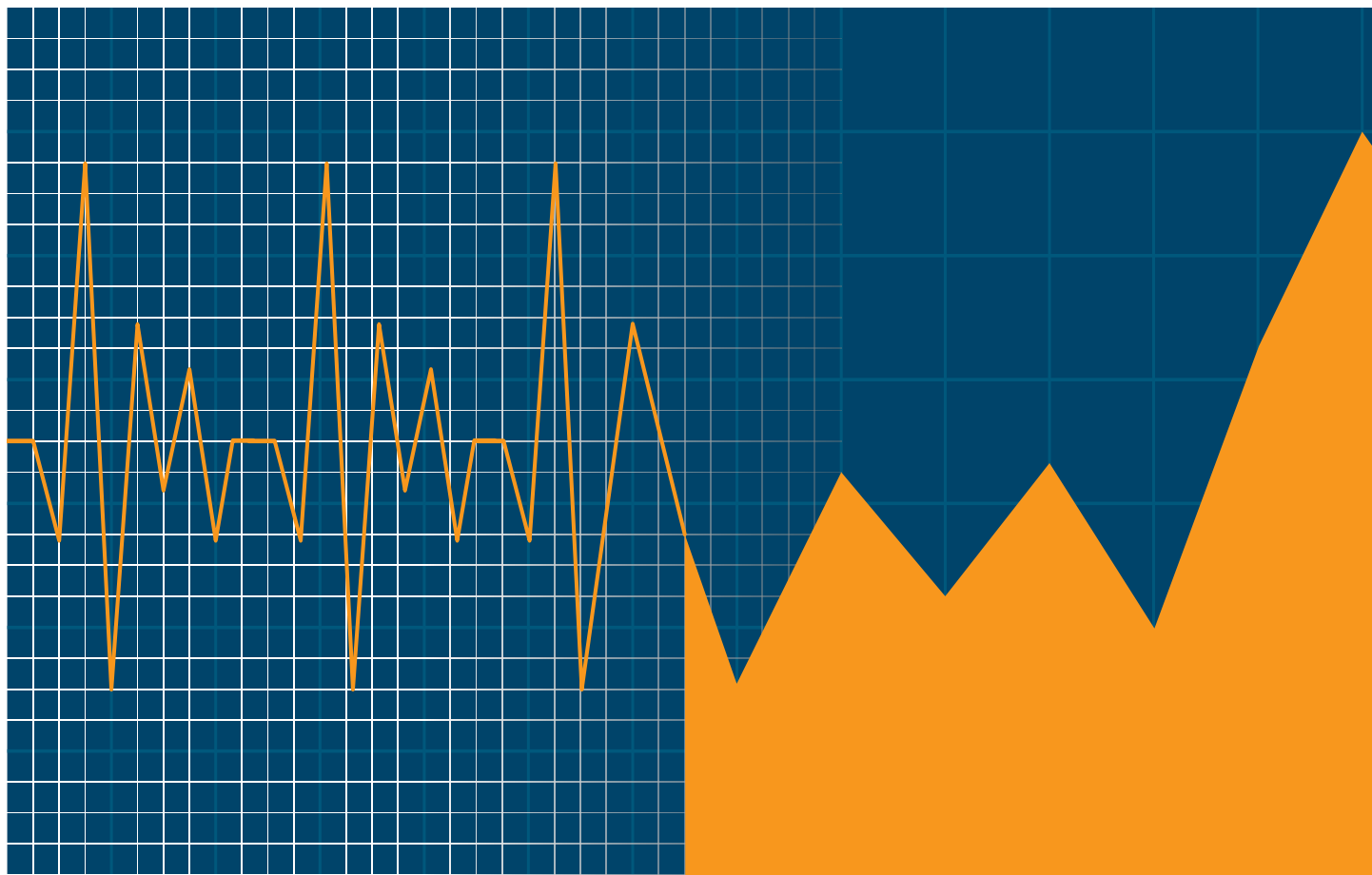
Virginia Tech Carilion School of Medicine and Carilion Clinic have an opening for an ABPN BE/BC Child and Adolescent Psychiatrist with a minimum of three years post-training experience. This inpatient/outpatient faculty position is associated with the new allopathic medical school and Carilion Roanoke Memorial Hospital, a 700-bed teaching/tertiary referral center with 12 acute child and adolescent psychiatric beds. Responsibilities include direct clinical services, teaching medical students, supervising residents and fellows, and integrating research with clinical practice. Call coverage is shared with five child and adolescent psychiatrists.

The Roanoke area offers a four season playground for mountain and lake recreation, as well as a rich array of arts, humanities, and cultural experiences. Roanoke features a low cost of living, exceptional schools, and nationally and internationally acclaimed colleges and universities within a short drive.

For more information or to meet with Carilion Clinic faculty during the 2015 Annual Meeting contact Amy Silcox, physician recruiter, at 540-224-5187 or amsilcox@carilionclinic.org.



7 hospitals | 650+ physicians | 70+ specialties | 220 practice sites | 23 GME programs
Equal Opportunity Employer - Minorities • Females • Protected Veterans • Individuals with Disabilities



Dr. Executive:

The Growing Popularity of the MD/MBA

By Melissa Mapes

This past December, Vivek H. Murthy, MD, MBA, assumed the office of Surgeon General of the United States. At just 37 years old, Murthy's age is not his only unique attribute; he also holds a Master of Business Administration from the Yale School of Management.

Many physicians go on to pursue additional degrees after medical school, such as a PhD or MPH, but until recently doctors with MBAs were few and far between. The demand for business training among providers has exploded in the past decade. Murthy is emblematic of this trend—symbolizing a new role for doctors in the U.S. healthcare system.

SUPPLY AND DEMAND

Twenty years ago, there were only six combined MD/MBA programs in the U.S. Today, there are about 65, according to a recent article in *The Atlantic* magazine. That means about 500 currently enrolled students nationwide.

Rather than adding two more years of education, these pro-

grams integrate the medical and administration curriculum into five years. The total comes out to just one extra year on top of medical school.

To multiply the appeal, an MBA can open doors to higher-paying jobs than a medical degree alone. A 2014 study by *The New York Times* showed that the average salary for a hospital administrator is \$237,000, while the average clinical physician makes \$185,000 per year. Like Murthy, MD/MBAs also tend to end up in leadership roles rather quickly out of residency.

The dual skill sets of business-savvy and medical training seem to make for appealing job candidates—especially in administration, policy, and industry positions. Hospitals and other healthcare organizations frequently hire MD/MBAs into high-level roles, which can require both patient care and budget management.

Medical schooling has long-since been criticized for a lack of evolution. However, as any good business student knows, growing demand can drive supply. Decreasing reimbursements and the ballooning cost of higher education have many residents feeling

concerned about their financial future—enhancing the draw of a better-paying administrative gig. This, combined with aspirations of entrepreneurship or improving public policy, has helped fuel the addition of an MBA to traditional medical degrees.

BAD RAP

The motivations for obtaining an MD/MBA are clear: higher income, leadership positions, and diversity of career opportunities. But not everyone in healthcare believes that business degrees make sense for medical providers.

“Many physicians manage to achieve success in administration...without formal business training.”

Not long ago, physicians who pursued MBAs were sometimes considered turncoats for a perceived inferior devotion to medicine and science. In 2005, the author of an article in *Physician Executive* interviewed 40 MD/MBA students, and about half brought up the concept of feeling like “a traitor to the medical field.”

The students noted that many peers were supportive of their desire for a business degree, but others would regard them as less altruistic and more interested in money. This perception may be changing as MD/MBAs advance into public service roles and make other contributions to medicine from non-clinical positions. However, many physicians manage to achieve success in administration,

15 Top-Ranked MD/MBA Programs

The MD/MBA Association ranked schools offering a combined medical and business degree by analyzing data from the *US News and World Report*.

1. Harvard
2. University of Pennsylvania
3. Stanford
4. Yale
5. Northwestern
6. University of Chicago
7. Dartmouth
8. University of Michigan
9. NYU
10. Columbia
11. UCLA
12. Duke
13. University of Virginia
14. Cornell
15. University of North Carolina-Chapel Hill

entrepreneurship, and the policy realm without formal business training.

Joseph Kim, MD, MPH, the creator of the website NonClinicalJobs.com, explained to *Physician Executive Journal* that an MBA is not always necessary to reach these goals.

“There is a misconception out there in the physician community that you need to have an MBA to succeed in the nonclinical world—or that having an MBA will guarantee you a job in industry,” he says. “Both of those perceptions are incorrect in my opinion.”

He thinks that the best candidates for business programs are either newly minted doctors looking to compensate for limited work experience or established physicians who want to show that they are serious about a career change.

Critics also question the effectiveness of many MD/MBA programs in combining medical and business curriculum. A 2010 survey by then-MD/MBA student Joshua Goldman found that many students felt the coursework needed more integration.

“A lot of programs are still four years of medical school and a year or year-and-a-half of business school. You just kind of squeeze it in, and the two programs don’t talk to each other,” he reported to *Physician Executive Journal*. Recently, though, many MD/MBA programs continue to revise curriculum to better combine the healthcare and business aspects.

SURVEY SAYS

Limited studies exist on the current activities and outcomes of MD/MBA graduates, meaning that most information is self-reported or anecdotal. Goldman’s survey of students and programs is one of the few resources available to gauge perceptions about the combined degrees and their effectiveness.

“It seems that these people are pretty happy, which is interesting in a world where many doctors are frustrated,” Goldman told the journal.

He and a co-author wanted to find out if MD/MBA holders felt the combined degree was worth the time and monetary investment. They were also interested in knowing if the training enhanced their careers and provided the skills they desired and expected.

Essentially, his survey asked, “Is this something that’s useful?”

The individuals he interviewed provided a clear answer: Yes. About 93% of MD/MBA graduates in the survey believed the degree was worthwhile and 89% claimed it offered “significant ROI.”

To define return on investment, Goldman compared the starting salaries of the surveyed MD/MBA graduates with the average salaries of medical specialists within the same time period. Those holding the business degree made \$292,500 on average, while specialists without it made about \$192,200 each year. Even surgical specialists came in about \$45,000 less than MD/MBA holders with a typical salary of around \$247,300.

According to Goldman, two factors influenced the compensation disparity.

First, the business training set them apart from other candidates and allowed them to find management positions—sometimes as their very first job. They received additional pay for the administrative duties they conducted on top of medical practice.

The second factor Goldman claimed to involve entrepreneurial endeavors. Numerous respondents launched or joined other businesses on top of salaried jobs as providers.

“Their physician salary was not necessarily higher just because

they went to business school, but they were doing interesting and creative things with the MBA portion of their degree in addition to practicing,” he explained to *Physician Executive Journal*.

Goldman himself is now a primary care sports medicine physician at the University of California-Los Angeles and the founder of MyHouseCallMD.com.

NOT ALL ABOUT THE BENJAMINS

Although surveys demonstrate higher earnings among MD/MBAs than most physicians, money is not the reason respondents generally claim as their motivation. The majority of doctors with business degrees say that they want to make a difference in medicine.

Maria Young Chandler, MD, MBA, founded one of the earlier MD/MBA programs in America at the University of California, Irvine in 1997, and is also the president of the Association of MD MBA Programs. On the Association’s website, she describes graduates of such programs as a select group of doctors who will “lead our community and the healthcare industry toward a solution to the incredible challenge we are faced with—providing patients with quality care that is financially and ethically responsible.”

Chandler strongly feels that “physicians of the future need business skills to be better leaders as well team members.” In an interview with *The Atlantic*, she posited, “What industry puts somebody with no business training in front of a huge budget? Nowhere but medicine, really.”

The finances of American medicine have been a significant public concern for some time. Statistics show that the cost of healthcare per capita is about 2.5 times more than in other developed countries, like the United Kingdom and France. At \$8,200 for each U.S. citizen annually and growing, medical care eats up nearly 18% of American Gross Domestic Product.

With the complexity of the payer system combined with considerable changes incited by the Affordable Care Act, up-and-coming physicians want to ensure they grasp the business side of medicine. Some even aim to help resolve the financial and systemic challenges of American medicine.

Chandler found that MD/MBAs seem to perform exceptionally in typical residencies in addition to business and policy-oriented routes. She gathered evaluations of alumni of her UC Irvine at residencies nationwide, and discovered that “in almost every category, MD/MBAs were listed as higher: even in non-business areas.” She told *The Atlantic* that there might be self-selection bias involved—meaning dual degree students “may be more competitive and well-rounded to begin with.”

Business training does seem to attract highly motivated and ambitious physicians like Murthy. Chandler is no exception either. Because she was unaware of the few combined programs available during her education, she obtained her MBA through evening classes while also practicing full-time as a pediatrician. In addition to her work at the Association of MD MBA Programs and UC Irvine, she supervises nine Los Angeles nonprofit clinics.

BACK TO SCHOOL

Similarly to Chandler, many physicians pursued their MBA separately from their MD. Some feel that it is better to get a few years of experience as a practitioner under one’s belt and then apply to a two-year business program.

Certainly, medical students should feel no pressure to pursue a

The Growth of the MD/MBA

20 years ago, there were only six combined MD/MBA programs in the United States. Today, there are about 65.

MD/MBAs also tend to end up in leadership roles rather quickly out of residency.

Many peers were supportive of their desire for a business degree, but others would regard them as less altruistic and more interested in money.

About 93% of MD/MBA graduates in the survey believed the degree was worthwhile and 89% claimed it offered “significant ROI.”

The majority of doctors with business degrees say that they want to make a difference in medicine.

While many factors are motivating this growth, a business degree is not appropriate for every physician.

business degree if it does not match their current career interests. Plenty of MBA programs accept doctors who are further along in their careers, if so desired in the future.

Chandler, however, thinks that receiving both sets of training in tandem may help develop a unique perspective on healthcare. Residents can perhaps get a leg up at the very start of their careers by exercising business skills like negotiation.

Either way, the number of MD/MBA holders is unlikely go anywhere but up. Some universities have even begun offering online Healthcare MBAs to meet demand.

While many factors are motivating this growth, a business degree is not appropriate for every physician. Healthcare will always need doctors and scientists who are entirely dedicated to working in the lab or with patients—especially with the ongoing U.S. shortage of specialists. Physicians with MBAs may play a significant role in the future, but they are not the only important role to fill. ■

COMING SOON!

A new career resource from Elsevier, a world-leading provider of information solutions for medical and healthcare professionals.

So much **TALENT**, we had to rename it

ehealthCAREERS.COM

is becoming

 my health**talent**.com

Personalize and optimize your search experience

- Improved functionality with a host of personalization options and alerts
- Individualized search by location, specialty, qualifications, experience level and more
- Integrated with the Elsevier content you respect and trust
- Optimized for any device

Where is the new home of top talent in medicine and healthcare—and where are the top opportunities?

It's all coming soon to myHealthTalent.com!

ELSEVIER |

 my health**talent**.com



Joanna Spenger-Segal, MD, PhD

Work-Family Balance During Training:

Advice from a New Mother

Over the past two months, I have been at boot camp. No, not for grant-writing or board review, but baby boot camp! Our son was born in August, and as of this writing, I remain on maternity leave.

It is common and wonderful for trainees to consider starting a family before their training is complete. When expecting a child, you must make many choices about your training and career goals surrounding the birth. This difficult task involves estimating your future needs, which in many cases may change as things progress with or without unanticipated complications to your health and your personal life.

You will receive plenty of solicited and unsolicited advice as you go through this process. Here is some from my pregnancy and first few months of motherhood.

First, know what privileges your contract or program grants to all pregnant women and new parents. Are you automatically entitled to reduced work hours during your third trimester? Do you have access to paid child care leave? Do you have the ability to return to work part time? Start early in researching this. I also suggest familiarizing yourself with the Family and Medical Leave Act policies, which can be found at www.dol.gov/whd/fmla.

SCHEDULING CHALLENGES

Remember that you do not have to make the same choices as your closest colleagues or the most recent graduates of your training program. There is often (though unfortunately not always) at least some flexibility to the standard leave offered to university staff, particularly if you are willing to take unpaid time off. Speak to many others about their experiences to learn the range of possibilities before deciding what is right for you.

You may face an uphill battle in arranging a child care leave,

particularly a non-standard one. It involves administrative work and interruptions to training schedules, and potentially inconveniences other trainees. The latter can be particularly difficult for clinical trainees, but return the favor in good spirits for your colleagues in the same position, and it will work out fine. Be firm and persistent in your requests for the time off that you need for yourself and your family.

Many trainees have concerns about the consequences of delayed training. Having children will often delay the completion of your training or your tenure clock, by a few weeks to a few years depending on your choices. As women become a larger part of the medical workforce, these “delays” will become so common as to be standard, and you will not feel “left behind” compared to your colleagues. Check back with me in a few years about this, but I have a hunch that the rewards of spending time with my son will far outweigh a few months of delayed training.

During pregnancy, many women need more medical attention than they ever have before. A pregnant woman needs to be especially attentive to her own physical needs. This can be challenging for clinical and research trainees alike, who in many cases are accustomed to skipping meals, spending all day on their feet, and working up to 80 hours a week on irregular schedules. You may find it physically impossible to carry out the duties assigned to you and, in that case, do not hesitate to make changes to your schedule, or even to start your leave early if necessary. You may fear that this is not possible,

“It is common and wonderful for trainees to consider starting a family before their training is complete.”

but once you speak up you will find that it is common.

Combining a fulfilling career with a family is possible, but flexibility is key as you respond to the changing demands of your personal and professional lives. As for me, I arranged a four-month leave from my fellowship training program in Michigan to be with my husband and son. I write to you from Florida, where my husband’s work is now based, and where the three of us are enjoying these precious few months together. More from me on the challenges of dual career families in a future column.

I welcome your comments and questions at sjoanna@med.umich.edu. ■

Joanna Spencer-Segal, MD, PhD, is a second-year clinical fellow in Metabolism, Endocrinology and Diabetes at the University of Michigan, where she participates in the Physician Scientist Training Program in the Department of Internal Medicine.

elevate your path.

No matter the stage of your medical career, we are here to help and guide you. You have many choices to consider and we understand the importance of finding you the right opportunity. Whether it’s locum tenens or permanent opportunities you seek, that is where Medicus Healthcare Solutions can provide personalized, full-service and rewarding career opportunities.

With over a decade of experience in the medical staffing industry, Medicus Healthcare Solutions provides unrivaled service to healthcare professionals through our innovative recruitment strategies over a wide range of specialties. As a nationwide leader with a history of proven success, you can be confident in knowing your personal and professional goals will be met – elevating your path!

medicushcs.com

Contact us at 1-844-217-1221 or
email info@medicushcs.com
to find the right opportunity or have a
conversation to discuss your needs!



OPTIMUM
Permanent Placement Services
A Division of Medicus Healthcare Solutions, LLC



Michelle Y. Rivera-Vega, MD



Choosing Your Mentor

Choosing a mentor will be one of the most important decisions that you will make during your professional career. According to the dictionary a mentor is an experienced and trusted adviser. For some of us, a mentor is someone greatly concerned about your future and will help you succeed. Indeed, mentorship is a two-way street, a personal and professional relationship where a compatible style of communication and collaboration must exist in order to succeed.

A good mentor is someone who is willing to listen and provide his or her unbiased opinion on many topics. It should be someone that makes you feel confident, has empathy as a mentee, and possesses a genuine interest in understanding your issues. A common mistake is to believe that one mentor is enough, whereas

“Even though mentorship is more important during your training years, professional development never stops.”

multiple mentors will only enhance your learning and contribute to the formation of your career. The trick is to identify these people and what type of contribution they will provide to the development of your professional career. For example, a mentor can facilitate the development of a productive colleague network, can help you understand your institution's culture, and can advise you on how to achieve an acceptable work/life balance. Even though academic accomplishments and a well-established research career are important criteria for a mentor, you should also pay attention to his or her experience in directing postdoctoral fellows, successful track record of mentoring trainees, reputation for high standards, enthusiasm for advising fellows, and funding resources.

Tips on How to Develop a Successful Mentor-Mentee Relationship


- Your mentor is human, therefore not perfect. It is unrealistic to expect that he/she will fulfill all the demands regarding your career and personal issues, but they can help you identify others who will be better equipped to help in a specific situation.
- Have clear and open communication. In this technology-driven society it should be easier to make appointments; by scheduling time with your mentor you guarantee yourself their full attention. Be prepared for your meetings, be on time and have a list of topics that you would like to discuss. Come up with deadlines and keep your mentor up to date with your progress or struggles. If for some reason you need to cancel your meeting please make sure that your mentor receives the message, it will avoid unpleasantness.
- Your mentor's time is precious, do not submit “rough drafts” for input; make sure that your draft is presentable and free of typographical errors.
- Accept criticism with grace. Remember, that it is your mentors' job to evaluate your work and progress objectively. In the same manner you should demonstrate a willingness to consider their advice, and be able to defend your position as mature and as educated as possible if you were still to disagree to their suggestion. Regarding disagreement, direct communication is the best option. Electronic communication can be misinterpreted or uncomfortable.

Before choosing your mentor, introspection is advised...and necessary. Before bringing in someone else to help guide your career, first you must identify your personal and professional goals, identify your strengths and weaknesses, clarify the type of research you want to do, identify the set of skills you want to learn, as well as the type of relationship you want to develop with your mentor. The mentor-mentee relationship should be one filled with respect and honesty, and as a mentee you are the one in charge of the success of this relationship.

Even though mentorship is more important during your training years, professional development never stops, and mentorship will always be needed. Engaging peers and colleagues outside of your division or department would be advisable because an outsider perspective might be helpful when confronting a problem or making a decision. Mentoring is a lifelong relationship and as you progress through your career, your needs will change and so will your mentors. It is important to assess your relationship with your current mentor periodically.

Hopefully, this advice will help you find your mentor and build up a successful relationship. As you will no doubt find out, once a mentor, always a mentor. ■

Michelle Y. Rivera-Vega, MD, is a third year fellow in Pediatric Endocrinology at the Children's Hospital of Pittsburgh of UPMC in Pittsburgh. She received a BS in Biology from the University of Puerto Rico, her MD from the Universidad Autónoma de Guadalajara, Mexico, and Fifth Pathway Certificate from Ponce School of Medicine in Puerto Rico.



Live Better. Work Better.

Psychiatry Opportunities!

We are growing! Elliot Health System in southern New Hampshire has Psychiatric opportunities. We are seeking Adult and Child / Adolescent Psychiatrists. We offer a comprehensive benefit package including vacation, CME, and a relocation allowance.

Why New Hampshire?

- No state income tax or state sales tax!
- Less than an hour drive to Boston.
- Forbes magazine recognizes Manchester, NH... “Among the U.S. Cities with the most affordable housing and the lowest cost of living. The Queen City offers the best combination of safety, employment opportunity and general quality of life.”
- Money Magazine annually ranks the area one of the nation's “Best Places to Live.”
- Unlimited cultural activities.
- NH secondary schools are among the best in the nation, and NH has excellent colleges and universities.

Booth 415

Visit our booth at AACAP to enter to win an Apple iPad Mini

To learn more about the Elliot Health System and to apply for a position, please visit us at:

elliottphysicians.org

Or contact: Janelle Chapdelaine
Medical Staff Recruitment
JChapdelaine@Elliot-HS.org
603-540-0121

Elliot Health System

Elliot Health System is an equal opportunity employer.



Michael Merrill and Evan White



Investing in Your Children's Future

Envision the day you finish fellowship, when you make that phone call or go online to set up your student loan repayment plan. As financial advisors, two of the most common questions we field originate from this moment. The first question is, “What’s the best way to pay this back?” This is followed by, “Will I ever get through this and be able to do all the other things that are just as important?”

It’s with those thoughts in mind that we’d like you to consider what you can do to help your children lessen that burden. The cost of higher education is growing, but it’s important to note that it’s running at rates almost double that of historic inflation. When considering retirement, we all understand the importance in investing for our future by using a mix of assets and accounts where

we expect the appreciation to not just match inflation, but really exceed those margins.

By starting early we have the confidence that we'll have what we need when we get there, and we'll be less concerned that money will run out! So, if the cost for higher education is growing that quickly we think it's important to consider what options are available to help meet those educational needs, while making sure the next generation also has a shot at preparing for their own retirement. One of the luxuries of your career as a family practitioner is that you will likely have the ability to prepare for both, and the best thing about educational savings plans is they often add in one or more tax incentives along the way.

There are a number of convenient methods for preparing for future educational expenses. The most common options offer tax-deferred accumulation and tax-free withdrawals for qualified higher education expenses. Depending on your state residence there may be an option for limited state tax deductions upon contribution, so as our clients evaluate means of offsetting taxable income, beyond providing a gift to your children the tax savings is pretty attractive as well! These accounts typically provide a broad selection of investment options for appropriate levels of diversifi-

By starting early we have the confidence that we'll have what we need when we get there, and we'll be less concerned that money will run out!

cation and flexibility within the accounts. Provided you approach these plans with consistency, similar to how you might invest for your retirement, the compounding interest upon interest and the tax-free distributions for qualified higher education expenses you'll put yourself in a great position to help your children pay for their education.

Beyond the common approaches, there are also a variety of other approaches, which may be an appropriate fit for you and your children's planning needs—from pre-paid tuition plans and state bond agreements to insurance-based plans. Each option differs slightly, so it's important to compare and contrast each to fully understand the scope of the investment options, potential tax incentives, and other possible benefits or limitations.

Lastly, the need to cover all the expense isn't always necessary. Sometimes there are other alternative means of paying for tuition—scholarships and endowments come readily to mind—and possibly you feel that your children will better value their education if they have to put in some effort to pay a portion of that cost. There is no right or wrong answer to the level of support you provide. It will ultimately come down to your goals and philosophy on the matter. ■

Michael Merrill and Evan White are financial advisors with the independent financial services firm, Finity Group, LLC.

CHILD AND ADOLESCENT PSYCHIATRISTS

The Kennedy Krieger Institute is an internationally renowned institution that transforms the lives of children and adolescents with disorders of the brain through innovative patient care and groundbreaking research. We are currently seeking superb Child and Adolescent Psychiatrists for our interdisciplinary Psychiatry outpatient programs as well as for our Center for Autism and Related Disorders' interdisciplinary outpatient program. Leadership opportunities are available for exceptional candidates.

These positions offer a mixture of clinical, teaching and research opportunities, dependent on the interests and skills of the faculty member as well as a faculty appointment with the Johns Hopkins University School of Medicine Department of Psychiatry. The Johns Hopkins University School of Medicine faculty rank will be commensurate with experience.

There are excellent benefits, including college tuition remission for dependents (at any college) and tuition remission for faculty members, spouses and dependents for coursework performed at the Johns Hopkins University and the Peabody Music Institute.

Qualifications: BE/BC in Child and Adolescent Psychiatry

Robert L Findling, MD, MBA
Vice President Psychiatric Services and Research
rfindli1@jhmi.edu
The Kennedy Krieger Institute

Apply: <http://careers.kennedykrieger.org>

EOE, M/F/Disability/ProtectedVet

Psychiatry Faculty, Division of Child and Adolescent Psychiatry



JOHNS HOPKINS
MEDICINE

Baltimore, Maryland *Position Type:* Full Time

Job Description:

The Johns Hopkins University Department of Psychiatry, Division of Child and Adolescent Psychiatry is seeking board-certified or board-eligible child and adolescent psychiatrists committed to a career in academic medicine. Successful candidates will be superb clinicians or investigators committed to improving the lives of children and adolescents suffering from psychiatric disorders through direct patient care, research, and/or education.

Open rank, clinical and research faculty appointments within the Department of Psychiatry and Behavioral Sciences are available commensurate with background and experience. Positions have the potential to provide a mixture of clinical, teaching and research opportunities dependent upon interest and skills of the faculty member. Clinical leadership opportunities are available.

The Johns Hopkins University provides excellent benefits including partial college tuition grant for dependents (at any college) and tuition remission for faculty members, spouses, and dependents for coursework completed at the Johns Hopkins University and Peabody Music Institute.

The Johns Hopkins University is an equal opportunity/affirmative action employer committed to recruiting, supporting, and fostering a diverse community of outstanding faculty, staff, and students. All applicants who share this goal are encouraged to apply.

Nearby: Professional sports, strong arts community, boating, sandy beaches, mountains, close to Washington, DC and Pennsylvania.

Qualifications: Board-Certified or -Eligible in Child and Adolescent Psychiatry

Practice Setting: Negotiable

Salary: Competitive and commensurate with experience

Contact: Robert Findling, MD, MBA, Director, Child and Adolescent Psychiatry, The Johns Hopkins University School of Medicine.
Phone: 410-955-2320. Email: rfindli1@jhmi.edu



Alison Kim, PhD

Careers Beyond Clinical Practice

Early-career clinicians devote many extra years to their education and training after college, much of it paid for out of their own pocket. Therefore, for those debating whether to pursue an “alternative” career, the thought can be daunting. Are they even qualified to do anything other than practice medicine? Will all those extra years of education and training go to waste?

The short answer is, *yes*, you are qualified for a non-clinical career and *no*, your education and training will not go to waste. An important first step toward a non-clinical career is to decide which jobs are of interest to you.

- **Administration.** While hospital administration is the classic example, clinician administrators are also found in a variety of other work environments. For example, they may work within federal and state agencies as health scientist administrators and program officers. There are also opportunities in the non-profit sector, within medical associations, think tanks, and foundations.
- **Consulting.** Clinicians are a hot commodity for management and health care consulting firms. Not only do they offer content expertise, but also an on-the-ground perspective on problems related to healthcare. They also tend to be good with people, are intellectually curious, and are strong analytical thinkers—all attributes valued by consulting firms.
- **Communications.** Medical writing, journalism, and publishing are just some of the communications-related areas offering career opportunities. Clinicians’ expertise and perspectives are valuable for identifying hot topics, controversies, and recognizing innovations that have the potential to significantly impact the practice of medicine.
- **Industry.** Pharmaceuticals, devices, and biotech are just some of the industries where clinicians may seek an alternative career. In addition to positions related to research and development, clinicians also work in the medical affairs, marketing, and advocacy departments at various companies. There are also opportunities available for physicians in other industries such as nutrition, agriculture, and health informatics.

Confirming that you are truly interested in an alternative career and identifying a potential career path is half the battle. Once you’ve made your decision, you need to take some extra steps to set yourself up for success on the alternative job market.

- **Identify your transferable skills.** Sure, you’ve trained years and years for the sole purpose of practicing medicine, but that doesn’t mean you haven’t picked up other skills along the way. It’s im-



portant to put a name to these transferable (or “soft”) skills. These might include: strong presenting and writing skills; the ability to analyze and draw conclusions from large amounts of data; communicating complex information in a way that a lay person can understand; leading and managing a team; and the ability to juggle multiple demanding responsibilities at the same time.

- **Seek opportunities to fill in the gaps.** Once you’ve completed an honest inventory of your skills, look for major holes that significantly weaken your resume. For the career path you’re interested in, is there a particular experience or skill that is absolutely critical? This way, before you go on the job market, you can seek out specific experiences that strengthen your appeal.
- **Get another person’s opinion.** You may think you’re underqualified, but everyone else may not. Be sure to get your resume reviewed by a variety of people, including those who know you well and those who know what it takes to succeed in your career of interest.
- **Network.** Who you know is just as important, perhaps even more important, than what you’ve accomplished. After all, when you have hundreds of qualified people applying for the same job and they look the same on paper, a personal reference goes a long way. Maintain the relationships that you already have, and be assertive when there are opportunities to add new people to your network. A great way to do this, of course, is to participate in professional meetings like ENDO. Informational interviews are another way to meet new people while also gathering information about careers you may be interested in. ■

Alison Kim, PhD, is associate director of grant development and strategic research at the Endocrine Society in Chevy Chase, MD.

PracticeUpdate.com

We uncover the most relevant clinical updates in your specialty

ELSEVIER



Joette Katz - Commissioner



Dannel P. Malloy - Governor

DEPARTMENT of CHILDREN and FAMILIES

Making a Difference for Children, Families and Communities

The Connecticut Department of Children & Families has Psychiatry opportunities at the Albert J. Solnit Children's Center (AJSCC), in Middletown and East Windsor, CT.

The AJSCC is a psychiatry teaching facility for child and adolescent psychiatry fellows and is accredited by Joint Commission. AJSCC serves complex youth and families with various neuropsychiatric disorders, and provides state of the art treatment through comprehensive interdisciplinary diagnostic evaluations, pharmacotherapy, individual and family therapy, group and milieu therapy, school and systems interventions. AJSCC has 2 campuses: in Middletown which has 52 inpatient adolescent beds and 24 psychiatric residential treatment facility (PRTF) beds for adolescent girls, in East Windsor which has 38 PRTF beds for adolescent boys. AJSCC is recognized nationally for its prevention and reduction of restraints and seclusions. AJSCC has a competitive training programs including: Yale Child Study Center Child & Adolescent Psychiatry Training Program, University of Connecticut Child & Adolescent Psychiatry Training Program and Yale Law and Psychiatry Training Program for Forensic Fellowship. AJSCC has training programs with various universities for other clinical and nursing disciplines. AJSCC has 10 child & adolescent psychiatrists, 4 pediatric/medical staff, 6 child & adolescent psychiatry fellows and 1 forensic fellow.

The AJSCC is seeking a gifted child and adolescent psychiatrist for a Medical Director (Chief of Psychiatry) position. This position will also serve as Associate Training Director for Yale Child Study Center / AJSCC Psychiatry Residency. The Director will have overall responsibility for the clinical and medical functions of the facility as well as training of the child psychiatry fellows and is a member of the Executive Committee and Governing Body, Chair of Medical Executive Committee and Head of Medical Staff Organization. We envision hiring a Medical/Associate Training Director with a track record of excellence in leadership administration, clinical innovation and outstanding training and education mentorship. Preference will be given to candidates who have strong interpersonal skills, experience in working with interdisciplinary teams, collaborative approach with hospitals and emergency departments and experience with Joint Commission and CMS. Requirements: Five (5) years of experience in a hospital, clinic or correctional facility as a staff psychiatrist. Board Certification in Child & Adolescent Psychiatry and CT Medical License.

The AJSCC is also seeking a Principal Psychiatrist in East Windsor, CT. Note: Qualified applicant will have community faculty appointment with Yale Child Study Center, Yale University School of Medicine. Applicants with completed general and child and adolescent psychiatry training from ACGME accredited program preferred. Responsibilities will include but not be limited to: psychiatric admissions, participation in treatment teams and writing progress notes, discharge summaries, participating in interdisciplinary teams, participate in CME activities and Neurology Rounds. General Experience: Incumbents must possess and retain certification as a specialist in psychiatry by the American Board of Psychiatry and Neurology or board certification in Adult or Child and Adolescent Psychiatry. Special Requirements: Incumbents must possess and retain a license to practice medicine and surgery in Connecticut. A temporary license may be granted for a period not to exceed one (1) year. Incumbents in this class must possess and maintain eligibility for participation in federal health care programs as defined in 42 U.S. 1320a-7b (f).

Connecticut is an excellent state to raise families and has outstanding schools, colleges and universities. There is an excellent salary, medical/dental and retirement benefit package and paid sick/vacation/personal leave for this position. Interested applicants should contact Victoria Brothers, Human Resources Specialist at the CT DCF, by email: victoria.brothers@ct.gov or phone: 860-704-4224. Mailing address AJSCC – South Campus, 915 River Road, Middletown, CT 06457.

The State of Connecticut is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities, and persons with disabilities.