WHAT TO LOOK FOR WHEN SCREENING A PHYSICIAN

By Melissa Byington, President, CompHealth

Hiring a physician for permanent or locum tenens positions can be challenging. You want to find someone with the right skill set and certifications, but you also need someone who’s a great cultural fit for your facility.

Fortunately, work histories, CVs, and certifications offer a glimpse into physicians’ lives and can help you narrow down candidates for different positions. Here are some things to look for.

Red Flags on a Resume

When you’re reviewing a physician’s CV or resume, determine whether anything stands out or needs to be clarified. The following are some red flags you might notice:

- **Work history with employment gaps that don’t make sense.** Likely, the first thing you look at on a CV is work history. If you have a question about a large gap (generally more than six months), ask the physician to explain. If he or she doesn’t have a good reason for unemployment or seems to avoid the question, consider what the physician might be trying to hide or whether he or she is stable enough to accept a new job. It’s important to note that physicians who take locum tenens assignments may only work several times a year and have month-long gaps in between jobs, while others may embark on annual medical missions and leave their practice for weeks at a time — which are completely acceptable reasons for gaps in work history.

- **CV with frequent jobs in different areas.** Again, locum tenens work explains short assignments throughout the year, often in different parts of the country. But if a physician’s CV indicates he or she has had several new jobs within the past year in the same state or in neighboring states — sometimes within 30 days of each other — red flags should go up.

Continued on page 2
Continued from page 1

- **Medical school and qualifications that don’t seem legitimate.** Internationally trained physicians are often highly qualified, especially those who received their education in Israel, England, Singapore, or other countries with universities affiliated with American universities, such as Duke and Harvard. However, if you research the physician’s medical school and certifications and can’t find much information (or can’t get in touch with a reference there), you may want to ask more questions before hiring this physician at your facility. Make sure the school is an approved Accreditation Council of Graduate Medical Education (ACGME) residency/fellowship facility and that training is up to U.S. standards.

- **Education that doesn’t match the physician’s work history.** If a physician is trained as a surgeon but has worked for the last 10 years as a family practitioner, it may indicate that he or she has skeletons in the closet from time as a surgeon or was unable to renew a license. Ask the physician why he or she now works in a different field before passing the CV along to a client.

**Warning Signs When Screening a Physician**

Once you’ve checked the physician’s CV and are calling references and verifying employment records, potential issues may pop up. Watch for any of the following when speaking to former employers or instructors about the physician:

- **Resignation or termination from medical staff.** Sometimes quitting a job can be explained simply: The physician wasn’t the right cultural fit, he or she was dealing with an emergency and had to leave, or a health issue forced him or her to resign. However, terminations should be investigated thoroughly, especially if the physician violated laws or hospital procedures.

- **Problems in applicant’s professional practice.** Is the physician difficult to get along with? Does he or she have unresolved debts or an inability to manage overhead costs? Ask the physician’s practice partners if you’re concerned about anything that comes up.

- **Past or pending medical staff organization or professional society investigations.** Regardless of the time between proceedings, it’s a good idea to check into any past investigations in which physicians violated rules or regulations of societies or organizations they belonged to.

- **Licensing board issues.** Physicians who move within the same state frequently or from state to state, changing jobs within a month or so, may be trying to avoid the licensing board. Additionally, any past licensing board issues that come up when you screen the physician should be reviewed.

- **Claims or investigations of fraud or abuse from third-party payers or government entities.** Any physicians who have inappropriately billed Medicare or Medicaid for services or claimed to see a patient when a nurse practitioner or physician assistant did, billing higher as a result, may be investigated for fraud or abuse. Pay attention to any prior claims, and call one of the physician’s former coworkers, if necessary, to get more information.

Continued from page 1

- **Medical school and qualifications that don’t seem legitimate.** Internationally trained physicians are often highly qualified, especially those who received their education in Israel, England, Singapore, or other countries with universities affiliated with American universities, such as Duke and Harvard. However, if you research the physician’s medical school and certifications and can’t find much information (or can’t get in touch with a reference there), you may want to ask more questions before hiring this physician at your facility. Make sure the school is an approved Accreditation Council of Graduate Medical Education (ACGME) residency/fellowship facility and that training is up to U.S. standards.

- **Education that doesn’t match the physician’s work history.** If a physician is trained as a surgeon but has worked for the last 10 years as a family practitioner, it may indicate that he or she has skeletons in the closet from time as a surgeon or was unable to renew a license. Ask the physician why he or she now works in a different field before passing the CV along to a client.

**Warning Signs When Screening a Physician**

Once you’ve checked the physician’s CV and are calling references and verifying employment records, potential issues may pop up. Watch for any of the following when speaking to former employers or instructors about the physician:

- **Resignation or termination from medical staff.** Sometimes quitting a job can be explained simply: The physician wasn’t the right cultural fit, he or she was dealing with an emergency and had to leave, or a health issue forced him or her to resign. However, terminations should be investigated thoroughly, especially if the physician violated laws or hospital procedures.

- **Problems in applicant’s professional practice.** Is the physician difficult to get along with? Does he or she have unresolved debts or an inability to manage overhead costs? Ask the physician’s practice partners if you’re concerned about anything that comes up.

- **Past or pending medical staff organization or professional society investigations.** Regardless of the time between proceedings, it’s a good idea to check into any past investigations in which physicians violated rules or regulations of societies or organizations they belonged to.

- **Licensing board issues.** Physicians who move within the same state frequently or from state to state, changing jobs within a month or so, may be trying to avoid the licensing board. Additionally, any past licensing board issues that come up when you screen the physician should be reviewed.

- **Claims or investigations of fraud or abuse from third-party payers or government entities.** Any physicians who have inappropriately billed Medicare or Medicaid for services or claimed to see a patient when a nurse practitioner or physician assistant did, billing higher as a result, may be investigated for fraud or abuse. Pay attention to any prior claims, and call one of the physician’s former coworkers, if necessary, to get more information.

Continued from page 1

- **Medical school and qualifications that don’t seem legitimate.** Internationally trained physicians are often highly qualified, especially those who received their education in Israel, England, Singapore, or other countries with universities affiliated with American universities, such as Duke and Harvard. However, if you research the physician’s medical school and certifications and can’t find much information (or can’t get in touch with a reference there), you may want to ask more questions before hiring this physician at your facility. Make sure the school is an approved Accreditation Council of Graduate Medical Education (ACGME) residency/fellowship facility and that training is up to U.S. standards.

- **Education that doesn’t match the physician’s work history.** If a physician is trained as a surgeon but has worked for the last 10 years as a family practitioner, it may indicate that he or she has skeletons in the closet from time as a surgeon or was unable to renew a license. Ask the physician why he or she now works in a different field before passing the CV along to a client.

**Warning Signs When Screening a Physician**

Once you’ve checked the physician’s CV and are calling references and verifying employment records, potential issues may pop up. Watch for any of the following when speaking to former employers or instructors about the physician:

- **Resignation or termination from medical staff.** Sometimes quitting a job can be explained simply: The physician wasn’t the right cultural fit, he or she was dealing with an emergency and had to leave, or a health issue forced him or her to resign. However, terminations should be investigated thoroughly, especially if the physician violated laws or hospital procedures.

- **Problems in applicant’s professional practice.** Is the physician difficult to get along with? Does he or she have unresolved debts or an inability to manage overhead costs? Ask the physician’s practice partners if you’re concerned about anything that comes up.

- **Past or pending medical staff organization or professional society investigations.** Regardless of the time between proceedings, it’s a good idea to check into any past investigations in which physicians violated rules or regulations of societies or organizations they belonged to.

- **Licensing board issues.** Physicians who move within the same state frequently or from state to state, changing jobs within a month or so, may be trying to avoid the licensing board. Additionally, any past licensing board issues that come up when you screen the physician should be reviewed.

- **Claims or investigations of fraud or abuse from third-party payers or government entities.** Any physicians who have inappropriately billed Medicare or Medicaid for services or claimed to see a patient when a nurse practitioner or physician assistant did, billing higher as a result, may be investigated for fraud or abuse. Pay attention to any prior claims, and call one of the physician’s former coworkers, if necessary, to get more information.

Continued from page 1

- **Medical school and qualifications that don’t seem legitimate.** Internationally trained physicians are often highly qualified, especially those who received their education in Israel, England, Singapore, or other countries with universities affiliated with American universities, such as Duke and Harvard. However, if you research the physician’s medical school and certifications and can’t find much information (or can’t get in touch with a reference there), you may want to ask more questions before hiring this physician at your facility. Make sure the school is an approved Accreditation Council of Graduate Medical Education (ACGME) residency/fellowship facility and that training is up to U.S. standards.

- **Education that doesn’t match the physician’s work history.** If a physician is trained as a surgeon but has worked for the last 10 years as a family practitioner, it may indicate that he or she has skeletons in the closet from time as a surgeon or was unable to renew a license. Ask the physician why he or she now works in a different field before passing the CV along to a client.

**Warning Signs When Screening a Physician**

Once you’ve checked the physician’s CV and are calling references and verifying employment records, potential issues may pop up. Watch for any of the following when speaking to former employers or instructors about the physician:

- **Resignation or termination from medical staff.** Sometimes quitting a job can be explained simply: The physician wasn’t the right cultural fit, he or she was dealing with an emergency and had to leave, or a health issue forced him or her to resign. However, terminations should be investigated thoroughly, especially if the physician violated laws or hospital procedures.
**MARKET WATCH**

**Days to Fill Position (All Searches) — By Specialty Division**

<table>
<thead>
<tr>
<th>Specialty Division</th>
<th>Advanced Practice</th>
<th>Primary Care</th>
<th>Specialty Care</th>
<th>Surgery</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Number of Filled Searches)</td>
<td>792</td>
<td>1,230</td>
<td>708</td>
<td>469</td>
</tr>
<tr>
<td>Median</td>
<td>93.0</td>
<td>109.0</td>
<td>127.5</td>
<td>115.0</td>
</tr>
<tr>
<td>Average</td>
<td>120.1</td>
<td>170.8</td>
<td>183.5</td>
<td>169.4</td>
</tr>
<tr>
<td>25th Percentile</td>
<td>45.0</td>
<td>48.0</td>
<td>48.0</td>
<td>52.0</td>
</tr>
<tr>
<td>75th Percentile</td>
<td>162.0</td>
<td>225.0</td>
<td>251.3</td>
<td>225.0</td>
</tr>
</tbody>
</table>


---

**WHAT’S NEW AT NEJM GROUP?**

**NEJM CareerCenter Candidate Database Upgrade**

In an effort to improve the candidate search experience on NEJMCareerCenter.org, we’ve redesigned the user interface. We have put user experience at the heart of the new candidate database and designed a streamlined candidate search.

**What Is Changing?**

- **Improved search functionality** including both partial and exact matching and the addition of Boolean search capabilities.
- **View an anonymous version of a candidate’s resume.** This allows you to get more knowledge on a candidate and make a better-informed decision prior to purchase/download.
- **“Email this Resume” feature** — the ability to email a resume directly to your inbox.

If you have any questions or feedback regarding the new functionality, please feel free to email us at ad@nejmcareercenter.org.

---

**Continued from page 2**

- **References who don’t return calls.** It may be hard to get a hold of busy doctors and hospital executives, but those who don’t call back within a few business days may want to stay clear of problems or avoid admitting anything they know about the physician’s past.

- **Jury verdicts or settlements.** Malpractice suits should be investigated and considered before hiring the physician for a new job.

- **Little or no professional liability insurance coverage.** Physicians who have had claims that resulted in a trend of poor clinical practice may be unable to find insurance companies to cover them — or have limited coverage. If you suspect this is the case, get in touch with the physician’s insurance provider for details.

- **Disciplinary actions by hospitals, medical boards, and medical staff organizations.** Investigate all actions facilities or organizations have taken against the physician and determine why he or she was at fault.

- **Poor people skills.** It’s not easy to judge whether a physician is a good fit simply from looking at a resume or speaking with him or her on the phone, but consider the provider’s work experience, ethics, and reasons for applying for a job. If physicians seem difficult to please or arrogant based on conversations with references and your own research, they may not be the best fit, especially for a short-term *locum tenens* assignment.

It isn’t easy to find a qualified physician who fits your organization’s needs and brings a fresh perspective and skill set, but following these guidelines and watching for red flags while screening doctors and reviewing their CVs can help you find the right match.

For more information on credentialing standards, visit the National Association Medical Staff Services (NAMSS) website.
Upcoming Recruiter Meetings and Medical Conventions

Southwest Physician Recruiters Association (SWPRA)
March 2–3, 2017
Denver, CO

American College of Cardiology (ACC)*
Washington, DC
March 17–19, 2017

Association of Program Directions in Internal Medicine (APDIM)*
Baltimore, MD
March 19–22, 2017

American College of Physicians (ACP)*
San Diego, CA
March 30–April 1, 2017

Association of Staff Physician Recruiters (ASPR)
San Diego, CA
April 29–May 3, 2017

PROMOTIONAL NOTES/NEWS
Solution for Recruiting Hospitalists

Among hospitalists, NEJM is considered the most essential journal in print and is one of the most read journals online.*

With ONE simple purchase, we have you covered to reach current and potential hospitalists in print, online, and in direct mail. This offer is only available ONCE a year and includes placement:

- In the April 27 issue of the New England Journal of Medicine
- On NEJMCareerCenter.org
- Alongside clinical content on NEJM.org and JWatch.org
- In the Career Guide: Hospitalist edition — distributed at the Society of Hospital Medicine annual conference and mailed directly to over 30,000 current hospitalist and internal medicine physicians, residents, and fellows†

This offer is only available ONCE a year.

DEADLINE IS APRIL 7!

Contact us at (800) 635-6991 or ads@nejmcareercenter.org to reserve your ad space today!

*Essential Journals Study, Matalia Group
†Counts are estimates only and are subject to change based on data collected and approved by SHM and AMA.