Career Guide
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Beebe Healthcare is a non-smoking and fragrance free system.
Philadelphia is well known for its history and museums. Take a tour to explore the City of Brotherly Love.

Discover the challenges of Returning to Work After a Career Break.

Learn more about Being a Mentor.

Find out why Saving for Retirement should begin sooner than later.
Tour Philadelphia
Enjoy the city of brotherly love’s natural beauty and museums

Philadelphia, the City of brotherly love, located in Pennsylvania, is well known for its historical significance in America’s founding, its museums and “Philly” Cheese steak sandwiches. There is plenty for visitors to do here. Visitors to Philadelphia can walk to most attractions, especially those in Center City. An extensive subway network, trolleys, and a regional rail system (subway tickets start at $2.25 per ride) connects the city. Both the high-speed rail station and international airport are close to Center City and are accessible via public transportation.

Independence National Historical Park (INHP)
The site of many historic events that shaped the course of history for this nation, the Independence National Historical Park is a delightful place to visit for both adults and children. One of the park’s most famous attractions is the Liberty Bell. Recognizable for its crack, the Liberty Bell remains significant today for its message of liberty (freedom). The glass windows that overlook the park provide views of Independence Hall.

Independence Hall is a must-see attraction in the INHP. It is home to the creation and signing of the Declaration of Independence and the Constitution. Independence Hall is one of only 23 World Heritage sites in the U.S. Over 750,000 people visited the hall in 2017. There is also the Independence Visitor Center, the go-to place for visitors to the attraction. A great place to learn more about America’s history.

Longwood Gardens
Spend a day at this horticultural attraction, with 1077 acres of gardens, woodlands, and meadows. There are 20 outdoor gardens, 11,000 specimens of plants as well as meadows and woodlands.

Longwood Gardens debuted the Main Fountain Garden in 2017 with 1,700 jets and spectacular 175 feet high air streams. Prior to its reopening, it was closed for two years of restoration works.

Philadelphia Zoo
The Philadelphia Zoo is an animal lover’s delight for both the young and old. Zoo360 features the world’s first system of see-through mesh trails that cross over pathways. Here, you can connect habitats and encourage animals to travel and explore the entire campus. Other highlights of the zoo include: Key Bank Big Cat Falls, PECO Primate Reserve and KidZooU, a wildlife academy of dynamic displays, rare breeds and hands-on experiences for children. Last year, the Philadelphia Zoo received about 1.1 million visitors.

The Franklin Institute
The Franklin Institute showcases the science involved in every aspect of life - from sports to space and beyond. The facility is one of the leading science centers in the country and a well-known educational and cultural resource for Philadelphia. In addition to the Institute’s 11 hands-on permanent exhibits, there is also a roster of special exhibitions. The Giant Heart is a walk-through human corpuscle that would fit a person 220 feet tall! Other exhibits include Your Brain and the newly reimagined SportsZone.
The science center is also home to the Fels Planetarium, the Tuttleman IMAX® Theater and the Joel N. Bloom Observatory.

271 North 21st Street | Philadelphia, PA 19103 | 215-448-1200

Philadelphia Museum of Art
The Philadelphia Museum of Art has a body of work that is a must-see for art lovers and an important destination for art enthusiasts all around the world. Forever immortalized in the classic Rocky film franchise, this attraction showcases an impressive art collection -- Renaissance, American, Asian, impressionist and contemporary masterpieces - from all around the globe.

The “Rocky Steps” are a popular draw for visitors who want to reenact Sylvester Stallone’s famous on-screen training regimen.

2600 Benjamin Franklin Parkway | Philadelphia, PA 19130 | 215-763-8100
philamuseum.org

Reading Terminal Market
The Reading Terminal Market is one of America’s largest and oldest public markets. A gastronomic delight, the market is housed in a National Historic Landmark building and has been since 1893. This indoor gourmet paradise offers a wide selection of locally grown fruits and vegetables, locally sourced meats and poultry and delicacies from Asia and the Middle East. There are also Amish specialties, plus the finest seafood, cheeses, baked goods, and confections.

Those who love to eat and create food will find everything they need to make a memorable meal: from cookbooks, to kitchenware and then some. For those who just love a great meal prepared for them, Reading Terminal houses a wide variety of restaurants.

51 North 12th Street | Philadelphia, PA 19107 | 215-922-2317
readingterminalmarket.org

National Constitution Center
Dedicated to the U.S. Constitution, visitors to the National Constitution Center can begin their journey with Freedom Rising, a 17-minute, live theatrical production about the American quest for freedom. Visitors can then explore the museum’s interactive main exhibit, The Story of We the People. There is also an opportunity to get your picture taken with the Founding Fathers in Signers’ Hall, featuring 42 life-sized statues of the men who were present for the historic signing of the Constitution.

525 Arch Street | Philadelphia, PA 19106 | 215-409-6600
constitutioncenter.org

Please Touch Museum
For families with children, the Please Touch Museum in Fairmount Park’s National Historic Landmark Memorial Hall, offers play-based learning experiences across more than
60,000 square feet of interactive exhibits. General entrance fees include admission to special temporary exhibits, hands-on daily programming, original theatrical performances, and art-making creative spaces.

Barnes Foundation
Located on Philadelphia’s Benjamin Franklin Parkway, the Barnes Foundation houses one of the finest collections of impressionist, post-impressionist and early modern paintings in the world. The foundation owns more than 4,000 objects, including 900 paintings worth about $25 billion. Its collections include 181 Renoirs, 69 Cézannes, 59 Matisses and 46 Picassos. It also boasts works by Van Gogh, Monet, Manet, Degas, Seurat and Modigliani. The impressive collection includes not only American paintings but African sculpture and Native American textiles, jewelry and ceramics. All exhibits are presented in distinctive arrangements in 26 intimate rooms fashioned in the style of Dr. Albert C. Barnes, an artist, art collector and inventor.

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thinkkc.com/with/kansashealthsystem

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There are many reasons why physicians take career breaks. Those reasons can include, as they do for other professionals, home life circumstances such as family leave, personal health or caring for a family member full-time.

Physicians may also take a break from practice for reasons unique to the medical profession; for example, to pursue a research post, undertake charitable work overseas or take an approved leave of absence in support of a national or international activity or organization.

The problem of burn-out, while not unique to physicians, does create another reason for physicians to step away from medicine. A 2016 survey for The Physicians Foundation’s Survey of America’s Physicians found 49 percent of respondents said they often or always experience feelings of burnout.

Whatever the circumstances that led to the career break, physicians can face tough challenges re-entering the profession. Part of the reason physicians face such challenges when re-entering the profession is because of the lack of national standards or guidance for returning physicians. The AMA has worked with the Federation of State Medical Boards and the American Academy of Pediatrics to promote consensus and drive national standards and processes around physicians returning to work after a career break.

However, the picture remains very patchy. The AMA has found that only 41% of state medical boards have a policy on physician re-entry. Of those that do, different states have different definitions of what constitutes a “career break”. And reentry requirements differ widely from state to state.

Be prepared for a lot of paperwork

At a minimum, it is likely you will need to provide letters of recommendation and complete numerous forms. Further, be prepared to pay various registration fees. Depending on where you live, you may also need to take assessment tests and/or undergo a retraining program or proctorship.

If you can, plan ahead

If possible, physicians contemplating a career break should make themselves aware of reentry regulations in their state (or state of likely reentry to the profession) before taking a break. This means forethought when initially making the break, so that during your break you can continue with activities that will help you reenter the profession when you are ready to do so. This can involve several hundred dollars per year and time spent taking Continuing Medical Education (CME) courses to keep your license current. While this might not be possible for physicians taking unexpected breaks or working abroad, for those taking a career break to care for relatives or raise children, it may be possible to maintain licensure and keep up to date with continuing professional education. However, even then, the path isn’t always as straightforward as, perhaps, it ought to be.

Consider paying for a return to work program

Not only do you need to demonstrate your competence to the medical board and any potential employers, you need to satisfy
Continuing to work in some form of part-time practice is the best way to avoid many of the headaches associated with reentry. A part-time position is also a great way to ease yourself back into work gradually. Working part-time has many advantages, giving you the time to combine part-time work with study and other programs required to refresh your skills and update knowledge. Even if part-time work isn’t your long-term goal, consider applying for part-time positions as a way to reenter practice. It opens up more opportunities for you and it’s worth remembering that part-time positions can often become full-time positions.

Finding the right role

While taking a career break doesn’t have to mean the end of your medical career, it is, nonetheless, important to recognize that things aren’t going to pick up where they left off. Be realistic when looking at positions. While there is no harm applying for positions at the same seniority as you had at the beginning of your break, you should also consider – and be prepared to accept – a more junior role. What’s more, you should be prepared that any roles you are offered may be contingent upon you undertaking a retraining program, perhaps at your own cost.

Work part-time

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Your CV: Focus on the positives

When it comes to applying for a suitable role, keep your time out of the profession to a single line on your CV. You need to be honest about time spent out of practice, but your CV isn’t the place for protracted explanations. One line with the dates and a concise description is enough. Use your cover letter – or your interview – to expand on your reasons for the break and, most importantly, your desire to return to practice.

The interview: prepare to deal with objections

In an article in the New York Times, Pauline W. Chen, M.D. talks about a deep-seated reluctance in the profession to admit to...
taking career breaks. Chen suggests that, despite record numbers of doctors choosing to take time off, there is still a stigma in medicine around taking career breaks. It is therefore important to prepare how you are going to talk about and answer questions about the time you have spent out of the profession.

The best way to challenge and overcome any possible stigma is to be open about your reasons for choosing to take the career break and the particular challenges you were facing. You don’t need to give excessive detail about time spent outside the profession, unless it is pertinent to your professional skills, so if you find the conversation veering in this direction, refocus the discussion onto your reasons for wishing to re-enter the profession and your qualifications for doing so.

The best way to counter objections is to demonstrate your professional skills and experience and to genuinely express your drive and desire to reenter medicine.

It can be difficult to reestablish your career after a significant break. A lot will depend upon your personal circumstances and where you live, but resources are available to help you. For further information, check out the AMA Physician Reentry to the Workplace Project resources as a starting point.

Whatever your personal circumstances, however, one thing is clear: patience and determination are going to be your two greatest assets as a physician seeking to return to practice.

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How to: Explain a gap in your CV, Michael Cheary. - Reed.co.uk
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Being a Mentor

Anyone who has enjoyed the experience of being coached by a sympathetic and knowledgeable mentor knows how special, and beneficial the mentor-mentee relationship can be. There are many powerful reasons to become a mentor.

The main attraction is, of course, helping others just starting out in their careers to excel. Sharing the knowledge you have picked up during your own path can give meaning to your own career trajectory, your self-worth and the value you derive from your job. The mentoring relationship also has an important role to play in mitigating the causes and effects of physician burnout for both parties.

Mentoring holds a special attraction for women and minorities who have advanced in their own careers because they can help promote greater diversity in the medical field by helping young people overcome the challenges they themselves faced.

A good mentor-mentee relationship also provides a valuable opportunity for reverse mentoring; helping the more experienced physician to stay in touch with current thinking and language, discuss new trends in technologies and processes, as well as to build and maintain relationships with the younger generations entering the profession.

The Qualities of a Good Mentor

Physicians who have risen to the top of their institution or area of clinical expertise will undoubtedly attract a fair number of younger interns and physicians who would like to be mentored by them. This is no guarantee, however, that the physician will make a good mentor.

While reputation is certainly important, the personal and behavioral characteristics of a physician can play an even more significant role in determining the success of a mentor-mentee relationship.

Having an open mind and a willingness to help others succeed are essential characteristics for any mentor. The ability to build a good rapport with students and junior members of staff is also important.

Time management can also be critical - mentors need to be available to their mentee. It can work well if both parties are able to schedule a regular time to meet, listen and talk through their concerns away from the workplace. It is ideal if you can make this a regular occasion; for example, lunch on the first Friday of every month. While making the time might seem like a challenge in an already over-stretched schedule, the benefits that mentoring offers makes finding time well worth the effort.

Mentoring and Diversity

The mentor relationship offers more than straight-forward technical, clinical and career guidance. Mentors have an important role to play in offering emotional support and guidance. This is certainly true when race and gender come into play. As we've already noted, mentoring has an important role to play in promoting diversity in medicine.

Physicians have to cope with many stressors. Learning to face down racism and/or sexism on top of the other challenges of the job can exacerbate feelings of physician burnout. The support and guidance of a senior staff member who understands these additional challenges can be critical for young medical students.

Writing in STAT, Jennifer Adaeze Okwerekwu relates the story of the racism she experienced during her medical practice. She cites Dr. Sue Taylor, a former medical director of palliative care for Tucson Medical Center in Arizona, who made the
point, “if students targeted by racial aggression don’t see their mentors actively moving to curb racism, that sends a powerful message.” Corporate civility coach, Sue Jacques, suggests that mentors should prepare themselves by creating a guiding set of principles that summarize how you will treat others and how you expect to be treated yourself. She says pre-determining these standards will help you deal with awkward experiences with grace.

Tips for Mentoring Success
Being a mentor requires you to exemplify model behavior and make good choices, Jacques states. Showing leadership and acting as a role model at all times is part of a senior physician’s responsibility. Emotional capacity is also important to the success of the mentoring relationship. A study by Dunn and colleagues identifies self-disclosure as an important attribute within the relationship.

Perhaps the most important tip for a successful mentoring relationship is to talk about both parties’ expectations of the mentoring relationship from the start. Don’t overpromise or set unrealistic expectations; be open about what you both are able to commit to.

A mentor’s role is to encourage self-empowerment. Depending on which stage a mentee is in their career, the mentor may have a huge potential impact on the development and trajectory of the mentee’s career plans. The mentor’s job is never to direct - but instead, to listen, share their experiences, talk through the options and suggest possibilities, never forgetting that ultimately the mentee has to be responsible for his or her own career.

Finding a Mentee
Senior physicians at the top of their fields may find themselves approached to be a mentor quite regularly. In these instances, the key to determine who to mentor are those students with whom you have a natural rapport and will be able to create value through your relationship. Some teaching facilities have a program to match interns with senior physicians, so the decision is removed from the physicians’ hands.

If neither of these circumstances apply to you, there are database matching services which can put would-be mentors and mentees in touch with each other. The American College of Physicians (ACP)’s Mentoring Database is a good place to start. The American Medical Women’s Association (AMWA) also operates a mentoring database.

If you don’t have time to commit for an extended period, you may wish to consider reaching out to younger generations before they make the educational choices that will help them pursue a career in Medicine. The Doctors Back to School and Mentoring in Medicine programs reach out, particularly to under-represented black and ethnic minority school age kids, to help open their eyes to the possibility of a career in medicine and encourage much-needed diversity in the profession.

To learn more about becoming a mentor, please visit:
- acponline.org
- amwa-doc.org/doctors/become-a-mentor
- ama-assn.org/content/doctors-back-school-program
- medicalmentor.org/about-us
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Becoming a Physician Mentor, Sue Jacques; Physicians Practice (Feb 20, 2013) - physicianspractice.com

Finding a Mentor in Medicine, American Academy of Family Physicians; aafp.org

What happened when I talked about what others ignore - racism in medicine, Jennifer Adaeze Okwerekwu; STAT (April 27, 2016) - statnews.com

ABOUT THE AUTHOR

Melanie Grano is a freelance business writer and 20-year Journalism veteran who regularly contributes to career-based publications, including ThirdCertainty and Computer Times.
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Current Penn State Health expansion plans include building a new hospital in Cumberland County, PA and Lancaster County, PA as the system continues to grow.

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Questions can be emailed to forstl@ccf.org

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Retirement planning is an essential but much under-appreciated part of life for any profession. For physicians, planning for retirement presents its own particular challenges, including the high rates of burnout and the high debt levels upon entering the profession.

The 2016 Survey of America’s Physicians: Practice Patterns and Perspectives conducted for The Physicians Foundation by Merritt Hawkins reported that 46.8% of physicians plan to accelerate their retirement plans in order to retire early. This is an increase in the number of physicians who reported that they planned to do so compared to the previous survey in 2014. At the same time, a greater number of physicians are continuing to practice beyond the traditional retirement age of 65.

This uncertainty about projected retirement age can make planning for retirement difficult. For a physician just out of medical school, thinking about possible burnout or future retirement isn’t at the top of the agenda; there are many competing demands for their salary following years of accruing student debt. However, successful planning that allows for much-needed flexibility requires physicians to start saving for their retirement as early as possible.

The Importance of Savings

Medscape’s 2017 Physician Compensation Report found that the average income for all physicians in the report has risen steadily since 2011. It states average income rose to $294,000 in 2017. With compensation packages of this kind, retirement planning should be straightforward.

However, the reality isn’t so simple. According to the AMA Insure, the average student loan debt a medical student graduated with in 2012 was $166,750. The Association of American Medical Colleges (AAMC) has found that 79% of medical school graduates carry $100,000 or more of education debt.

There are many competing demands on a physician’s salary, including malpractice insurance, buying a home and the cost of raising a family. Added to this, a physician typically doesn’t start achieving higher rates of income until well into mid-career. For those coming late to the profession, the limited time available for paying into a plan creates even more of a challenge.

Given the way pension saving works, a lack of investment into pension schemes and the loss of the potential compound interest during these early years of a career can create a serious hole in pension funding.

Options for Employed and Self employed

Increasing numbers of physicians are turning to employment rather than self-employment, as the options for pension planning and employer contributions are more readily available.

The Medscape Physician Compensation Report 2016 found that 66% of employed physicians had a retirement plan with employer match, compared to just 39% of self-employed physicians. Those benefitting from retirement plans without employer match was found to be 27% for employed physicians and 25% for self-employed physicians. The findings, while encouraging for the majority of employed physicians, highlight
Self-Employed Pension Planning

The pension plans available differ for employed and self-employed physicians as well as for physicians working in government facilities and for-profit healthcare facilities.

Self-employed physicians will first need to make the decision about whether they should choose a tax-deferred retirement plan or a tax-qualified pension plan. Plans such as a 401(k) are tax-deferred plans which enable self-employed physicians to defer up to $18,000 on a pre-tax basis. This rises to an allowance of $24,000 over the age of 50. After the age of 59½ qualified distributions are taxed as ordinary income.

The most common form of tax-qualified pension plans for self-employed physicians are defined benefit plans, such as the cash balance plan. These provide the option of a lifetime annuity, but via an individual account for each covered employee, complete with a specified lump sum. They offer a higher maximum contribution rate than a 401(k) plan; in 2017, a maximum contribution was $149,203 versus a 401(k)’s maximum contribution of $60,000. Contribution limits vary by age, but this type of plan need not necessarily be an alternative to a 401(k) plan; it is possible to own both plans for additional future security.

Employed Pension Planning

If employed by a facility or an organization, the physician will need to choose whether to use the pension savings plan offered to them. It is important to seek expert independent financial advice early in your career to ensure that you choose the right plan and secure the necessary flexibility further down the line.
by the employer or to seek an alternative. If the employer is offering to make contributions, this choice is an easy one; the physician will want to take advantage of this significant benefit and use the employer’s plan.

This is likely to be:

- a 401(k) plan, a defined benefit plan that for-profit facilities offer;
- a 403(b) or 457(b) tax-deferred retirement plan offered by non-profit (government or non-governmental) organizations; or
- an Individual Retirement Account (IRA).

Each type of plan has its own characteristics, so it is important to seek expert independent advice to determine which option on the table is right for your retirement goals and whether the retirement plan your employer offers should be supplemented by additional arrangements in order to achieve those goals.

For those physicians choosing to pay into an employer’s plan, this doesn’t – and shouldn’t – preclude the possibility of making additional arrangements beyond the employer’s scheme; for example, making further savings contributions to tax-efficient investments in taxable accounts, or making further contributions into a private defined benefit plan.

It is important to seek expert and independent investment advice. However, by far the most important decision that a physician can make when planning their retirement savings is to start preparations as early as possible.

Sources
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The LSU Health Sciences Center in Shreveport, Louisiana (LSUHSC-Shreveport) seeks a Department Head/Chair of the Department of Family Medicine & Comprehensive Care. The new Chair will provide leadership to the Department with the development and implementation of a dynamic vision for its future, ongoing evolution and success of LSU Health Shreveport. The Chair will work towards transforming primary care and promoting population health to prepare students and residents for the future.

The new Chair will serve as the chief administrative officer for the Department of Family Medicine & Comprehensive Care and reports directly to the Dean of the LSU Health Shreveport School of Medicine. Responsibilities include providing leadership to the Department, implementing and expanding programs of excellence in teaching, research and service in the School of Medicine and the Ochsner/LSU Health Shreveport hospitals in Shreveport and Monroe. The Chairman will be responsible for all aspects of faculty and staff recruitment, professional development and proper administration of all fiscal matters for the Department to ensure the best utilization of all allocated funds and resources.

The Chair serves as a collaborative member of the institutional leadership team, conducts original research and maintains intramurally-funded research programs. The Chair serves as the spokesperson to the Dean in matters of faculty concern and development, and works with the faculty to provide courses to Medical, Graduate and Allied Health students.

The successful candidate must have proven experience as a leader who can inspire faculty and staff to work together to develop future leaders in the Department and the specialty of Family Medicine. It is also important that the candidate possess strong management skills with an ability to grow revenues and meet budgets, as well as excellent communication skills and the ability to work collaboratively with a broad range of constituents both internally and externally.

In addition, the Chair will oversee, coordinate and encourage research within the Department. Candidates must have a Medical Degree, be board certified by the American Board of Family Medicine and have a distinguished record of excellence in scholarly research, clinical service and academic administration. Candidates must have a firm commitment to the education of residents and medical students, and qualify for the rank of Professor of Family Medicine & Comprehensive Care. Eligibility to obtain a Louisiana Medical License is required.

Qualified candidates may e-mail their curriculum vitae to Carolyn Winner, cwinne@lsuhsc.edu. Review of applicants will begin immediately and will continue until the position is filled.

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