ARTICLE HIGHLIGHTS:

•  Should You Consider a Locum Tenens Career?
•   Fellowship: It’s a Wonderful World
•  CV Potential: Build Your Best Curriculum Vitae
•  Publish, Publish, Publish: Writing as an Important Early-Career Step
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Should You Consider a Locum Tenens Career?  
Fellowship: It’s a Wonderful World  
CV Potential: Build Your Best Curriculum Vitae  
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Should You Consider a Locum Tenens Career?
Why more and more physicians are doing just that

Placeholders, free agents, locum tenens... no matter the name, a physician filling in for another physician has been a common practice (and a professional courtesy) for a long time. Naturally, physicians retire, resign, and get fired. You need vacation and personal time, and even sick leave and maternity leave.

Staffing shortages are the norm these days and physician turnover is a huge expense for hospitals, clinics, and practices alike. Regardless of why or how a physician vacancy exists, maintaining quality of patient care is vital—so healthcare facilities are chronically hiring part-time or temporary “locum tenens” physicians to fill the gap.

WHY DO PHYSICIANS WANT TO WORK IN LOCUM ASSIGNMENTS?
Early on, the locum tenens industry was paved by doctors who were retired (or semi-retired) but weren’t ready to hang up the practice of medicine altogether.

These days, physicians at all career levels cite good reasons to work in temporary assignments: A more defined or flexible work schedule (which is really great if you have young children at

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home). Entrepreneuring physicians can dabble in other areas and keep practicing medicine. A change of scenery and a change of pace come with the territory (and are a good way to counter physician burnout). And the list goes on...

Locum tenens isn’t just for mid-career and seasoned (retiring) physicians: younger physicians are taking locum assignments now, too.

Nearly 21% of locum tenens physicians begin working in temporary assignment right after they complete their training—and why not? You’ve spent years and years in training and naturally want to kick some tires and try out a few practices before you make a decision about a long-term job. A temporary assignment lets you pick and choose your working hours. Locum tenens even lets you travel, sometimes to faraway places.

CAN LOCUM TENENS PHYSICIANS FILL THE GAP BETWEEN SUPPLY AND DEMAND?
The Association of American Medical Colleges says full implementation of the Affordable Care Act combined with the rising age of the American population means that physician demand will exceed supply by an estimated range of 46,000 to 90,000 by the year 2025. Can locum tenens physicians help fill the gap? Increasingly more of you think so. In a recent survey, almost 16% of clinicians say they intend to work in a locum tenens capacity for 11 years or more, while 9% intend to pursue locum tenens work as a long-term medical career. Wait, locum tenens full time? Yes, a lot of physicians are doing it. Fed up with the “business” of medicine, they’re becoming free agents, full time. Either way, all specialties are in demand for locum tenens assignments. And if you’re a hospitalist, emergency medicine physician, primary care doctor, or surgeon you can pretty much write your own ticket in the locum world.

Howard Rodenberg, MD MPH, former Kansas State Health Director and columnist for the Journal of Emergency Medical Services (JEMS), wrote about his own locum tenens “Rent-A-Doc” adventures on his Writing with Scissors blog. Turns out locum tenens wasn’t really for him, but it was great for his ego: “As one of a relative handful of residency-trained, board-certified emergency physicians, I’m fortunate to be a relatively hot commodity. This is why, after posting my resume online a few months ago, I had forty-three different recruiters from thirty-one different agencies (believe me, I counted) all vying to be my new best friend.”

If you’re looking for a flexible, higher-paying lifestyle, “filling in” may be a new way of life for physicians.

The medical profession is full of uncertainty and politics and locum tenens isn’t wholly different, but being a “free agent” can be a refreshing change. Val Jones, MD, published a frankly honest comprehensive locum tenens guide for physicians on KevinMD.com that generated a nice, interdisciplinary discussion about temporary work that you’ll find helpful. What’s your take on working as a locum tenens physician? Let us know at talentfinder@doximity.com.

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Joel Davis is the Vice President of Talent Products at Doximity, the largest and fastest-growing online network of healthcare professionals, used by 30% of U.S. physicians. Prior to Doximity, Joel worked as a software engineer and technology consultant, helping design novel solutions to inefficiencies in the healthcare industry. Joel holds an M.P.H. and M.B.A. from the University of California, Berkeley, as well as a B.S. in Computer Science from Washington University in St. Louis. You may contact him at joel@doximity.com for feedback.

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Cardiac Electrophysiologist/ Program Director

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Fellowship is an incredible time for exploration and self-discovery. It’s a time in your life which you can never get back, so make sure to take full advantage. Here are some tips to ensure that your training experience is the best one yet.

1. HAVE AN OPEN MIND
You may enter fellowship believing that you are destined to be a particular type of specialist, but keep your options open. There are so many aspects of cardiology that you may not have discovered yet, and this is the best time to do so. Depending on where you do your residency, there usually aren’t many opportunities to truly learn all that the field has to offer. Spend your time learning about interesting conditions that you aren’t familiar with. Always look to expand your horizons and challenge yourself. You have the rest of your life after graduation to decide on your niche.

2. START RESEARCH EARLY
Many fellowship training programs have research time built into your schedule, typically after the first year. This should not mean that you start looking for a research project in the beginning of your second year. Keep your eyes open to interesting projects and find something that excites you. Start looking for a mentor early on in order to find a good project. The earlier you start your research, the more productive you will be with your research time (i.e., submitting a publication or presenting at a conference). Make this your goal before you graduate.

3. DO AS MANY ELECTIVES AS POSSIBLE
Fellowship is the best time to learn about all that our wonderful subspecialty has to offer. Cardiology is very exciting and our world is intertwined with many other specialty groups - pediatrics, endocrinology, and surgery. Get to know your colleagues in these other fields, and learn why we make referrals to them. Follow along patients whom we made referrals on to see how they are evaluated and learn how we can improve on co-management of patients. Take part in electives.

4. LISTEN TO YOUR PATIENTS
Being a doctor is a very special profession where we get to hear the intimate stories of each and every one of our patients. Take the time to listen to each one of them carefully. Let your patient’s experiences guide you and your practices. Ask patients about the details regarding both good and bad experiences during their medical care. Learn from the mistakes of others, and ask questions. Each and every story can help guide you into becoming a better doctor.

5. GET TO KNOW YOUR FACULTY
As a trainee you are able to work with many different faculty members. Talk to them about their careers – how did they end up where they are today? Ask them for words of advice regarding your future career. Tell them about your own future goals and aspirations; perhaps they can connect you with others who are doing similar work.

6. ATTEND SURGERIES & PROCEDURES
There is no better way of learning how an inferior petrosal sinus sampling is performed than watching one (or assisting in one) in real time! Surgeries are quite interesting as well, and can help guide you when discussing surgical options and techniques with your own patients.

7. ATTEND CONFERENCES
Learn the dates of all the national conferences, and plan to attend if possible. Learn about the “fellows conferences” that are part of some of the major conferences like the ACC.16 and others. Conferences allow you to keep up-to-date with all things related to cardiology and learn from the leaders in our field.

Last word of advice is to enjoy your training. Even though its hard work, it really is one of the best years of your life.

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strong curriculum vitae takes time and planning to construct. Aspiring physicians and researchers need to present themselves in the best possible light on paper, as the CV is integral to applications for nearly all opportunities. By following a few general guidelines, students and fellows can ensure that their CV stands out in a good way.

MAKE CONNECTIONS
A successful career is not built by one person alone. Mentorships and networking are critical for many aspects of professional development. The right mentor can help you define the proper path and make smart choices when it comes to building your CV, in addition to providing letters of recommendation.

Sima Saberi, MD, an endocrinologist and co-director of the Glycemic Collaborative Practice Team at St. Joseph Mercy Hospital, encourages the pursuit of multiple mentors.

“It is helpful to have a team of mentors because different colleagues can serve different mentoring roles,” she explains.

Mentors help with everything from research to publishing to networking, and it is unrealistic to expect a single person to assist with every aspect of career building. If you have two or more experts guiding you, then you also have multiple resources for feedback on your CV. Each will offer unique insights based on their experiences.

“A great mentor will help open doors or at least give you advice on how to open doors. An outstanding mentor will advocate for you when needed,” says Saberi.

To find the right mentors, you have to network. Sometimes these relationships form out of a professor-student scenario, but there are plenty of other ways to cultivate these bonds.

“Attend any early career forums that are available at your institution or at your national meetings,” says Saberi.

Lectures and conferences are also great opportunities to introduce yourself to potential mentors.

“Try to find people to work with that have a track record of producing successful mentees,” she goes on. “Just because someone has a reputation as a high-powered researcher or clinician doesn’t mean that they will be the right mentor.”

Often, the “right” mentor will become apparent after a few interactions. If a potential mentor is responsive and seems to take an interest, then the relationship is off to a great start. If not, then you may want to continue networking and seek other potential mentors.

JOIN THE CLUB
For some individuals, shyness and introversion may hinder their desire to network. But, you have to overcome these fears and to learn to be a “joiner” in order to assemble a well-rounded CV.

“You should try to become involved in task forces or committees with your national organizations—either at your local chapter level or the national level,” Saberi emphasizes. “This is a chance to meet colleagues and to gain new skills.”

A role in societies and other institutions looks great on paper too. It demonstrates commitment to important initiatives beyond the laboratory or exam room. As a part of a task force, you are able to help shape your chosen field in a specific way while simultaneously getting experience that will bolster your career.

“Volunteering for organizational leadership increases project management abilities, but is also important for promotions and for networking,” Saberi continues.

Hiring committees will want to know about your professional memberships, conferences attended, volunteer work, and leadership roles—all of which can be checked-off the list by participating in organizational activities in your field.

BOOST THOSE BYLINES
Everyone in academia has heard the phrase “publish or perish.” While perhaps a bit overdramatic, these words do hold some truth, especially in medical research.

“In academic practice, one needs a certain number of publications for promotions,” says Saberi. “But continue to publish whether you are in academic medicine or not.”

She currently works in private practice, but makes sure to also pursue projects that lead to publication. “Publishing provides one with a means of maintaining diversity in one’s CV and makes your name known to colleagues in the same field.”

Those in the clinical arena can focus on case reports, literature reviews, and quality improvement projects. Presentations should be included as well, and you may even decide to have subsections dedicated to publications outside of journals and conferences, such as articles written for magazines, websites, or medical blogs.

Dividing your publications into categories is generally a good idea, unless you are just starting out and do not yet have many publications. Some subsections to consider are: original research, case reports, reviews, poster presentations, and “other” publications, which would include work like magazine articles.

Quantity is not more important than quality, though. Ideally,
fellows will garner one or two lead authorships among their publications, which will speak greater to their abilities than a long list with no lead author credits.

It is also crucial to aim for publication in the right journals. Prestigious journals are of course a big plus, but niche journals can also help demonstrate the focus and direction of your career. When deciding which journals to submit to, mentors become critical once again.

**KEEP IT OR CUT IT**

The hardest part of constructing a CV can be editing. What to include, and what to leave out?

Matt Green, medical publishing director at BPP University School of Health in the U.K., has three words to say when it comes to cutting down a curriculum vitae: Relevant, clear, concise.

“The person who is shortlisting candidates for interview will have on average only two minutes to review your CV in the first instance,” he wrote in an article for BMJ Careers.

Because of this, candidates need to customize their CV for the position they are applying for. You do not want your most relevant accomplishments to get lost in a sea of unrelated bullet points. The person reviewing your CV should immediately see that you are qualified for the role, and then you can elaborate on your experience during the interview process.

Green’s rule of thumb for the length of a CV is that it should be “as long as it needs to be.” That means just the information that makes sense for that job application. The final product could be anywhere from three to eight pages.

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### CV Sections Checklist

Formats of curriculum vitae vary somewhat by preference, but the necessary sections tend to the same. Here are the categories of information and organization that Green recommends in his BMJ Careers article.

- Personal details
- Career statement
- Education
- Career history
- Clinical skills and experience
- Leadership experience
- Development courses and conferences attended
- Research experience
- Clinical audit
- Presentations and publications
- Teaching experience
- Information technology skills
- Personal interests
- References

He also says to ditch the cover page, which can distract from the rest of the CV. Additionally, he encourages individuals to stick to classic fonts like Times New Roman and Arial, and to minimize italics and underlining. The goal is to create a clean and easy to read document.

### Co-Director of Cardiovascular Research Institute, Loyola Stritch School of Medicine; Departments of Molecular Pharmacology and Therapeutics and Medicine (Division of Cardiology)

The Departments of Molecular Pharmacology and Therapeutics and Medicine and the Division of Cardiology at Loyola University Chicago, Stritch School of Medicine seek applicants for the Cardiovascular Research Institute Co-Directorship, a joint leadership position with a Basic Scientist leader in the Institute. This position is for a physician/scientist with an M.D. or M.D./Ph.D. who is actively engaged as a clinician and also directs a basic and/or translational research program in the area of Cardiovascular Disease. The appointment will be approximately 50% in each of the two aforementioned Departments with protected time for research, depending on extramural funding. Applicants should currently hold a faculty appointment at the rank of Associate Professor or Professor.

The faculty applicant will be expected to have and sustain an independent, externally funded research program, contribute to scholarship, graduate, and medical education and to the Translational Research mission that binds the two academic units. The Department of Molecular Pharmacology and Therapeutics is developing a pre-clinical Translational Research Laboratory, with which this faculty member will also be affiliated. The applicant is expected to participate in the vigorous collaborative academic environment that exists between these entities and the Cardiovascular Research Institute at Loyola University Chicago’s Health Sciences campus. Finally, there is an expectation that the Co-Director assist with the operations of the Institute and mentorship of junior physicians/scientists in the group. A generous salary and research startup package are available. Applicants should have a strong record of research productivity and funding as well as successful teaching and mentorship experience. Leadership experience is desirable.

Interested candidates should email a single PDF file which includes a cover letter, CV, statement of research interests, and contact information of four references (two within and two outside of your current institution) to pharmrecruit@luc.edu as well as apply online at www.careers.luc.edu (search for position # S141016-N).

Loyola University Chicago is an Equal Opportunity/Affirmative Action employer.
Green also wishes applicants would use bullet points instead of blocks of text and maintain consistent style throughout the document—layout, spacing, and structure should remain the same.

“Volunteering for organizational leadership increases project management abilities, but is also important for promotions and for networking.”

—Sima Saberi, MD

WHAT NOT TO DO
Avoiding pitfalls is equally important to making the right choices for your CV. Even if you manage to everything else right, one big mistake could make the difference between a “yes” and a “no” from a hiring committee.

Green says to never embellish or fabricate any information. It can be tempting to exaggerate one’s accomplishments in hopes of an extra edge, but dishonesty is a nonstarter. If you can’t back up a claim, don’t make it.

Saber encourages aspiring endocrinologists to take an open approach early on in your career.

“Don’t turn down opportunities to become involved in new projects or committees,” she says. “Also, don’t pigeonhole yourself into one track. Keep all of your options open.”

Saber says that the initial years of a medical career should be a time of exploration. You may not know that you enjoy a certain aspect of working in medicine until you try. Many leaders started off in a different area than the one they ultimately ended up in. Flexibility allows for a broader range of experiences and better knowledge of your strengths and weaknesses.

Finally, don’t run yourself into the ground trying to build the perfect CV. Work-life balance is critical and physicians and researchers are constantly grappling with the many demands on their time. Saberi offers some strategies for achieving at a high level without sacrificing other life priorities.

“Organize your time carefully,” she says. “Prioritize deadlines—make ‘to do’ lists if needed—and remember to take some time for yourself to prevent burnout. Some find that they do their best work early in the morning or late at night when the bustle of family life is quiet. Or, if you have multiple interruptions at work, close your office door or physically go to a different location to allow quiet time to read and write.”

The foundation of an excellent CV is, of course, outstanding work. There are many factors that define great work, but the best work tends to come from individuals who enjoy it. If you allow yourself to reach the point of burnout, it will be tough to regain momentum in your career.

There is no such thing as a perfect CV and, according to Green, it should instead operate as “a career road map that enables you to identify and deal with any gaps in your experience and to respond to opportunities that may arise unexpectedly.”

The most important part of career building is to continue progressing while staying sane in the process.
Publish, Publish, Publish: Writing as an Important Early-Career Step

For many, one of the hardest things to do in their early career is also one of the more important. Getting your research published is crucial for promotion and funding.

“If you are in academics and research is a part of your job description, then the amount and quality of the journals you publish in are objective measures of your success,” says Emily K. Sims, MD, assistant research professor of pediatrics at the Indiana University School of Medicine in Indianapolis. “For funding, part of your score is based on personal qualifications and previous research productivity is a major factor. It is important to be consistently putting good quality work out there.”

One of the first questions a new writer needs to answer is, “When is the article done?” It can be hard to decide when to pull the trigger and submit your research.

“The biggest issue for someone starting a career is deciding the best time to publish your research,” says Stephen R. Hammes, MD, PhD, chief of the Division of Endocrinology and Metabolism at the University of Rochester School of Medicine and Dentistry in New York State. “As a new investigator you want to publish good quality, but you don’t want to hold off too long. People need to read your article.”

There are two schools of thought. One suggests that you publish as soon as you can. It may not be full formed, but a new investigator needs to get something out there.

The other is that one should hold on to their research and keep adding more and more information. There is the hope that this will be the one big score needed to set yourself up for life.

LEAN ON A MENTOR

Hammes, who also serves as Editor-in-Chief of Molecular Endocrinology, says a good resource is your advisor or mentor. Sims agrees.

“Beyond the actual work, I think finding the right mentor is the most important part of getting published for an early-career researcher,” she says. “Having a mentor gives you guidance and I don’t know what I would have done without one from the beginning. You have to make some mistakes to learn, but there are so many good things that can come from their experience and concern about your well being.”

However, you should keep in mind that they may have very different ideas about when submissions should be made.

“Often the advisor wants to wait to publish this great monolith of a paper,” Hammes notes. “They are established, have time to wait and have a lot going on at once. The new investigator has only their own project to think about.”

It may be necessary for the writer to approach their mentor and tell them the research needs to go out for publication now. Personal concerns such as the requirements for promotion or the need to begin getting their own grant money lead to imperatives that the more seasoned investigator may not share.

It is also suggested that you call or email the editors of the journals you are considering. Most will be happy to talk to you and give advice on timing and any other question you have about submitting to their publication.

“Study the publication(s) you are considering. How does their audience match up with the audience you see for your article?”

CHOOSING THE RIGHT VENUE

After deciding when an article should be published, where it will be submitted is another important step. Journals are ranked by impact factor (IF). The IF reflects the average number times recently published articles have been cited in other publications. Generally, the higher the IF, the more important a journal is thought to be.

“One of the first things you need to think about when deciding where to place your article is the IF of the journal,” says Sims. “You try to publish in the higher IF journals, but you also have to realistically evaluate whether your project will make the cut. I always try to shoot for an IF I think is reasonable, but you want to get published so people can see your work.”

Study the publication(s) you are considering. How does their audience match up with the audience you see for your article? For example, if you have done a clinical study, it isn’t likely to interest a journal with a basic science focus.

“ACC members should consider the ACC journals,” says Hammes. “You want to publish in a place where you feel comfortable. While the editorial board may not be your friends, they are..."
people you are probably familiar with. The journals are there for Society members to get their work out and I think newer researchers should take advantage of that when they can.”

CUSTOMIZING THE MANUSCRIPT
When getting ready to submit your research to a specific journal, it is time to visit the information for authors page. This gives you the formatting, the person who should receive the article, and other technical requirements of the publication.

“The authors page gives specific information on how they want the bibliography to look, how many words they’ll accept for the abstract, and other important parts of the submission,” says Sims. “Some feel that the research is important and the publishing details not so much. But the people who decide on the publication’s content take these details very seriously.”

Following guidelines can be an important part of getting your manuscript accepted quickly, or at all. The editors will send an article back to the authors for revisions to meet these requirements. This will delay the time when you know if your article is accepted or rejected.

“Everybody should look at the information for authors, yet it is amazing how many don’t,” says Rebecca Kelly, managing editor for ES publications. “We generally won’t reject solely based on format concerns. It makes us wonder if they did not pay attention to the technical parts of submission, maybe they did the same on the research itself.”

The tone and method of your writing is often the hardest part of the process for both young and established writers. It needs to be easy to read and easy to follow. You have to be able to communicate the important parts quickly and concisely.

“Writing a manuscript is an art,” says Sims. “You can do the most exciting work ever, but if you can’t communicate it, it doesn’t really matter.”

“During the final check, make sure that any illustrations, tables, or figures are in a format the journal can use.”

Use resources that are readily available to you as you go along. In some instances, the reviewers are the first people to see the manuscript. This is seldom a good idea.

“Make sure lot of people have read your paper and commented on it long before the journal reviewers get it,” says Hammes. “Have your co-authors look it over and get feedback as a first review. Get input from other colleagues. When you have considered their suggestions, you can send it along to the journal.”

During the final check, make sure that any illustrations, tables, or figures are in a format the journal can use. Be careful when making them that no bias is introduced.
“We have noticed some authors have tried to make an illustration stand out,” says Kelly. “They may darken a gel to draw attention to the one they feel is more important or sharpen to make it look nicer. Even if you feel the images aren’t dramatic enough, don’t touch it up to make it look prettier.”

She says most of this is done out of ignorance and not an attempt to fake results. However, the staff of the journal will examine the manuscript closely so that they can be sure there is no attempt at fakery. These concerns are taken very seriously by all journals.

**CREDIT WHERE IT’S DUE**

Another important step is deciding who will be first author and last author. Again, where you are in your career makes a difference in where you want to be.

“Authorship is a very important issue for young researchers who have to have their own work to be successful,” says Hammes. “Working in your first post-doctoral lab you will want to be first author and your senior investigator the last author. Where it becomes a little cloudy is when you are on your own.”

In these cases, Hammes thinks it is very important to sit down with your mentor and get senior authorship status. This can help cement your status as an independent investigator.

“I always encourage my junior investigators to have these conversations when everything is their work,” he notes. “They should tell their mentors that they want senior authorship. Some will be more willing than others to back off. It is a conversation most early-career investigators have to have eventually.”

An important trait a new investigator must develop quickly is the ability to not take a rejection personally. Most papers get turned down at least once.

“One of the first things I learned is that you have to have a very thick skin, otherwise you won’t come out of it with your self-esteem intact,” notes Sims. “Even when they turn down your paper, usually you will get invaluable feedback on improving it for the next submission.”

Another reason for a newbie investigator to not take it personal, is that not just the young ones getting rejected. Hammes notes that even Chiefs of Service and full professors don’t get in print 100% of the time.

“Just because it was returned doesn’t mean it was bad science, it just means it wasn’t appropriate for that journal,” he notes. “The easy thing to do is complain and be mad at the reviewers. But then you calm down, look at the comments, and know what you have to do to submit a better paper to the next journal.”

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**Clinical Cardiology**

Come be a part of our innovative and growing team committed to excellence. The Central Maine Heart & Vascular Institute, located in Lewiston, Maine is seeking clinical cardiologists to be a part of the continued growth of our Heart and Vascular program. Our organization is recruiting BE/BC Non-Interventional cardiologists to provide the full spectrum of inpatient and outpatient care. We are unique in having a true institute service line model and The Central Maine Medical Family’s extensive group of Primary Care providers is the foundation of our large referral base. Successful candidates also can expect to participate in quality management, program development and clinical outreach. Specific interests in non-invasive imaging and preventative cardiology are welcomed.

Central and Mid Coast Maine- including Lewiston/Auburn and surrounding communities are exceptional places in which to live and raise a family, offering a wide range of schooling, housing and cultural options are centrally located to the both the mountains and coast. To learn more about these exceptional opportunities, please contact Dr. Andrew Eisenhauer, Director of CMHVI, at eisenhan@cmhc.org or 207/753-3910 or send CV to Julia Lauver, CMMC Physician Recruiter at lauverju@cmhc.org or 800/445-7431

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**Tacoma, Washington**

Madigan Army Medical Center is looking to hire a Medical Instrument Technician (Congenital Cardiology) to join our medical team. Come and join us in providing healthcare to our military families.

This position is located within the Department of Pediatrics- Patient Centered Medical Home Clinic at Madigan Army Medical Center.

Civilian employees serve a vital role in supporting the Army mission. They provide the skills that are not readily available in the military, but crucial to support military operations. The Army integrates the talents and skills of its military and civilian members to form a Total Army.

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We offer competitive salaries/benefits; malpractice insurance covered; recruitment bonus.

**Apply now, to Vacancy Announcement Number WTEU168586131637987EM on www.usajobs.gov**

For more information, please call the Medical Recruiter at 253-968-3320 or e-mail: lucecita.roper.civ@mail.mil
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