

# Negotiating and Starting a Job in an Academic Setting

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# Outline

- Definitions: community vs academic
- Requirements for an academic job
- Getting the job you want
  - When to look
  - The interview
- Negotiating the contract
- The finances

# About Myself

- Family
- Medical school at McGill
- Residency at McMaster
- Fellowship in MIS at McGill
- Current practice in advanced MIS at Toronto Western Hospital – University Health Network
- Completing master's degree in Chicago in medical Education
- Research – using simulation remotely in developing countries to train surgeons

# Telesimulation



# Community vs Academic Surgery

- Academic hospital
  - Clinically more specialized
  - Residents and students integral part of team
  - Research major part of practice
  - Mixed funding models
- Community hospital
  - Clinically greater breadth and variety
  - Residents playing an increasing role
  - No research requirements
  - Fee for service

What type of practice do you want?

Are you interested in making research a part of your practice?

# You want an academic job...

## what are the requirements

- Fellowship training
  - A must!
  - Try to ensure MIS is part of fellowship
  - Do research during fellowship
  - Consider going away
- Master's degree
  - Required in many Canadian academic centers
  - Clin epi, education, surgical science
  - What about master's pre-med school?

# Why do a graduate degree?

- 1-2 focused years to learn about research process
  - Grant writing
  - Conferences, networking, presentations
- Courses give you a basic skill set in an area
- Thesis makes you an expert in a particular field
- Gives you a starting point for research in your career

# Getting the job you want

- When to start looking
  - No perfect time
  - One year before your start date
  - Earlier if hoping to stay at center where residency was done
    - Talk to department head at hospital, department chair at university
    - Ask if there's role they're looking to fill
  - Attend conferences - network

# Where to look?

- Own residency center often easiest
- Speak to other department members
  - What's the environment? Competitive, supportive
  - How is the leadership?
- Most important issue to consider is family
  - Make sure everyone is on board!

# Interviews



- More is better
  - Lets you see what's out there
  - Plan low stress ones first
  - Lets others know you have options
- Be prepared to give rounds
  - One of the reason's to do research in fellowship
  - Present work done, plan for future
- Know what work is being done in department

# What are your goals?

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**“My short-term goal is to bluff my way through this job interview. My long-term goal is to invent a time machine so I can come back and change everything I’ve said so far.”**

# Interviews

- Most important rule: have a plan for your career
- No one wants to hire someone who has no focus, goals, or seems unsure
- Be prepared to answer:
  - Main research interest
    - What will your research be in
    - What type of resources might you need
  - Clinical interest
    - How will you be contributing to the department
- Your plan may change – that's OK
  - You never know what will take off

# You've found the job... the negotiating begins

- Many centers have standard packages for new recruits based on academic rank
  - Not much negotiating
- Things to consider:
  - What is your job description
  - Start up funds: \$5000
  - Minimum base salary
  - Research funds
    - A must
    - Nurse/equipment/RA
  - Who will your mentor be?



# What to expect financially

- It depends! How busy do you want to be
- Salary vs fee for service vs combined model
- Salary support for first 3 years
- Overall, academic likely less than community
- Less overhead however, and more
- U.S. now much worse than Canada



# In the end, what's so great about academics?

- Feeling of making contribution to greater understanding of medicine
- Opportunity to work with students at all levels
- Traveling, seeing the world
- International network of colleagues