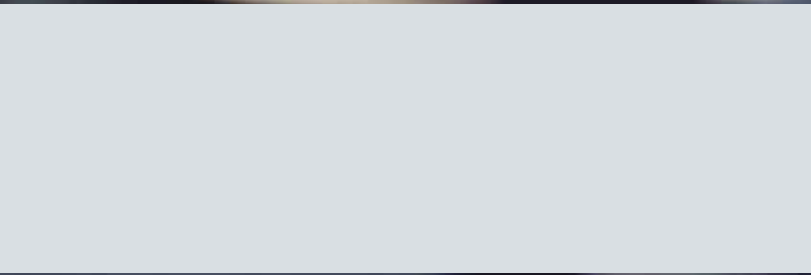


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## CLINICAL PRACTICE

## Diagnosis of Diabetes

Silvio E. Inzucchi, M.D.

*This Journal feature begins with a case vignette highlighting a common clinical problem. Evidence supporting various strategies is then presented, followed by a review of formal guidelines, when they exist. The article ends with the author's clinical recommendations.*

**A 42-year-old asymptomatic man with hypertension presents for his annual physical examination. His medications include atenolol combined with chlorthalidone (at doses of 50 mg and 25 mg, respectively, per day). Both parents had type 2 diabetes mellitus later in life. He does not smoke cigarettes. His body-mass index (BMI, the weight in kilograms divided by the square of the height in meters) is 32.3, and his blood pressure is 130/80 mm Hg. Would you screen the patient for diabetes, and if so, how?**

## THE CLINICAL PROBLEM

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Type 2 diabetes is a complex disease that is typically diagnosed in midlife and is characterized by progressive defects in insulin secretion and action. In the context of increased caloric intake and decreased activity levels in Westernized societies, the prevalence of type 2 diabetes continues to climb. According to the Centers for Disease Control and Prevention, 25.8 million persons in the United States (or 8.3% of the population) have the disease, which is diagnosed in approximately 2 million persons each year.<sup>1</sup> Diabetes is usually silent in its initial stages, and irreversible complications may develop before treatment is begun.<sup>2</sup> Data from randomized trials indicate that early and aggressive antihyperglycemic therapy significantly reduces the risk of long-term microvascular complications.<sup>2,3</sup> Although the effects of tight glucose control on macrovascular disease are less clear,<sup>4</sup> the diagnosis of diabetes in a patient provides the opportunity to apply evidence-based strategies for reducing cardiovascular risk, such as the management of blood pressure and lipid levels.

Type 2 diabetes is preceded by a lengthy asymptomatic stage, termed prediabetes, which is characterized by mild hyperglycemia, insulin resistance, and early decrements in insulin secretory capacity. Data from randomized trials show that progression to diabetes from this at-risk stage can be reduced through lifestyle modification.<sup>5,6</sup> The identification of persons with prediabetes, who are now estimated to number 79 million in the United States,<sup>1</sup> allows for the introduction of interventions to reduce risk.

## STRATEGIES AND EVIDENCE

## SCREENING FOR DIABETES

The American Diabetes Association (ADA)<sup>7</sup> and the Veterans Health Administration (VHA)<sup>8</sup> recommend diabetes screening beginning at 45 years of age; the ADA advises earlier screening in patients with risk factors (Table 1). In contrast, routine screening is not recommended by the U.S. Preventive Services Task Force (USPSTF),<sup>9</sup> given the absence of rigorous data to show that screening and early treatment improve outcomes; this group recommends screening only in asymptomatic adults with a sustained blood pressure greater than 135/80 mm Hg — mainly because of lower blood-pressure targets once the diagnosis of diabetes is established.

  
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## KEY CLINICAL POINTS

## DIAGNOSIS OF DIABETES

- Early screening and diagnosis allow for the identification of at-risk persons (so that preventive measures, primarily lifestyle changes, may be undertaken) and those with early disease (so that treatment can be initiated).
- The diagnostic cutoff point for diabetes is a fasting plasma glucose level of 126 mg per deciliter (7.0 mmol per liter) or more or a glycated hemoglobin level of 6.5% or more; the diagnosis requires confirmation by the same or the other test.
- A fasting glucose level of 100 to 125 mg per deciliter (5.6 to 6.9 mmol per liter) is consistent with prediabetes; the range of glycated hemoglobin levels that are diagnostic of prediabetes is controversial, but the American Diabetes Association recommends a range of 5.7 to 6.4%.
- Hemoglobinopathies and conditions of altered red-cell turnover can give spurious results for glycated hemoglobin; racial and ethnic differences in glycated hemoglobin levels have been reported for given ambient glucose levels.
- Testing of glycated hemoglobin or fasting plasma glucose appears to identify different groups of patients with diabetes and prediabetes, yet both tests identify patients at similar risk for adverse sequelae.

## DIAGNOSIS OF DIABETES

*Glucose Levels*

Before 1997, the diagnosis of diabetes was defined by the ADA and the World Health Organization (WHO) as a fasting plasma glucose level of 140 mg per deciliter (7.8 mmol per liter) or more or a 2-hour plasma glucose level of 200 mg per deciliter (11.1 mmol per liter) or more during an oral glucose-tolerance test (OGTT) conducted with a standard loading dose of 75 g. This definition was based on earlier recommendations from the National Diabetes Data Group.<sup>10</sup> These values were originally chosen on the basis of the risk of future symptoms of uncontrolled hyperglycemia. In 1997, with recommendations from the Expert Committee on the Diagnosis and Classification of Diabetes Mellitus,<sup>11</sup> the ADA and the WHO<sup>12</sup> lowered the diagnostic threshold to a fasting plasma glucose level of 126 mg per deciliter (7.0 mmol per liter) — the level at which a unique microvascular complication of diabetes, retinopathy, becomes detectable. The OGTT identifies more patients as having diabetes than the fasting plasma glucose test, but the former test has drawbacks, including greater expense and complexity and lower reproducibility. Thus, the fasting plasma glucose test has been the preferred test in the United States. The diagnosis is confirmed by repeat testing on a separate day. In symptomatic patients, a random plasma glucose level of 200 mg per deciliter or more also establishes the diagnosis and does not require confirmation.

The only recognized at-risk category for diabetes before 1997 was impaired glucose tolerance,

as identified on the basis of a 2-hour plasma glucose level of 140 to 199 mg per deciliter (7.8 to 11.0 mmol per liter) during an OGTT. With the revised 1997 criteria, a corresponding state was identified on the basis of the fasting plasma glucose level: impaired fasting glucose. Although the original criterion for this diagnosis was a fasting glucose level of 110 to 125 mg per deciliter (6.1 to 6.9 mmol per liter),<sup>11</sup> this criterion was later lowered by the ADA (but not by the WHO) to 100 to 125 mg per deciliter (5.6 to 6.9 mmol per liter) to increase sensitivity (with an acceptable drop in specificity) for persons with an increased diabetes risk.<sup>13</sup>

Longitudinal investigations have shown that persons categorized as being “impaired” by any of these definitions have approximately a 5 to 10% annualized risk of diabetes, a risk that is greater by a factor of approximately 5 to 10 than that among persons with normal glucose tolerance or normal fasting glucose. Risks appear to be similar among persons with isolated impaired fasting glucose (i.e., without impaired glucose tolerance) and isolated impaired glucose tolerance (without impaired fasting glucose).<sup>14</sup> However, the proportion of patients with impaired glucose tolerance tends to be greater than that with impaired fasting glucose in most populations. Persons with both impaired fasting glucose and impaired glucose tolerance have a higher risk of diabetes (approximately 10 to 15% per year) than those with only one abnormality. Whereas both prediabetic states are associated with increased total and cardiovascular mortality, impaired glucose

**Table 1. American Diabetes Association Recommendations for the Screening of Asymptomatic Persons for Diabetes.\***

Screen beginning at 45 yr of age, at least every 3 yr
Screen at any age and more frequently if the body-mass index is 25 or more and if the person has at least one additional risk factor:
Family history of diabetes (first-degree relative)
High-risk race (e.g., black, Native American, Asian, and Pacific Islander) or ethnic group (Hispanic)
Glycated hemoglobin level of 5.7% or more or impaired fasting glucose or impaired glucose tolerance on previous testing
History of gestational diabetes or delivery of a baby weighing more than 9 lb (4.1 kg)
The polycystic ovary syndrome
Hypertension (blood pressure $\geq$ 140/90 mm Hg; or therapy for hypertension)
HDL cholesterol level of less than 35 mg per deciliter (0.91 mmol per liter), triglyceride level of more than 250 mg per deciliter (2.8 mmol per liter), or both
History of cardiovascular disease
Physical inactivity
Other clinical conditions associated with insulin resistance (e.g., severe obesity and acanthosis nigricans)

\* Data are adapted from the American Diabetes Association.<sup>7</sup> HDL denotes high-density lipoprotein.

tolerance tends to be a better predictor than impaired fasting glucose.<sup>14</sup>

#### *Glycated Hemoglobin*

Glycated hemoglobin has long been used in the management of established diabetes as a biomarker of long-term glycemic control. Levels of this end product of nonenzymatic glycation of the most prevalent protein in blood correlate well (though not perfectly) with average ambient blood glucose levels during the previous 2 to 3 months. Until recently, the lack of international standardization made glycated hemoglobin testing a suboptimal choice for diabetes screening. However, the glycated hemoglobin test is now globally standardized, so clinical laboratory results are comparable to those reported in the Diabetes Control and Complications Trial and United Kingdom Prospective Diabetes Study, two trials that validated the direct relationship between glycated hemoglobin levels and clinical outcomes in patients with type 1 and 2 diabetes, respectively.<sup>15</sup> In response, in 2009, the International Expert Committee (IEC) recommended the use of this test for the diagnosis of diabetes, with a threshold level of 6.5%.<sup>16</sup> This recommendation was based on the observation that the 6.5% threshold was as accurate in indicating a risk of retinopathy as were cutoff points for fasting plasma glucose and 2-hour plasma glucose, combined with the recognized advantages of glycated hemoglobin testing (Table 2),

particularly the fact that fasting is not required. The measurement of glycated hemoglobin for diabetes diagnosis was subsequently adopted as an optional test by the ADA (in 2010)<sup>18</sup> and the WHO (in 2011).<sup>19</sup>

On the basis of data showing an increased risk of diabetes among persons with increased glycated hemoglobin levels that were still below the cutoff point for diabetes, the ADA also defined a prediabetic glycated hemoglobin range of 5.7 to 6.4%, which was an expansion of the original recommendation by the IEC that levels of 6.0% to 6.4% be considered high risk.<sup>16,18</sup> In contrast to the risk of retinopathy, which abruptly increases at a well-defined glycated hemoglobin level, the risk of diabetes increases along a glycemic continuum. As with fasting plasma glucose and 2-hour plasma glucose, the lower bound for such a range in glycated hemoglobin values must balance adequate sensitivity (to include persons who would benefit from prevention strategies) with specificity (to avoid the inclusion of persons at relatively low absolute risk, for whom intervention may not be cost-effective). The selected range described a group of persons with at least five times the risk of diabetes developing over a period of 5 to 10 years (and an annualized incidence of at least 5% per year) as compared with those with a glycated hemoglobin level of less than 5%. Logically, the risk increases further as a glycated hemoglobin level of 6.5% is approached, with a comparative relative

**Table 2. Advantages and Disadvantages of Screening Tests for Diabetes.\***

Testing Method	Advantages	Disadvantages
Fasting plasma glucose	Extensive experience, widespread availability, low cost	Fasting required, reflects glycemia solely at moment of sampling, substantial biologic variability, potential influence of acute illness, sample instability in vial, lack of global standardization
Oral glucose-tolerance test	Most sensitive test, earliest marker of glucose dysregulation	Fasting required, substantial biologic variability, poor reproducibility from day to day, lack of association of results with complications over time, sample instability in vial, more time required, inconvenience, higher cost, lack of global standardization of plasma glucose measurements
Glycated hemoglobin	Fasting not required, low biologic variability, marker of long-term glycemia, stable during acute illness, sample stability in vial, global standardization, close association of results with complications	Lack of reliability in patients with hemoglobinopathies (e.g., sickle cell disease and thalassemia, usually with reduced levels), unreliability in certain anemias with high red-cell turnover (e.g., hemolytic anemia, usually with reduced levels) or low red-cell turnover (e.g., iron deficiency, usually with increased levels), lack of reliability after recent transfusion (in the previous 2 to 3 mo), falsely low results in advanced (stage 4 or 5) renal disease, racial and ethnic differences (e.g., slightly higher in blacks), possibility of a glycation gap (differential glycation in response to the same ambient glucose exposure between persons), higher cost, lack of global availability

\* Data are adapted from Sacks.<sup>17</sup>

risk in excess of a factor of 10 (and an annualized incidence of 5 to 10% per year).<sup>20</sup> The risk of diabetes at any given glycated hemoglobin level increases with the presence of other risk factors (e.g., obesity and a family history of diabetes).

Despite some advantages, the use of glycated hemoglobin testing has its limitations.<sup>17</sup> Depending on the assay, spuriously low values may occur in patients with certain hemoglobinopathies (e.g., sickle cell disease and thalassemia) or who have increased red-cell turnover (e.g., hemolytic anemia and spherocytosis)<sup>21</sup> or stage 4 or 5 chronic kidney disease, especially if the patient is receiving erythropoietin.<sup>22</sup> In contrast, falsely high glycated hemoglobin levels have been reported in association with iron deficiency and other states of decreased red-cell turnover.<sup>23</sup> Some investigators have reported a “glycation gap,” or different glycated hemoglobin levels in patients with the same mean ambient blood glucose levels.<sup>24</sup> This phenomenon may result from genetically determined altered access of glucose to the intracellular compartment (where hemoglobin resides), although this hypothesis is controversial.<sup>25</sup> Inconsistencies in the correlations between glycated hemoglobin and other measures of ambient glycemia have also been reported in different ethnic and racial groups, findings that suggest genetic influences on hemoglobin glycation. For example, blacks appear to have slightly higher glycated hemoglobin levels (an absolute increase of 0.2 to 0.3 percentage points)

than whites.<sup>26</sup> It is unclear whether this observation reflects differences in rates of postprandial hyperglycemia or in glycation rates.<sup>27</sup> These potential pitfalls must be recognized when glycated hemoglobin testing is used for diagnosis, especially for prediabetes, since the cutoff points for this state are already somewhat arbitrary.

In most studies, glycated hemoglobin testing identifies fewer patients with diabetes than does testing for fasting plasma glucose or 2-hour plasma glucose.<sup>28-31</sup> These measures may also identify distinct patients as having diabetes — groups that overlap only partially. For example, in a population-based study of U.S. adults without known diabetes, the proportions of patients with an abnormal fasting plasma glucose level ( $\geq 126$  mg per deciliter) and a nondiabetic glycated hemoglobin level ( $< 6.5\%$ ), a nondiabetic fasting plasma glucose level ( $< 126$  mg per deciliter) and an abnormal glycated hemoglobin level ( $\geq 6.5\%$ ), or both abnormalities were 1.8%, 0.5%, and 1.8%, respectively.<sup>28</sup> Moreover, in a prospective cohort study of older U.S. adults, roughly one third of cases of newly identified diabetes were detected by fasting plasma glucose testing only, one third by glycated hemoglobin testing only, and the remainder by both tests.<sup>26</sup> Furthermore, persons identified as having diabetes by glycated hemoglobin levels only were more likely to be black than those identified with the use of glucose levels.<sup>26,28,29</sup> Clearly, a move to increase the use of

glycated hemoglobin testing for screening would affect the epidemiology of diabetes.<sup>32,33</sup> Similar patterns have been reported for the diagnosis of prediabetes with glycated hemoglobin versus fasting plasma glucose.<sup>29,32,33</sup> Although these findings have led some observers to question the use of glycated hemoglobin for diagnostic purposes,<sup>34,35</sup> these questions are counterbalanced by the absence of an absolute standard measurement for the diagnosis of diabetes and the observation that all methods in use correlate equally well with retinopathy risk.<sup>36</sup>

#### *Combined Screening*

An alternative but more costly option, which has been proposed by several investigators,<sup>37-40</sup> is to measure both glycated hemoglobin and fasting plasma glucose, either simultaneously or in sequence, a strategy that might be considered for patients at highest risk. (In practice, fasting plasma glucose may have been checked as part of a routine blood chemical profile in patients who are being screened with glycated hemoglobin testing.) Given the different yields of these two measures, this approach is likely to capture substantially more patients than the use of either test in isolation.

When the results of two tests are available but discordant, a reasonable and cautious approach is to let the abnormal test result (if repeated and confirmed) guide categorization, as recommended by the ADA.<sup>18</sup> In this context, the nondiagnostic result usually is close to the abnormal range. However, if results are more widely discrepant (e.g., a fasting plasma glucose level of 123 mg per deciliter [6.8 mmol per liter] but a glycated hemoglobin level of 5.1%), repeat testing is indicated. In some cases, transient aberrations in glucose levels (as with acute illness) or abnormally low or high glycation rates may underlie such incongruities. An OGTT might be helpful in certain cases.

#### **DIABETES PREVENTION**

The identification of any prediabetic state warrants education of the patient regarding diabetes risk as well as lifestyle measures that may be undertaken to mitigate this risk. Two large clinical trials have shown the effectiveness of intensive lifestyle interventions in high-risk patients (overweight or obese with impaired glucose tolerance), with a relative risk reduction of 58% in the diagnosis of diabetes during a 3-year period.<sup>5,6</sup> The specific intervention

in the largest study, the Diabetes Prevention Program (DPP), involved regular aerobic exercise (at least 30 minutes on most days of the week) and a calorie-restricted diet to promote the loss of 7% of body weight.<sup>5</sup> Metformin was also tested in the DPP; the relative risk reduction with this drug (31%) was approximately half that with lifestyle intervention, and the drug appeared to be particularly effective in patients under the age of 60 years, with a BMI over 35 and with a fasting plasma glucose level over 110 mg per deciliter.<sup>5,41</sup> Other glucose-lowering or antiobesity agents (i.e., acarbose, rosiglitazone, pioglitazone, and orlistat) have also been shown in randomized trials to reduce the risk of diabetes.<sup>42</sup> All drugs have important side effects to consider, and none are approved by the Food and Drug Administration (FDA) for this indication.

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#### AREAS OF UNCERTAINTY

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Although it appears logical to screen high-risk patients for dysglycemia, data are lacking to show that diabetes screening (outside of pregnancy) improves more than biochemical outcomes. The choice of a preferred screening test (fasting plasma glucose or glycated hemoglobin) remains arguable. In the United States, the OGTT has largely been abandoned outside of screening for gestational diabetes, owing to its complexity and low reproducibility.

It is unclear whether the risk of complications of diabetes differs according to whether the disease was diagnosed by means of fasting plasma glucose testing only or glycated hemoglobin testing only. Preliminary data from a large, community-based prospective cohort study suggest that the glycated hemoglobin level, which integrates fasting and postprandial glucose levels over a longer period, might be a better predictor of certain complications — especially cardiovascular disease.<sup>43</sup> It is also not known whether the risk of diabetes differs between patients identified as having prediabetes by means of glycated hemoglobin testing and those identified by means of fasting plasma glucose testing. Such risks probably vary according to which test is used ultimately to make the diagnosis. Ongoing research is assessing the value of risk scores that incorporate not only glycemic measures but also other biomarkers and risk factors to estimate diabetes risk.<sup>44,45</sup>

Other ambiguities relate to treatment strategies for patients in whom prediabetes has been

**Table 3. Major Diagnostic Criteria for Diabetes and Prediabetic or At-Risk States.\***

Measure	American Diabetes Association		World Health Organization	
	Diabetes	Prediabetes	Diabetes	Impaired Glucose Regulation
Fasting plasma glucose	≥126 mg/dl	100–125 mg/dl (IFG)	≥126 mg/dl	110–125 mg/dl (IFG)
2-Hr plasma glucose (during an OGTT with a loading dose of 75 g)	≥200 mg/dl	140–199 mg/dl (IGT)	≥200 mg/dl	140–199 mg/dl (IGT)
Casual (or random) plasma glucose (in a patient with classic hyperglycemic symptoms)	≥200 mg/dl		≥200 mg/dl	
Glycated hemoglobin	≥6.5%	5.7–6.4%	≥6.5%	

\* Data are adapted from the American Diabetes Association,<sup>7,18</sup> Alberti and Zimmet,<sup>12</sup> and the World Health Organization.<sup>19</sup> All listed plasma glucose levels are based on venous sampling. All tests (except for casual plasma glucose in a symptomatic patient) should be repeated and confirmed on a separate day. (The American Diabetes Association allows for glycated hemoglobin testing to be paired with fasting plasma glucose testing on the same day. If the values for both tests are in the diabetic range, the diagnosis is confirmed.) To convert the values for glucose to millimoles per liter, multiply by 0.05551. IFG denotes impaired fasting glucose, IGT impaired glucose tolerance, and OGTT oral glucose-tolerance test.

diagnosed. Do lifestyle or pharmacologic interventions in these patients truly prevent diabetes or simply delay its onset? Given the cumulative vascular risk associated with diabetes and the potential legacy effect of glycemic control (long-term benefit from early metabolic stability), even a modest delay of a few years in the onset of diabetes may be a worthwhile goal. However, diabetes-prevention trials to date<sup>7,8</sup> have focused on glycemic end points and were not powered to assess diabetes-related complications. Recent data suggest that generic metformin therapy may be particularly cost-effective in this context,<sup>46</sup> but the long-term benefits and risks of this or other medications (or bariatric surgery) are uncertain. There are also uncertain consequences of designating a risk factor (e.g., high fasting plasma glucose) as a disease state.

#### GUIDELINES

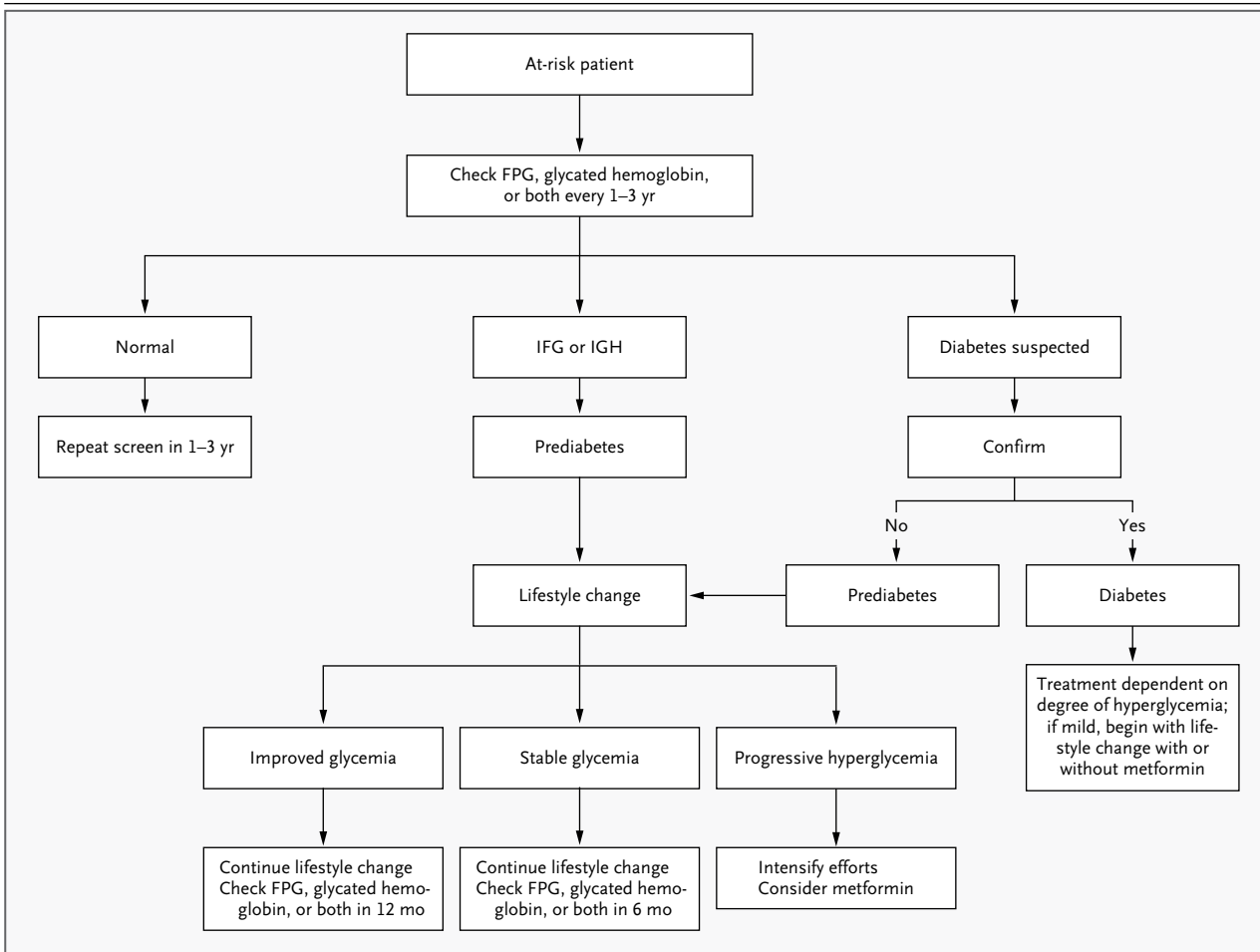
ADA<sup>7,18</sup> recommendations for diabetes screening are summarized in Table 1; the ADA diagnostic criteria are listed in Table 3, along with those of the WHO.<sup>19</sup> As mentioned, the USPSTF recommends screening only in adults with hypertension (blood pressure, >135/80 mm Hg).<sup>9</sup> The American Association of Clinical Endocrinologists (AACE),<sup>47</sup> the VHA,<sup>8</sup> and the WHO use the ADA criteria for diabetes; the AACE advises confirmation with fasting plasma glucose testing when the diagnosis is made on the basis of glycated hemoglobin testing. For the identification of prediabetes, the ADA is the sole group to fully en-

dorse glycated hemoglobin testing, with a cutoff range of 5.7 to 6.4%<sup>7,18</sup> and no recommended confirmatory testing. The AACE allows for the use of glycated hemoglobin testing to screen for prediabetes but stipulates the need for follow-up testing of fasting plasma glucose for those with values of 5.5 to 6.4%.<sup>47</sup>

#### CONCLUSIONS AND RECOMMENDATIONS

The identification of patients with diabetes or prediabetes by screening allows for earlier intervention, with potential reductions in future complication rates, although randomized trials are lacking to definitively show benefit. The patient described in the vignette has risk factors (obesity, hypertension, and a family history of diabetes) and should be screened. Whether fasting plasma glucose or glycated hemoglobin is measured remains debatable; each test has advantages and disadvantages (Table 2). Given that the yield of testing is higher when both tests are performed, I typically assess both simultaneously — although most guidelines suggest the use of a single test initially. If the patient has positive results on both tests, the diagnosis is confirmed. If only one test is positive, I would repeat it on a separate day. If diabetes is confirmed, treatment should be initiated on the basis of current guidelines (see Fig. 1 for a proposed screening algorithm).<sup>48,49</sup>

If prediabetes is identified, a repeat test is not necessary. Lifestyle changes (diet and exercise) should be encouraged; a greater intensity of inter-



**Figure 1. Suggested Approach to Screening Patients at Risk for Diabetes.**

Impaired fasting glucose (IFG) is defined as a fasting plasma glucose (FPG) level of 100 to 125 mg per deciliter (5.6 to 6.9 mmol per liter). Increased glycated hemoglobin (IGH) is defined as a glycated hemoglobin level of 5.7 to 6.4%. The diagnosis of diabetes is confirmed with a repeat test on a separate day or by the alternative test (i.e., glycated hemoglobin instead of FPG or vice versa) on the same day or a separate day. If the result of the repeat test is in the prediabetic range, the patient should be counseled or treated for prediabetes. If the result of the repeat test is entirely normal (which is unlikely), rescreening in 6 months should be considered. Therapeutic lifestyle change is defined as a hypocaloric diet, weight reduction, and increased physical activity.

vention may be warranted in patients with higher glucose or glycated hemoglobin levels and with additional risk factors, since such findings predict more rapid progression to diabetes. I might consider metformin if progressive increases in glycemic measures were observed during follow-up, although the FDA has not approved metformin for this indication. Attention should also be paid to other cardiovascular risk factors. I might change the patient's antihypertensive therapy to an angiotensin-converting-enzyme inhibitor, given the associations between the use of a beta-blocker or thiazide and an increased risk of diabetes in some studies.<sup>50</sup> Periodic visits (every 6 to 12 months) are

warranted to assess and encourage adherence to lifestyle recommendations and to follow glycemic status.

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Disclosure forms provided by the author are available with the full text of this article at NEJM.org.

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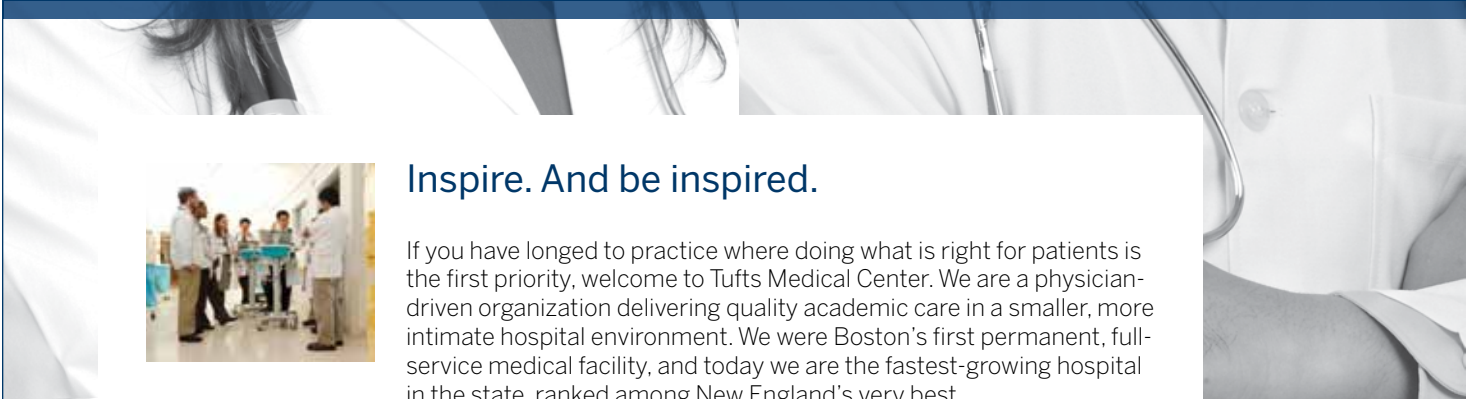
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## Classified Advertising Section

### Sequence of Classifications

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Anesthesiology	Nuclear Medicine	Public Health	Graduate Training/Fellowships/ Residency Programs
Cardiology	Obstetrics & Gynecology	Pulmonary Disease	Courses, Symposia, Seminars
Critical Care	Occupational Medicine	Radiation Oncology	For Sale/For Rent/Wanted
Dermatology	Ophthalmology	Radiology	Locum Tenens
Emergency Medicine	Osteopathic Medicine	Rheumatology	Miscellaneous
Endocrinology	Otolaryngology	Surgery, General	Multiple Specialties/ Group Practice
Family Medicine	Pathology	Surgery, Cardiovascular/ Thoracic	Part-Time Positions/Other
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Geriatrics	Pediatric Intensive/ Critical Care	Surgery, Pediatric Orthopedic	Positions Sought
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### Classified Advertising Rates

We charge \$7.10 per word per insertion. **Bold typeface** is available for \$7.70 per word per insertion (**entire ad must be bold typeface**). A 2- to 4-time frequency discount rate of \$5.95 per word per insertion and \$6.60 per word per insertion for **bold typeface** is available. A 5-time frequency discount rate of \$5.65 per word per insertion and \$6.00 per word per insertion for **bold typeface** is also available. In order to earn the 2- to 4-time or 5-time discounted word rate, the request for an ad to run in multiple issues must be made upon initial placement. The issues do not need to be consecutive. **Web fee:** Classified line advertisers may choose to have their ads placed on NEJM CareerCenter for a fee of \$60.00 per issue per advertisement. The web fee must be purchased for all dates of the print schedule. The choice to place your ad online must be made at the same time the print ad is scheduled. **Note:** The minimum charge for all types of line advertising is equivalent to 25 words per ad. Confidential reply boxes are an extra \$65.00 per insertion plus 4 words (Reply Box 0000, NEJM). We will send the responses directly to you every Tuesday and Thursday. Purchase orders will be accepted subject to credit approval. For orders requiring prepayment, we accept payment via Visa, MasterCard, and American Express for your convenience, or a check. All classified line ads are subject to the consistency guidelines of NEJM.

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All orders, cancellations, and changes must be received in writing. E-mail your advertisement to us at [ads@nejmcareercenter.org](mailto:ads@nejmcareercenter.org), or fax it to 1-781-895-1045 or 1-781-893-5003. We will contact you to confirm your order. Our closing date is typically the Friday 20 days prior to publication date; however, please consult the rate card online at [nejmcareercenter.org](http://nejmcareercenter.org) or contact the Classified Advertising Department

at 1-800-635-6991. Be sure to tell us the classification heading you would like your ad to appear under (see listings above). If no classification is offered, we will determine the most appropriate classification. Cancellations must be made 20 days prior to publication date. Send all advertisements to the address listed below.

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Fax: 1-781-893-5003  
Phone: 1-800-635-6991  
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### How to Calculate the Cost of Your Ad

We define a word as one or more letters bound by spaces. Following are some typical examples:

Bradley S. Smith III, MD.....	= 5 words
Send CV .....	= 2 words
December 10, 2007 .....	= 3 words
617-555-1234 .....	= 1 word
Obstetrician/Gynecologist ...	= 1 word
A .....	= 1 word
Dalton, MD 01622 .....	= 3 words

As a further example, here is a typical ad and how the pricing for each insertion is calculated:

MEDICAL DIRECTOR — A dynamic, growth-oriented home health care company is looking for a full-time Medical Director in greater New York. Ideal candidate should be board certified in internal medicine with subspecialties in oncology or gastroenterology. Willing to visit patients at home. Good verbal and written skills required. Attractive salary and benefits. Send CV to: Reply Box 0000, NEJM.

This advertisement is 58 words. At \$7.10 per word, it equals \$411.80. Because a reply box was requested, there is an additional charge

of \$65.00 for each insertion. The price is then \$476.80 for each insertion of the ad. This ad would be placed under the Chiefs/Directors/Department Heads classification.

### How to Respond to NEJM Box Numbers

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Advertisers may choose to have their classified line and display advertisements placed on NEJM CareerCenter for a fee. The web fee for line ads is \$60.00 per issue per advertisement and \$120.00 per issue per advertisement for display ads. The ads will run online two weeks prior to their appearance in print and one week after. For online-only recruitment advertising, please visit [nejmcareercenter.org](http://nejmcareercenter.org) for more information, or call 1-800-635-6991.

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NEJM is unable to forward product and service solicitations directed to our advertisers through our reply box service.

**Classified Ad Deadlines**

Issue	Closing Date
October 11	September 21
October 18	September 28
October 25	October 4
November 1	October 12

**Cardiology**

**ELECTROPHYSIOLOGY FELLOWSHIP** — Boston University Medical Center has an opening for its ACGME accredited Clinical Cardiac Electrophysiology Program beginning July, 2013. Candidate must have completed a three-year cardiovascular medicine fellowship. A one- or two-year fellowship position is available. Please send CV to: Robert Helm, MD, at: robert.helm@bmc.org; or fax to: 617-638-8814.

**HEART FAILURE CARDIOLOGIST, DARTMOUTH** — Section of Cardiology at Dartmouth-Hitchcock Clinic at Dartmouth-Hitchcock Medical Center seeking second BE/BC fellowship trained heart failure cardiologist. Advanced Heart Failure and Cardiomyopathy service, a non-transplant academic program managing pre and post-Transplant and VAD patients. Dartmouth@physician-openings.com

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**CARDIOLOGY, NEW JERSEY** — Premier nine-member cardiology group in central NJ is seeking a Noninvasive Cardiologist or Invasive Noninterventionalist Cardiologist to join group. Candidates should be BC/BE. This is a multiple office practice that includes noninvasive, interventional, and electrophysiology services. Please send CV to: suzannen@medicor.com

**CARDIOLOGY** — Cardiologist, clinical or invasive needed in Central NJ. Six-person group, three offices, includes interventional and EP services level 3. Echo experience preferred. Partnership opportunity. Full benefits. E-mail Mary Meyler at: mmeyler@rbcgpa.com. Fax: 732-738-0948.

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**FLORIDA, INTERVENTIONAL/PV CARDIOLOGIST** — Outstanding opportunity for BC/BE Interventional Cardiologist with experience/training in peripheral and carotid interventions to join premier 19-physician independent cardiology practice. The practice offers a full range of cardiac services including cardiac catheterization, interventional cardiology, in-office echocardiography, nuclear stress testing, PET and CCT, as well as a large clinical research program. Located on the campus of a nationally recognized heart hospital in beautiful Clearwater, Florida, we are committed to the highest of professional and ethical standards. Competitive salary and benefits leading to partnership. Contact: CEO, 455 Pinellas Street, Suite 400, Clearwater, FL 33756. Fax CV to: 727-445-1993; or e-mail: simmons@ccheart.com

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**THE STRELITZ DIABETES CENTER** — Division of Endocrinology and Metabolism, at the Eastern Virginia Medical School are seeking an Endocrinologist at the Assistant or Associate Professor rank (tenure track). The candidate will have completed an endocrinology fellowship and be BC/BE in Internal Medicine and Endocrinology. We are seeking an individual to join our group with interests in quality and the development of innovative clinical programs focusing on early intervention. The successful candidate will become an integral part of a system of care. The position includes a faculty appointment, teaching opportunities, and a competitive salary and benefit package. Previous experience with thyroid ultrasound preferred. For more information, please see our Display Ad. Forward CV to: [HRapps@evms.edu](mailto:HRapps@evms.edu). EVMS is an Equal Opportunity/Affirmative Action Employer/M/F/D/V and a Drug and Tobacco Free Workplace.

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**FAMILY MEDICINE POSITIONS NORTH OF BOSTON** — Hallmark Health Medical Associates seeks BE/BC family medicine physicians to join our busy practices. We are a growing, integrated network of employed primary and specialty care physicians committed to achieving clinical excellence. Voted one of Boston Magazine's best places to work in Boston! Competitive compensation/benefits package, 24/7 Hospitalist coverage, and excellent call schedule. Please send CV to Gina Mariona: [gmariona@hallmarkhealth.org](mailto:gmariona@hallmarkhealth.org); 781-338-7517.

**INTERNAL MEDICINE AND FAMILY MEDICINE, MASSACHUSETTS** — South Shore Medical Center, an Atrius Healthcare affiliate, has opportunities for Primary Care Physicians in both our Internal Medicine and Family Medicine Departments (FM includes peds but no OB). 100+ Provider, multispecialty group practice. On-site laboratory, Digital Imaging, and Urgent Care. Outpatient only; no hospital rounding. 50-Year history of excellence in quality care to the surrounding communities. Innovative technology and operations; strong visionary leadership. NCPA Certified patient-centered Medical Home. Participant in the Medicare ACO Pioneer program. Seven-year history of documentation in EpicCare EMR. Competitive salary and comprehensive benefits. Conveniently located 30 minutes south of Boston. Visit: [www.ssmcmedcenter.com](http://www.ssmcmedcenter.com), to apply on-line; fax CV to: 781-871-5677; or contact: [cweixler@ssmedcenter.com](mailto:cweixler@ssmedcenter.com) for more information.

**FAMILY PRACTICE, MASSACHUSETTS** — Physician, western Boston suburbs, Natick region. Shareholders over \$400k, Partners Network. Admit to teaching center. Seeking a BE/BC Family Practitioner for large group, multiple locations west of Boston. Mainly outpatient. Competitive benefit compensation packages in addition to productivity based earnings. Excellent schools, both public and private. [Harvard@physician-openings.com](mailto:Harvard@physician-openings.com)

**FAMILY PRACTICE PHYSICIANS** — Established, stable NYC health services organization seeks Family Practice BC/BE physicians to work in ambulatory care facilities. Spanish speaking a plus. Competitive salary/benefits. Fax CV to: 212-397-7351 or e-mail: [nyhealthcareers@yahoo.com](mailto:nyhealthcareers@yahoo.com). EOE M/F.

**MAINE** — Family Health Care Associates (FHCA), part of the Central Maine Medical family, seeks BE/BC family practitioner to join its well-established five-physician and four-nurse practitioner group. The long-standing outpatient practice utilizes Central Maine Medical Center's Adult and Pediatric Hospitalist services and provides medical care to a local private school, adding variety to the providers' work schedules. A modern, state-of-the art office space has an in-house lab, uses EMR, and staffs a part-time dietician/diabetic educator. Generous medical student loan assistance is available. Be a part of a group who is dedicated to their mission of caring for community members throughout their lifespan. Interested candidates should forward CV and cover letter to: Julia Lauer, Central Maine Medical Center, 300 Main Street, Lewiston, ME 04240; call: 800-445-7431; e-mail: [jlauer@cmhc.org](mailto:jlauer@cmhc.org); or fax: 207-795-5696.

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MAINE — Central Maine Medical Center, a growing regional referral center in Lewiston, is looking for a BE/BC Family Practitioner to join their expanding practice. The outpatient-only position offers medical school student loan assistance, competitive salary, and the opportunity to practice in physician-friendly Maine! Please forward your CV to: Julia Lauver, Central Maine Medical Center, 300 Main Street, Lewiston, ME 04240; call: 800-445-7431; e-mail: [jlauver@cmhc.org](mailto:jlauver@cmhc.org); or fax: 207-795-5696. Not a J-1 opportunity.

MAINE — Bridgton Hospital, part of the Central Maine Medical family, seeks BE/BC Family Medicine physicians to join practices in either Naples or Fryeburg. The opportunities include both inpatient and outpatient responsibilities with OB. Located 45 miles west of Portland, Bridgton Hospital is located in the beautiful Lakes Region of Maine and boasts a wide array of outdoor activities including boating, kayaking, fishing, and skiing. Benefits include medical student loan assistance, attractive call schedule, competitive salary, highly qualified colleagues, and excellent quality of life. For more information, visit their website at: [www.bridgtonhospital.org](http://www.bridgtonhospital.org). Interested candidates should contact: Julia Lauver, Central Maine Medical Center, 300 Main Street, Lewiston, ME 04240; call: 800-445-7431; e-mail: [jlauver@cmhc.org](mailto:jlauver@cmhc.org); or fax: 207-795-5696. Not a J-1 opportunity.

FAMILY PRACTICE, CONNECTICUT — Northeastern Connecticut for over 35 years. Join five physicians, a nurse practitioner, two physician assistants. Full spectrum of family medicine without ob and eventual practice partnership. Approximately two miles from the University of Connecticut. [Connecticut@physician-openings.com](mailto:Connecticut@physician-openings.com)

BOARD CERTIFIED INTERNIST OR FAMILY PRACTITIONER — To join busy, growing group practice in northern New Jersey. Excellent salary and benefit package. Beautiful community. Please e-mail resume to: [terri.urgo@comprehensive-healthcare.nj.com](mailto:terri.urgo@comprehensive-healthcare.nj.com) or fax to: 201-475-4132.

EMPLOYED FAMILY MEDICINE POSITION — Southern NJ (near Philadelphia). Virtua Health System seeks a Family Medicine physician to join an established, growing, and highly respected Family Medicine practice in Browns Mills, NJ. 100% Outpatient with 1 in 3 call. Pediatrics through Geriatrics. You will be busy immediately. An excellent compensation which includes a very competitive salary, production bonus opportunity, paid malpractice, and full benefits are offered. Southern New Jersey offers the culture and nightlife of Philadelphia as well as many of the country's finest restaurants, intriguing historical sites, fantastic shopping districts, exciting sports teams, captivating music venues, beautiful theater productions, and world-class museums. Just a short drive away you can also find yourself relaxing in the sun and sand of New Jersey's many wonderful shore resorts. South Jersey also has many charming towns with unique shops, superb dining, recreational events, and community celebrations. With the world-renowned Pine Barrens and many other state parks, New Jersey has a wonderful array of places for camping, boating, and hiking or any outdoor activity you desire. Contact Ken Sammut at: 888-372-9415; [ksammut@cejkasearch.com](mailto:ksammut@cejkasearch.com); or visit: [www.cejkasearch.com](http://www.cejkasearch.com). ID#146171NJ.

EMPLOYED FAMILY MEDICINE POSITION, NEW JERSEY SHORE — Virtua Health System seeks a Family Medicine physician to join an established, growing, and highly respected Family Medicine practice at the New Jersey shore in Northfield, NJ. 100% Outpatient with 1 in 4 call. Newborns through Geriatrics. You will be busy immediately. An excellent compensation which includes a very competitive salary, production bonus opportunity, paid malpractice, and full benefits are offered. Northfield offers a special charm that is so appealing that it is common to find generations of the same families living and staying in the area. Affordable homes, excellent schools, and recreational amenities add to the community's appeal. Just a short drive away you will find yourself relaxing in the sun and sand of New Jersey's many wonderful shore resorts including Ocean City, Margate, and Atlantic City. South Jersey also has many charming towns with unique shops, superb dining, recreational events, and community celebrations. With the world-renowned Pine Barrens and many other state parks, New Jersey has a wonderful array of places for camping, boating, and hiking or any outdoor activity you desire. In less than an hour you can enjoy the culture and nightlife of Philadelphia as well as many of the country's finest restaurants, intriguing historical sites, fantastic shopping districts, exciting sports teams, captivating music venues, beautiful theater productions, and world-class museums. In less than two hours, you can be in New York City. Contact: Ken Sammut at: 888-372-9415; [ksammut@cejkasearch.com](mailto:ksammut@cejkasearch.com); or visit: [www.cejkasearch.com](http://www.cejkasearch.com). ID#146172D96.

FAMILY PRACTICE — Hamptons, Long Island, New York. Well-established and respected group practice adding physicians due to growth. BC/BE Family Practitioner, call 1/6 for FP/nursery. Full-time positions, minimum four weekday office schedule, inpatient and SNF rounds, if desired. Comprehensive benefit package including paid malpractice, health, vacation, LTD, and 401(k) offered. E-mail CV to: [mmullin@southamptonhospital.org](mailto:mmullin@southamptonhospital.org)

FAMILY MEDICINE PHYSICIAN, SUBURBAN ATLANTA — WellStar Medical Group is seeking Board Certified/Board Eligible Family Medicine Physician for outpatient practice opportunities in our five-county service area, located northwest of Atlanta, Georgia. Competitive salary with comprehensive benefits package to include; malpractice coverage, medical/dental/vision insurance, disability/life insurance, 403b plus defined pension plan, and vacation/sick/CME allowance. WellStar is a non-profit system of five premier hospitals in the northwest suburbs of Atlanta. WellStar Medical Group is the largest non-academic medical group in Georgia with more than 540 primary care providers, specialists, and advanced practitioners. Contact: WellStar Provider Services; phone: 770-792-7539; fax: 770-792-1738; e-mail: [provider.positions@wellstar.org](mailto:provider.positions@wellstar.org). Please visit our website: [www.wellstar.org](http://www.wellstar.org)

KENTUCKY — 2013 Graduates, we have numerous opportunities for the following: Family Practice and all Internal Medicine subspecialties. Most of these openings will support J-1 waivers. Please forward your CV to Mr. Don Buecker, at: [dbuecker@fuse.net](mailto:dbuecker@fuse.net)

## Gastroenterology

THE BERKSHIRES, WESTERN MASSACHUSETTS — Private, three-physician, 100% GI practice seeks BC/BE Gastroenterologist to replace retiring physician. Early ownership in practice and competitive salary/benefits package. Excellent opportunity to live and work in an area known for its diverse cultural and recreational activities, just 2-3 hours from both Boston and New York City. Please contact: Brenda Lepicier, Berkshire Health Systems, 725 North Street, Pittsfield, MA 01201; [blepicier@bhs1.org](mailto:blepicier@bhs1.org); [www.berkshire-healthsystems.org](http://www.berkshire-healthsystems.org)

GASTROENTEROLOGIST WANTED — To join a five-Physician GI practice in Massachusetts. Excellent work environment in a community teaching hospital. Early partnership path. Expertise in endoscopic ultrasound preferred but not mandatory. E-mail CV to: [aamini@massmed.org](mailto:aamini@massmed.org)

GASTROENTEROLOGY, NEW HAMPSHIRE — Physician, Dartmouth academics. BC/BE Gastroenterologist and Hepatologist to become new faculty members. Opportunity section chief available as well. Compensation 80% salary, 20% RVUs. Excellent benefits package, sign-on bonus, relocation assistance, teaching new students, fellows, and residents. Great ski resorts, hiking trails, and lake side activities. [Dartmouth@physician-openings.com](mailto:Dartmouth@physician-openings.com)

CENTRAL MAINE MEDICAL GROUP — A multispecialty group practice, affiliated with Central Maine Medical Center, in Lewiston, Maine is seeking a BC/BE general gastroenterologist to be a part of our established GI team of seven dedicated physicians. This full-time, 100% GI position offers candidates the opportunity to assist in the development of a regional practice in Brunswick, Maine. Brunswick is a picturesque coastal town with great restaurants, a lively arts community, and is home to Bowdoin College. Interested candidates, please forward CV and cover letter to: Babette Irwin, CMMC, 300 Maine Street, Lewiston, ME 04240. Fax: 207-795-5696; e-mail: [Blrwin@cmhc.org](mailto:Blrwin@cmhc.org) or call: 800-445-7431. Not a J-1 opportunity. [www.cmmc.org](http://www.cmmc.org)

GASTROENTEROLOGIST, MAINE — Physician Central region teaching center. International Airport. Also need Gastroenterology Coastal Maine. Under one hour to Portland. Incredible real estate and salary structure. [maine@physician-openings.com](mailto:maine@physician-openings.com)

BC/BE GASTROENTEROLOGIST — St. Barnabas Hospital, Bronx, New York. Hospital based GI in a teaching environment. ERCP desired. Please fax Betty at: 718-960-3218 or call: 718-960-6207 for more information.

GI PRACTICE IN WESTCHESTER, NY — Close to NYC, has immediate opening for BC/BE gastroenterologist. Competitive salary, benefits, and partner track. E-mail CV to: [Pawan@nyendoscopycenter.com](mailto:Pawan@nyendoscopycenter.com)

GASTROENTEROLOGIST BC/BE WANTED — For a 100% GI group located in Suffolk County, Long Island, NY. Practice features state-of-the-art office endoscopy facility, strong infrastructure, and long history of professional success. Competitive salary with partnership option. Please respond to: [lidigestive@hotmail.com](mailto:lidigestive@hotmail.com); or fax: 631-706-7060.

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**GASTROENTEROLOGIST, NEW YORK CITY** — Lower East Side. Lucrative opportunity! Seeking highly qualified BE/BC Gastroenterologist. Work with the best of the best and earn what you are worth. Collegial atmosphere, pleasant environment. NYU affiliate. Also, Connecticut: Great family location. Friendly support staff. Group of highly successful GIs. Employed position. Call is 1:6. New state-of-the-art Endoscopy. Minutes to Hartford. Also, Massachusetts: Can be Academic. Minutes to Springfield, Massachusetts. Join two GIs in practice for hospital employed position. [lorileo@neprc.com](mailto:lorileo@neprc.com)

**GASTROENTEROLOGY, NEW YORK** — Kiplinger's 10 Best Places to Raise a Family: Middletown, New York, home of one of the best medical groups in America, Crystal Run Healthcare. Premier multispecialty group practice, among fastest growing medical practices in the country. 250 Providers, 40 medical specialties, 15 practice locations. Mid-Hudson Valley, lower Catskill region. Partnership track opportunities, best according MGMA standards. [crystalrun@physician-openings.com](mailto:crystalrun@physician-openings.com)

**NORTHERN VIRGINIA** — Two-person gastroenterology group looking for BC/BE person to join our exceptional practice dedicated to outstanding patient care. Please e-mail resume with references to: [gastroenterologyassociatespllc@gmail.com](mailto:gastroenterologyassociatespllc@gmail.com); or fax to: 703-771-9076.

**TWO GI PHYSICIAN PRACTICE SEEKING GI** — To take place of retiring GI in Raleigh, NC. Fully certified ASC. Minimal hospital work. Light call. One year to partnership. E-mail CV to: [Raleigh.gi.position@gmail.com](mailto:Raleigh.gi.position@gmail.com)

### Geriatrics

**MASSACHUSETTS: PREMIER PACE PROGRAM** — Located in the heart of Massachusetts, seeking a qualified Geriatrician to cover one of their four office locations. Be part of a seasoned interdisciplinary team ensuring effective health management of your 150-200 patient panel. Progressive practice environment and superb quality of life. Competitive base salary, incentive bonus, matching retirement, full benefits package, and generous relocation package round out this opportunity. Call Mike Jowdry at: 866-826-1217 or e-mail: [Michael.jowdry@merrithawkins.com](mailto:Michael.jowdry@merrithawkins.com) to learn more.

**GERIATRICS** — Massachusetts General Hospital, Boston area. Seeking Geriatrician for Instructor, Assistant Professor, or Associate Professor level to join Geriatric Medicine group practice, seven physicians. Call average seven times a year. Teaching residents and fellows. Candidate will run fellowship program, Harvard appointment. Four weeks' vacation, competitive two-year income guarantee. [MassGeneral@Physician-openings.com](mailto:MassGeneral@Physician-openings.com)

**GERIATRICS, CONNECTICUT** — Physician. Fairfield County. Opportunities within our network of 400 physicians. Outpatient only. Excellent benefits. Growing Yale New Haven Health System. Electronic medical records. Easy access New York City and Boston. Colleges and universities. [yale@physician-openings.com](mailto:yale@physician-openings.com)

**SEEKING HIGHLY QUALIFIED BC/BE INTERNIST/GERIATRICIAN** — With active New Jersey License to join an internal medicine practice in Essex county, NJ. Offered competitive salary, benefits, with employment leading to partnership potential. E-mail: [primeheartclinic@gmail.com](mailto:primeheartclinic@gmail.com); or fax: 201-332-1102.

**BC/BE PHYSICIAN** — Geriatric fellowship acquired. F/T for inpatient nursing home subacute care facility, with option to supervise residents and develop an internal medicine practice. Central NJ area. Full benefits. E-mail Mary Meyler at: [mmeyler@rbcgpa.com](mailto:mmeyler@rbcgpa.com); fax: 732-738-0948.

**GERIATRICIAN** — Join innovative Geriatrics program At Medstar Washington Hospital Center, a large teaching hospital in Washington, DC. Duties include House Call primary care (3-4 half-days/week), hospital geriatrics, teaching, and opportunity to create new programs. We seek a person with passion for the care of frail elders. Need board-certification in IM or FP. Geriatrics CAQ is preferred but not required. Competitive salary, based on skills and experience, plus great benefits. Start date flexible. Please e-mail letter of interest and CV to Eric De Jonge, MD, Director of Geriatrics, at: [karl.e.dejonge@medstar.net](mailto:karl.e.dejonge@medstar.net)

### Hematology-Oncology

**HEMATOLOGY/ONCOLOGY, MASSACHUSETTS** — Boston area. 30 Minutes to Boston. Well-established practice with three physicians. Rhode Island: Medical Director needed staff development, two Hematology/Oncology on staff. New Hampshire: Physician to join well-established medical center, Seacoast region. Salary, very competitive, great schools systems. New York: Physician needed, 300k+ salary. Upstate region, Oncologist needed. Two hospital. Offers salary guarantee of 300k. [lorileo@neprc.com](mailto:lorileo@neprc.com)

**HEMATOLOGY/ONCOLOGY, RHODE ISLAND** — Coastal. Director needed, Cancer Center. Help with strategy and staff development. Good track record of staff management, strategy implantation, and leadership skills. Extensive clinical practice experience. Join two. [rhodeisland@physician-openings.com](mailto:rhodeisland@physician-openings.com)

**HEMATOLOGY/ONCOLOGY, RHODE ISLAND** — Medical Director. Strategy and staff development. Join two Hematology/Oncology. Hospital has on-site chemotherapy, infusion therapy services, and radiation therapy. Build strong program. Southern area of Rhode Island. Also, New Hampshire: BC experienced Hematology/Oncologist. Join four in practice, share call with large group. Four-day work-week. Academic affiliated clinic. Also, Cape Cod, Massachusetts. BC Hematology/Oncology physician. Join four other Hematology/Oncology physicians. Clinical research for 20 years. Beautiful area, Cape Cod beaches. An hour to Boston. [lorileo@neprc.com](mailto:lorileo@neprc.com)

**FT BC-BE NJ LICENSED HEMATOLOGIST/ONCOLOGIST** — To join a group practice. Competitive salary and benefits. Candidates should be willing to do some Internal Medicine. [phyprac@gmail.com](mailto:phyprac@gmail.com)

**NEW JERSEY** — Five-person hematology/oncology private practice in southern NJ seeks a BC/BE medical oncologist/hematologist. Practice located in Philadelphia suburb. Practice is affiliated with NCI designated Comprehensive Cancer Center, participating in both cooperative group clinical trials and industry based clinical trials. Comprehensive benefit package available, as is partnership track. Send CV to: [jlosse@hoasj.com](mailto:jlosse@hoasj.com)

**NEW JERSEY, MEDICAL ONCOLOGIST** — Premier private practice in Hunterdon County seeks fourth associate for hospital based regional cancer. Conveniently located one hour from NYC and Philadelphia, our comprehensive cancer center provides infusion, radiation, research, social worker, dietician, patient navigators, and major academic affiliation. Competitive compensation package for self motivated, goal oriented physician. Please forward CV for consideration: [mozingo.kellie@hunterdonhealthcare.org](mailto:mozingo.kellie@hunterdonhealthcare.org)

**ONCOLOGIST** — Staten Island Physician Practice, the largest multispecialty medical practice on Staten Island, offers advanced, state-of-the-art medical treatments, expertise and cutting-edge technology. We are seeking a board-certified Oncologist. Our newly renovated facilities are a great place to work and we offer attractive salaries and benefits. Please send resume including a cover letter and salary requirements to [hresumes@si-pp.com](mailto:hresumes@si-pp.com) or fax: 718-816-3817. EOE M/F. [www.spp.com](http://www.spp.com)

**BOICE-WILLIS CLINIC (NEAR RALEIGH, NC)** — Signing and production bonuses. Consultative practice with telephone-only call. Excellent research opportunities. Strong, guaranteed referral base and partnership. Contact Susan Scott at: 800-678-7858, x64414; [sscott@cejkasearch.com](mailto:sscott@cejkasearch.com); or: [www.cejkasearch.com](http://www.cejkasearch.com). ID#146855NJ.

**LARGE HEMATOPOIETIC STEM CELL TRANSPLANT AND LEUKEMIA PROGRAM** — BMT-CTN Core Center, is seeking a new physician by July 2013. Prefer candidate with recent training and/or clinical research accomplishments at major academic program. Responsibilities include development and management of investigator initiated and cooperative group clinical trials, in addition to clinical care. Please send inquires to: Lawrence Morris, MD, e-mail: [lemorris@bmtga.com](mailto:lemorris@bmtga.com)

**NATIONWIDE HEMATOLOGY-ONCOLOGY OPPORTUNITIES** — Practice positions located in urban, suburban, and rural areas. Michael Kirschner, American Medical Consultants, 800-519-4868; fax: 312-896-1566; e-mail: [amcmike@hotmail.com](mailto:amcmike@hotmail.com); website: [www.amcphysicians.com](http://www.amcphysicians.com)

**SOUTHERN FLORIDA, PALM BEACH COUNTY** — Well-established four-physician Hematology/Oncology practice is looking for a BE/BC candidate. Excellent benefits leading to partnership. E-mail: [lloser@mspb.md](mailto:lloser@mspb.md); or fax: 561-968-0483.

**FLORIDA'S WEST COAST OPPORTUNITY** — Tampa Bay area community cancer center seeks energetic, congenial, entrepreneurial BC/BE medical oncologist/hematologist interested in fast-track partnership/ownership with radiation, diagnostic imaging, chemotherapy, and clinical trials. E-mail employer directly to: [ppcc@tampabay.rr.com](mailto:ppcc@tampabay.rr.com)

**CLEVELAND, OHIO** — Case Western Reserve University School of Medicine at MetroHealth Medical Center, a 731-bed teaching hospital, is seeking BC/BE Hematologist/Oncologist interested in practicing in an academic setting. Must have strong teaching skills and interest in clinical trials. The MetroHealth Cancer Care Center is affiliated with the Case Comprehensive Cancer Center, and is in the process of becoming a full member institution. Active participation in ECOG, CASE, Pharmaceutical, ACOSOG, and CTSU studies. Contact Timothy O'Brien, MD, at: 216-778-5802; or: [tobrien@metrohealth.org](mailto:tobrien@metrohealth.org). Case Western Reserve University and MetroHealth Medical Center are Equal Opportunity/Affirmative Action Employers.

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CENTRAL ILLINOIS HEMATOLOGY ONCOLOGY (CIHOC) — Board Certified/Eligible to join expanding Hematology/Oncology practice. CCOP, clinical trials, and medical school affiliation. Independent medical or research interests encouraged. Primary Hematology and/or Oncology emphasis equally encouraged. Excellent starting salary/benefits. Outstanding community, schools, and cultural opportunities. Calls to: Drs. Lanzotti, Agamah, Matthews, and Zhang, encouraged: 217-525-2524. Send resume to: Edem Agamah, MD, 747 North Rutledge, Suite 2204, Springfield, IL 62702-6700 or e-mail c/o Sue Coffee at: scoffee@cihoc.com

MISSOURI, ST. LOUIS — Comprehensive Cancer Care (CCC) is seeking a BC/BE medical oncologist to join our St. Louis practice. This is a physician-owned, community oncology practice offering a competitive salary plus benefits and partnership track. Contact Dean Walker at: 800-381-2637 or e-mail your CV to: dean.walker@usoncology.com

COLORADO, PUEBLO — Rocky Mountain Cancer Centers (RMCC), the largest private oncology group in Colorado, is in need of an additional BC/BE Hematologist/Oncologist to join their highly successful and expanding practice in Pueblo, Colorado. RMCC is part of US Oncology (the nation's largest cancer network) and the only Hem/Onc provider in Pueblo. The group is composed of four physicians and one nurse practitioner and call is 1:4. The new physician will enjoy an excellent quality of life along with the ability to build a practice quickly due to high patient demand. Competitive starting salary, full benefits and short partnership track. Contact: Dean Walker, 800-381-2637, ext. 4866; or e-mail CV to: dean.walker@usoncology.com. Competitive Visa candidates may apply.

### Hospitalist

OPPORTUNITY FOR NOCTURNIST, HOSPITAL MEDICINE — Flexible scheduling; 8-14 Shifts per month; Competitive salary and full benefits; Premium pay for nights; Hospital-based CPOE; One-year candidates welcome! Premier 170-bed community hospital, family friendly culture, good relations with referring physicians, located 30 minutes from Boston. Please send your CV to Jennifer Hart at: jhart@emersonhosp.org. Not a J-1 or HI-B opportunity.

THE HOSPITAL MEDICINE UNIT AT MASSACHUSETTS GENERAL HOSPITAL — Boston is recruiting BC/BE internists and nocturnists for its dynamic General Medicine Inpatient Service. This staff appointment includes a Harvard faculty appointment and opportunities for teaching. 168 12-Hour shifts/year. Flexible schedule, competitive salary/benefits package. Interested candidates should forward a cover letter and CV to: Dr. Dan Hunt in c/o Thaisha Guerrier at: tguerrier@partners.org; or: Massachusetts General Hospital, 55 Fruit Street, White 1003, Boston, MA 02114. Applications will be considered upon receipt and should be submitted no later than December 31, 2012. Massachusetts General Hospital is an Equal Opportunity Employer.

HOSPITALIST, CONNECTICUT — Physician. Academic Hospitalist opportunity. Yale-New Haven Hospital, New Haven, daytime clinical and teaching rotations. Monday-Friday daytime schedule. Excellent opportunity to work in well respected teaching campuses. yale@physician-openings.com

HOSPITALIST, BOSTON — Harvard academics, collegial group practice, adding *locums* or permanent. Minutes to downtown Boston. Block scheduling. Exceptional salary, benefits, teaching. Harvard@physician-openings.com

HOSPITALIST, MASSACHUSETTS — Physician needed. Hospitalist needed in coastal Massachusetts. \$50K Sign-on bonus. Openings for full-time hospitalists, employed position. Base salary: \$205-\$240K with 15% productivity. Internal Medicine trained dynamic team of 18 hospitalists, 200+ bed hospital. Hospitalists work block schedule, 5 on 5 off. CapeCod@physician-openings.com

BOSTON REGION — Minutes south. One of the most desired regions of Boston with excellent schools. Salary: \$202k base for newly graduating physicians, \$220k for experienced. RVU bonus with potential up to an additional \$80k. 17 Total shifts per month, very strong leadership. Harvard Hospitalist. Boston academics. Top paying SNF Rounding Positions. Coastal area, \$240k base, sign-on bonus \$50k. Academics, 40 minutes from Boston. Minutes to Providence. Nocturnist, eight weeks vacation, \$240k. lorileo@neprc.com

HOSPITALIST, MASSACHUSETTS — Physician, Rehabilitation Center, Greater Boston. Harvard teaching program downtown seeking two Hospitalists to join six others due to expansion of services. Flexible schedule, days or blocks. No nights. Accept HI-b and J-1 Visa candidates. Harvard@physician-openings.com

HOSPITALIST, RHODE ISLAND — Newport area, 7on/off. South of Providence seeking Hospitalists. Block, \$190k base. Visa compatible. lorileo@neprc.com; 781-829-2250.

HOSPITALIST, NEW HAMPSHIRE — Physician, \$40k Sign-on bonus. One hour to Boston, 24/7 program. Weekdays, work nine-hour shifts and on weekends 12-hour shifts. Base compensation \$200,000. Signing bonus, loan repayment, total bonus \$12,000-\$17,000. Quarterly schedule and comprehensive benefits package. HI-b sponsorship. Also, hospitalist, coastal seacoast southern New Hampshire. Visa compatible. Established, 14-member (7 on/7 off). Generous earned-time and loan repayment packages. newhampshire@physician-openings.com

HOSPITALIST, NEW HAMPSHIRE — Physician: Academic Hospitalist opportunity. Southern, 12-hour shifts, five-day blocks. Comfortable with ICU patient monitoring. Intensivists provide ICU consult. Consider HI-B candidates. Dartmouth teaching opportunities through NH. Central NH, top paying position, 7on/off, RVU. Southern NH, \$190k+RVU, 7on/off. Lake Winnepesaukee area, 7on/off, \$185k+ RVU, ICU a must. Northern NH, low census, M-F, great pay. lorileo@neprc.com

HOSPITALIST, BAR HARBOR, MAINE — Mount Desert Island Hospital (MDI) in beautiful Bar Harbor is seeking a daytime Hospitalist to work 7 on 7 off schedule. Looking for Board Certified/Eligible Internist or Family Practice physician comfortable with doing stress tests, in-hospital procedures, and caring for patients with multiple chronic conditions. A physician assistant will work along-side you and other Hospitalists to assure continuity of care. You will receive competitive compensation, full benefits including vacation and CME, assistance with medical education debt. MDI is a 25-bed hospital with an experienced collaborative and supportive medical staff. Join a great team of physicians, live on the coast of Maine just minutes from the entrance to Acadia National Park, hike, kayak, sail; it doesn't get much better than this! For details, contact Jane Ham: jham@themha.org; 800-546-4090.

HOSPITALIST, MAINE — Portland area, 7on/7off, \$188k+ RVU. Waterville area seeking block schedule Hospitalists, 7on/off, \$180k+RVU, sign-on and Loan repayment. Bangor area, 7on/off, \$190k+RVU. Coastal, north of Portland, scenic area, 7on/off, \$180k+RVU. maine@physician-openings.com

THE AIMS HOSPITALIST GROUP AT SAINT FRANCIS HOSPITAL — And Medical Center is seeking a BC/BE Hospitalist to staff an alliance site based at Johnson Memorial Hospital, 92-bed community based acute care hospital located in Stafford Springs, Connecticut. This is an excellent opportunity for a patient-driven and team-oriented hospitalist seeking to join a growing hospitalist program with 30 current members. Enjoy a favorable work environment with two other hospitalist in a 7x7 rotation and a modest patient census ranging from 14-25 patients. This team-oriented environment provides additional coverage for high volume days to allow each hospitalist to adequately and carefully coordinate the delivery of care for admitted patients. Enjoy a more favorable shift rotation with a 7am-7pm schedule where night shifts are handled by per diem staff. At Johnson Memorial Medical Center, you can enjoy providing health care, the way it should be. To learn more about this opportunity, please contact: Christine Bourbeau, Director of Physician Recruitment, today at: 855-894-5590. For immediate consideration, e-mail your CV and letter of interest to: CBourbea@stfranciscare.org. EOE-AA-M/F/D/V. Pre-employment drug screening.

HOSPITALIST, CONNECTICUT — Physician hospitalist in Eastern Region. 200+ Bed. Salary plus quarterly incentive. Will consider HI-b. Also nocturnist opportunities available. Connecticut@physician-openings.com

HOSPITALIST, CONNECTICUT — Yale teaching opportunity. Daytime teaching opportunity. Yale-New Haven Hospital, New Haven. Daytime Hospitalists for clinical and teaching rotations. Monday-Friday daytime schedule. Bonus structure based upon 20% collections. Fantastic benefits structure with 38 days PTO, fully covered benefits, malpractice with tail, matching annuity, and 403b. yale@physician-openings.com

HOSPITALIST — Yale-New Haven Hospital in New Haven, Connecticut. Daytime Hospitalists and FT Nocturnists. Clinical and teaching daytime schedule consists Monday-Friday schedule. Base salary up to \$180k dependent upon experience. Bonus structure based collections. Fantastic benefits structure, 38 days PTO. yale@physician-openings.com

HOSPITALIST, CONNECTICUT — Day position, Yale academics. Connecticut Nocturnist and weekend opportunities. Connecticut teaching/non-teaching opportunities. Block and shift schedules available. Top compensation. Yale teaching, Fairfield County. Non-teaching, weekday nights only, \$220k+. UConn opportunity, \$230k+. Hartford area, block schedule, 7on/7off, \$230K. Multiple night/weekend only opportunities, Fairfield County. Connecticut@physician-openings.com

HOSPITALIST, CONNECTICUT — (1) Exceptional high quality program, 3-4 day work week. Rewarding package, sign-on bonus. (2) Major teaching hospital, seven-day block daytime and nocturnist positions. (3) Monday to Friday daytime program. No nights or weekends. Submit CV to: John McCusker, Origin Search Group; OriginSearch@me.com; Telephone: 212-647-9467.

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**HOSPITALISTS** — Yale-New Haven Hospital seeks both daytime and night-time hospitalists. Daytime hospitalists attend on internal medicine patients with PAs/APRNs, and also have supervisory and teaching responsibilities on housestaff teams. Daytime hospitalists have 12 weeks of quality improvement time. Night-time hospitalists work a very flexible schedule of nights and weekend days, admitting to and providing coverage for the hospitalist service. Applicants must have demonstrated excellent teaching and patient care abilities and be BE/BC in internal medicine. Please send your CV to: Lara Hauslaib, Senior Manager, Hospitalist Service, Northeast Medical Group Inc., 20 York Street, CB 2041, New Haven, CT 06510, or e-mail it to: lara.hauslaib@ynhh.org. Please specify if interested in days or nights. Any questions, please call: 203-688-4748.

**TWO INTERNAL MEDICINE HOSPITALISTS ARE NEEDED** — In central NJ and an experienced Medical Director for Philadelphia. Seven on, seven off, 12-hour shifts. Teaching responsibilities. Average 15 patients/day. Competitive salary, full benefits. Easy access to Philadelphia and Manhattan! Contact Beth Peters: 800-621-0560; monica@hssimd.com

**ACADEMIC HOSPITALISTS NEEDED FOR NJ TEACHING HOSPITAL** — Looking to employ academic hospitalist physicians for NJ teaching hospital. Successful candidates will perform inpatient rounds including consultations, teaching, and supervising medical residents and medical students and will be encouraged to mentor residents for clinical research. No procedures, no code-blue/rapid response. Position offers an excellent compensation package with benefits. Please e-mail a copy of your CV to: hospitalistmedicine@aol.com

**HOSPITALIST, NEW JERSEY** — (1) Daytime block schedule. 15 Patients per shift. No codes/ICU. Earnings reported as highest in area. (2) Leadership opportunity. Days, community hospital, great location. (3) Weekdays only, daytime program, 8am to 5pm. Submit CV to: John McCusker, Origin Search Group; OriginSearch@me.com; tel: 212-647-9467.

**HOSPITALIST, PT/FT INTERNIST WANTED, NEW JERSEY** — Looking for a part/full-time Hospitalist (internal medicine) in South Jersey. Full-time position salary \$175k plus benefits. E-mail resume to: NICH67@HOTMAIL.COM

**HOSPITALIST, NEW YORK** — Southern region, \$400k potential, block schedule. Albany area, rotating shifts, flexible schedule, top benefits package in the state. Finger Lakes area, boaters' paradise, 4on/off, \$200k+RVU. Syracuse area, 7on/off, \$170k+RVU, vacation time and full benefits. P/T openings throughout Upstate NY. Utica area, M-F, \$240k base +RVU and partnership. lorileo@neprc.com; 781-829-2250.

**HOSPITALIST, NEW YORK** — (1) Seven-day block, greater metro area, sign-on bonus, excellent incentive. (2) Hospital owned program, days only, reasonable volume. (3) New York City: daytime program, Monday to Friday, No ICU. Submit CV to: John McCusker, Origin Search Group; OriginSearch@me.com; tel: 212-647-9467.

**HOSPITALIST** — The Division of General Internal Medicine, Department of Medicine at the University of Pittsburgh is building a large academic hospitalist program. The positions provide exciting opportunities for long term careers in patient care or a combination of patient care, teaching, and research. Competitive compensation commensurate on qualifications/experience. Send letter of interest and CV to: Wishwa Kapoor, MD, 200 Lothrop Street, 933 West MUH, Pittsburgh, PA 15213; (fax: 412-692-4825) or e-mail: Noslakka@upmc.edu. The University of Pittsburgh is an Affirmative Action, Equal Opportunity Employer.

**LEAD AND STAFF HOSPITALIST POSITIONS** — Lancaster County, Southeastern Pennsylvania. Highly regarded 138-bed community hospital seeks a Lead Hospitalist along with Staff Hospitalists for its growing Hospitalist program. The lead position will include both administrative and clinical work while the staff positions will be clinical. Seven days on, seven days off block schedule. 12-Hour shifts. Very competitive salary, administrative stipend, bonus, paid malpractice, and benefits are offered. The beautiful community in Lancaster County (service area of 150,000) offers outstanding schools, affordable homes, and many recreational and social amenities. It is located just 1.5 hours to Philadelphia, Baltimore, and 2.5 hours to New York City. Come see why so many physicians are making Lancaster County their new home. Contact Ken Sammut at: 888-372-9415; ksammuto@cejkasearch.com; www.cejkasearch.com. ID#145735NJ.

**HOSPITALIST, PENNSYLVANIA** — Central Pennsylvania, rotating shift. \$210k base, \$20k sign-on, \$25k RVU, great census. State College area, \$250k base+RVU up to \$50k, 7on/off. Central Pennsylvania, 7on/off, great college area, \$190k+RVU and \$40k in benefits. Western Pennsylvania, close to Pittsburgh, \$300k+, 7on/off. Directorship opportunity in Central Pennsylvania. Western Pennsylvania, 7on/off, \$350k potential. lorileo@neprc.com; 781-829-2250.

**HOSPITALIST, DIVISION OF HOSPITAL MEDICINE** — Department of Medicine, Georgetown University Hospital/Montgomery General Hospital. Georgetown University Hospital is seeking full-time hospitalists to join the expanding Division of Hospital Medicine. Physicians will have the opportunity to do rotations at both a community hospital and academic medical center, teach residents and students, as well as participate in research opportunities and ongoing quality improvement initiatives. Academic rank will be commensurate with prior experience. Interested candidates should forward their CV to: Michael Molineux, MD, Chief of Hospital Medicine, Georgetown University Hospital, 3800 Reservoir Road, NW, Washington, DC 20007. Fax: 202-444-5104; mxm27@gunet.georgetown.edu

**WASHINGTON, DC, AREA'S PREMIER HOSPITALIST GROUP** — Seeks BC/BE hospitalists and nocturnists for positions in North Virginia and Maryland suburbs. Competitive salary, full benefits, no Visa sponsorship. E-mail CV to: edavidson@hcmg.net

**HOSPITALISTS WANTED IN MELBOURNE, FLORIDA** — 2012 And 2013 graduates welcome. Interview expenses covered. Florida license and BC/BE in IM. H1-B and J-1 Visa sponsorship available. Send CV to Becki at: brevardshospitalist@hotmail.com; fax: 321-751-9505.

**NEW HOSPITALIST PROGRAM LOCATED IN KEY WEST, FLORIDA** — Is searching for two full-time Hospitalists for immediate opening at 160-bed hospital. No procedures required. Average 16-18 patients per provider per day. Guaranteed salary is \$230,000 plus bonuses and benefits. Excellent working environment for physicians. Perfect combination of work and lifestyle in this tropical paradise. For further information, please reply to Dr. Atilla at: keysmedical@yahoo.com. Will support H-1 Visa. No recruitment agencies please.

**HOSPITALIST NEEDED** — To join a practice in Louisville, Kentucky. Top salary, productivity, and benefits. Respond to: kjouja@aol.com; Fax: 502-410-0531. H1/J1 Visa considered.

**HOSPITALIST, INDIANA** — Lutheran Hospital seeks BC/BE Internal Medicine candidate to join expanding hospitalist team. Work 12-hour shifts with flexible scheduling. Over \$220K potential, previous experience considered, plus bonus structure. Possible student loan assistance. Work in large non-academic, regional tertiary hospital with all specialties represented. Based in Fort Wayne, second largest city in Indiana. Provides excellent, affordable lifestyle in progressive community of 250K+ population in one of top five physician-friendly states. H-1 candidates welcome. Send CV e-mail to: lteska@lhn.net; or fax to: 260-435-2810, Attn: Physician Recruiting.

**NOCTURNIST HOSPITALIST NEEDED — At Beaumont Hospital in the metro Detroit area. Seven days on, seven off, competitive salary and benefits package, H1-B Visa accepted. Please e-mail CV to: iulniculescu@yahoo.com**

**HOSPITALISTS** — Full-time faculty positions at rank of Assistant Professor. Myeloma Institute for Research and Therapy (www.myeloma.uams.edu), University of Arkansas for Medical Sciences, Little Rock. Leading center for treatment of multiple myeloma with 500 stem cell transplants annually. Excellent exposure to Hematology/Oncology and Infectious Diseases. Little Rock offers both urban and suburban lifestyles. Qualified candidates must have MD or equivalent and be eligible for Arkansas medical license. E-mail CV to: AronsonJanetL@uams.edu

**HOUSTON, TEXAS** — Excellent Hospitalist opportunity at Texas Medical Center. Growing program. H-1 Visa. Part-time and weekend coverage also available. Contact: sahoustonips@gmail.com

**TWO BC/BE HOSPITALISTS SOUGHT TO JOIN EXPANDING GROUP** — Flexible schedule with option of working 7 on/7 off, average patient census per day is 12-15. Three-day time rounders, one night physician, currently adding an afternoon "swing" shift. Work at the new Dixie Regional Medical Center, a 245-bed state-of-the-art regional referral hospital that opened in December 2003. This medical facility is a referral center for trauma and emergency services and houses medical surgical units, a 24-bed ICU, a 30-bed emergency department, and eight operating rooms. Offering a wonderful mild climate and exceptionally clean air, St. George offers a delightful, family-oriented lifestyle. It was rated as one of the safest communities in which to live. Send e-mail/fax CV to: Intermountain Healthcare, Attn: Deanna Grange, Physician Recruiting, 36 South State Street, 21st Floor, Salt Lake City, UT 84111; 800-888-3134; free: 800-888-3134. Fax: 801-442-3388. E-mail: PhysicianRecruit@imail.org. Web: http://physicianjobsintermountain.org

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**THE UNIVERSITY OF NEW MEXICO** — Is seeking part-time and full-time internists to join our faculty in beautiful Albuquerque, New Mexico. Enjoy the diversity of clinical care, teaching, as well as opportunities in research and program development in our well-established yet expanding Hospitalist Section. Collegial atmospheres in a physician run program and career development are highlights of these academic positions. We offer an excellent benefit and compensation plan, and a rich quality of life in the high desert of New Mexico. For more information, contact Rush Pierce, MD: [JRpierce@salud.unm.edu](mailto:JRpierce@salud.unm.edu). EEO/AA.

**THE UCLA HOSPITALIST SERVICE** — Has openings for full-time Hospitalists and Nocturnists at multiple sites. Positions include a mix of resident supervision on our ward service, co-management on surgical services, and inpatient coverage at several hospitals in the greater Los Angeles area. We also staff an outpatient preoperative clinic, post discharge follow up clinic, and select local extended care facilities. The working environment is collegial and intellectually stimulating with a very high physician retention rate. The successful applicant will enjoy a full-time faculty appointment at the David Geffen School of Medicine at UCLA as well as an attractive benefit and pension plan. California medical license required. Please contact Albert Haro at: [aharo@mednet.ucla.edu](mailto:aharo@mednet.ucla.edu) for further information. UCLA is an AA/EOE employer.

**SAN DIEGO HOSPITALIST POSITION AVAILABLE** — In beautiful San Diego, minutes from downtown. Join our prominent Hospitalist group and receive flexible scheduling and competitive salary. Must have California license. E-mail your CV to: [tcurry@sdcmg.com](mailto:tcurry@sdcmg.com)

### Infectious Disease

**INFECTIOUS DISEASE, RHODE ISLAND** — Physician. Northern Rhode Island. Join two ID physicians in large expanding multispecialty group. Strong interest teaching fellows in office. Academic medical center. [rhodeisland@physician-openings.com](mailto:rhodeisland@physician-openings.com)

**HARRISBURG, PENNSYLVANIA** — Well-established ID practice looking for fifth BC/BE physician. Emphasis on hospital/office consultations, HIV, and Infection Control. Fax CV to: 717-782-5971 or e-mail: [ltkatch@pinnaclehealth.org](mailto:ltkatch@pinnaclehealth.org)

**INFECTIOUS DISEASE PHYSICIAN** — To join a practice in Louisville, Kentucky. Top salary, productivity, and benefits. Respond to: [kjouja@aol.com](mailto:kjouja@aol.com). Fax: 502-410-0531. H1/J1 Visa considered.

**NORTHEAST OHIO INFECTIOUS DISEASE ASSOCIATES** — Five-physician/three-nurse practitioner. 100% ID private group in Northeast Ohio and 90% inpatient practice. Private practice affiliated with four medium-sized community based teaching hospitals and four long term acute care hospitals. Teaching and clinical research opportunities available. Benefits included. Competitive and/or negotiable salary depending on experience. One hour from two large metropolitan areas. Great schools and neighborhoods. Low cost of living. Fax CV: Attention: Angela, Northeast Ohio Infectious Disease Associates, 540 Parmalee Avenue, #610, Youngstown, OH 44510. Phone: 330-744-4369; fax: 330-744-1728; e-mail: [neoida@usawebnet.net](mailto:neoida@usawebnet.net)

### Internal Medicine (see also FM and Primary Care)

**INTERNAL MEDICINE POSITIONS NORTH OF BOSTON** — Hallmark Health Medical Associates seeks BE/BC internal medicine physicians to join our busy practices. We are a growing, integrated network of employed primary and specialty care physicians committed to achieving clinical excellence. Voted one of Boston Magazine's best places to work! Competitive compensation and benefits package, 24/7 Hospitalist coverage, and an excellent call schedule. Please send CV to Gina Mariona: [gmariona@hallmarkhealth.org](mailto:gmariona@hallmarkhealth.org); 781-338-7517.

**INTERNAL MEDICINE AND FAMILY MEDICINE, MASSACHUSETTS** — South Shore Medical Center, an Atrius Healthcare affiliate, has opportunities for Primary Care Physicians in both our Internal Medicine and Family Medicine Departments (FM includes peds but no OB). 100+ Provider, multispecialty group practice. On-site laboratory, Digital Imaging, and Urgent Care. Outpatient only; no hospital rounding. 50-Year history of excellence in quality care to the surrounding communities. Innovative technology and operations; strong visionary leadership. NCQA Certified patient-centered Medical Home. Participant in the Medicare ACO Pioneer program. Seven-year history of documentation in EpicCare EMR. Competitive salary and comprehensive benefits. Conveniently located 30 minutes south of Boston. Visit: [www.ssmcmedcenter.com](http://www.ssmcmedcenter.com), to apply on-line; fax CV to: 781-871-5677; or contact: [cweixler@ssmedcenter.com](mailto:cweixler@ssmedcenter.com) for more information.

**INTERNAL MEDICINE, MASSACHUSETTS** — Boston. 20 Miles southeast of Boston. Primary Care only. \$180K First year. Outpatient only. Loan repay, \$170,000. Sponsor J-1 waivers and green card applications for H1-b candidates. Health Professional Shortage Area designation, score of 13. [Harvard@physician-openings.com](mailto:Harvard@physician-openings.com)

**INTERNAL MEDICINE** — Academic affiliate, Newton Wellesley. Primary Care, Internal Medicine. Teaching, outpatient, employed, multispecialty practice. Partners Healthcare. Earning potential near 300k. [newtonwellesley@physician-openings.com](mailto:newtonwellesley@physician-openings.com)

**INTERNAL MEDICINE, MASSACHUSETTS** — Norwood and Dedham, physician needed. South of Boston/western Boston suburb. Earn close to \$300k. Seeking physician provide patient base. Outpatient. Reputable group, 70 providers, 4.5-day work week. 32 Face-to-face appointment hours per week. Excellent salary, benefits package, including six weeks' off. First year salary guarantee, then productivity. [lorileo@neprc.com](mailto:lorileo@neprc.com)

**INTERNAL MEDICINE** — Massachusetts General Hospital, Waltham, western Boston suburb. Harvard Teaching Institution looking full or part-time Internist. Outpatient practice. New practice designed with Patient Centered Medical Home concepts. Great location with top school systems, desirable real estate, and easy access to Boston. [MassGeneral@Physician-openings.com](mailto:MassGeneral@Physician-openings.com)

**INTERNAL MEDICINE, MASSACHUSETTS** — Physician, western Boston suburbs, Natick region. Share-holders over \$400k. Partners Network. Admit to teaching center. Seeking a BE/BC Family Practitioner for large group, multiple locations west of Boston. Mainly outpatient. Competitive benefit, compensation packages, addition to productivity based earnings. Excellent schools, both public and private. [Harvard@physician-openings.com](mailto:Harvard@physician-openings.com)

**INTERNAL MEDICINE** — Brigham and Women's: Physician needed, Boston area. Seeking primary care Internists for multiple site locations in the Boston area, currently employs over 130 primary care physicians and 15 locations. Teaching affiliate, Harvard Medical School. [Harvard@physician-openings.com](mailto:Harvard@physician-openings.com)

**INTERNAL MEDICINE/FAMILY MEDICINE** — Plymouth, Massachusetts Medical Group is currently seeking several full-time board certified/eligible internal medicine and family medicine physicians. These opportunities are within well-established practices located in a beautiful seaside community south of Boston. Competitive salary and benefit package with bonus and shareholder potential. Third-year residents are encouraged to apply. Send CV/inquiries to: [recruitment@pmgphysician.com](mailto:recruitment@pmgphysician.com) or fax to: 508-747-8274.

**INTERNAL MEDICINE, RHODE ISLAND** — Physician. Northern Rhode Island. Cohesive group of four physicians seeking additional provider due to growth. Part of 60-physician multispecialty group with offices throughout the state. Position can be outpatient only. Teaching. [rhodeisland@physician-openings.com](mailto:rhodeisland@physician-openings.com)

**INTERNAL MEDICINE, RHODE ISLAND** — Physician needed, northern RI. Salary: \$200k. Outpatient only. Well-established practice. Team oriented. Brand new state-of-the-art office building. Full EMR and on-site lab services. Easy access to Providence, Boston. Visa compatible. [lorileo@neprc.com](mailto:lorileo@neprc.com)

**INTERNAL MEDICINE POSITION IN BEAUTIFUL BRIDGTON, MAINE** — Bridgton Hospital, part of the Central Maine Medical family, seeks BC/BE Internal Medicine physician to join our practice. The position is transitioning to an outpatient only opportunity. Located 45 miles west of Portland, Bridgton Hospital is located in the beautiful Lakes Region of Maine and boasts a wide array of outdoor activities including boating, kayaking, fishing, and skiing. Benefits include medical student loan assistance, competitive salary, highly qualified colleagues, and excellent quality of life. For more information, visit our website at: [www.bridgtonhospital.org](http://www.bridgtonhospital.org). Interested candidates should contact: Babette Irwin, Central Maine Medical Center, 300 Main Street, Lewiston, ME 04240; e-mail: [birwin@cmhc.org](mailto:birwin@cmhc.org); call: 800-445-7431 or fax: 207-755-5855.

**INTERNAL MEDICINE POSITION IN BRUNSWICK, MAINE** — Parkview Adventist Medical Center, a 55-bed acute care hospital located in the beautiful coastal community of Brunswick, seeks BE/BC Internist to join established group. As an employed physician you will receive an attractive compensation and benefits package, including loan repayment, CME allowance, and relocation assistance. These benefits are enhanced by the scenic beauty and abundant outdoor adventure Maine lifestyle affords. Combine your talent and skills with our established excellent reputation of the best physician care. Interested candidates, please send CV to: Babette Irwin, Central Maine Medical Center, 300 Main Street, Lewiston, ME 04240. Fax: 207-795-5696; e-mail: [BIrwin@cmhc.org](mailto:BIrwin@cmhc.org); or call: 800-445-7431.

**INTERNAL MEDICINE, CONNECTICUT** — Physician. Fairfield County. Opportunities within our network of 400 physicians. Outpatient only. Excellent benefits. Growing Yale New Haven Health System. Electronic medical records. Easy access New York City and Boston. Colleges and universities. [yale@physician-openings.com](mailto:yale@physician-openings.com)

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**INTERNAL MEDICINE, CONNECTICUT** — Primary care, central Connecticut. Permanent and *Locum* positions available. Excellent opportunity to join expanding Center with more than 25 providers. Outpatient only. Monday through Friday work week. Excellent salary and benefits package offered. 25 Days off. Loan reimbursement. Easy drive to Connecticut seashore. Visa sponsorship available. Connecticut@physician-openings.com

**INTERNAL MEDICINE, CONNECTICUT** — South central, close to seacoast. Join six providers with nine office locations. Abundance of outdoor activities including boating, sailing, and fishing, and nearby Foxwoods. Close to Uconn and Yale. 35 Miles to Hartford. Connecticut@physician-openings.com

**INTERNAL MEDICINE, CONNECTICUT** — Hartford area, \$225k earnings. Productivity based. Outpatient only. 40-Physician group, 35 clinical hours. Full benefits. Reputable health care system. Home 32 higher education. Hartford@physician-openings.com

**INTERNAL MEDICINE, SOUTH EASTERN CONNECTICUT** — Experienced BE/BC Internist. Start date, Winter 2012, full-time. Established physician is leaving the practice. Full panel of 2000 patients; current average: 20 patients a day. Electronic Medical Record System. Outstanding opportunity in a unique and highly successful private practice, join two physicians and a NP. Very competitive salary and benefit plan with bonus opportunities and partnership available to the right physician. Please respond to Practice Manager at: Kelle.humphries@gmail.com

**PART-TIME OR FULL-TIME IN CONNECTICUT** — Immediate opening for Primary Care/IM physician. Bustling established FP/IM practice in New Haven area seeking BC/BE primary care physician (MD/DO). Full-service practice w/wonderful staff of trained medical assistants makes this position fabulous! Generous compensation package with bonuses, full benefits, and possible partnership track. On-call: One night per week, one weekend every sixth. Applicants with J-1 or H-1 Visa may apply. Send CV to: mgerme@heartcareassoc.com or fax: 203-407-5816.

**INTERNAL/FAMILY MEDICINE, CONNECTICUT** — StayWell Health Care, Inc., located in Waterbury, Connecticut has an immediate opening for a Board Certified/Eligible Internal Medicine and/or Family Medicine Physician. StayWell Health Center is a Federally Qualified Health Center serving a racially and ethnically diverse low-income patient population and provides comprehensive care in its three Waterbury locations. Student Loan Repayment possible. H-1 candidates welcome. Forward CV to: StayWell Health Center, 80 Phoenix Avenue, Suite 201, Waterbury, CT 06702; fax: 203-596-9038; HR@StayWellHealth.org

**SEEKING HIGHLY QUALIFIED BC/BE INTERNIST/GERIATRICIAN** — With active New Jersey License to join an internal medicine practice in East Orange, NJ. Offered competitive salary, benefits, with employment leading to partnership potential. E-mail: primeheartclinic@gmail.com or fax: 201-332-1102.

**BOARD CERTIFIED INTERNIST OR FAMILY PRACTITIONER** — To join busy, growing group practice in northern New Jersey. Excellent salary and benefit package. Beautiful community. Please e-mail resume to: terri.urgo@comprehensive-healthcarenj.com or fax to: 201-475-4132.

**EXCEPTIONAL OPPORTUNITY, 45 MINUTES FROM NYC** — Monmouth County, NJ. Salary top 5%, production incentive with partnership potential. Established primary care group. Flexible hours, minimal call, opportunity for growth. E-mail physician owner directly: md6099@gmail.com or apply on nejmcarecenter.org

**IM/FP NEEDED F/T, BC/BE** — Princeton area. Seeking ambitious, hard working physician for primary care office and nursing home work. Competitive salary/401k/Profit sharing. No inpatient. E-mail CV to: montmed@gmail.com. 908-874-8883.

**INTERNAL MEDICINE, PRINCETON, NJ AREA** — Established practice seeking IM to replace retiring partner. Office-based, EMR, easy call, strong PO. Partnership w/o buy-in. Starting 2013. Full benefits. Fax CV to: 609-443-0041; or: Job@HightstownMedical.com

**NEW JERSEY, NEAR PRINCETON AREA** — Seeking full-time and part-time BC/BE IM or FP physicians to work at mainly office based practice. Perfect for experienced or recent graduate. H-1 will be sponsored. Please send CV to: njdoctor1@yahoo.com

**NEW JERSEY PARTNERSHIP OPPORTUNITY (SHORE AREA)** — Well-established NJ practice affiliated with three major hospitals seeks conscientious, BC/BE IM physician for full-time career position leading to partnership. Some call required, but generous competitive salary and benefit package including possible relocation assistance. Located at the beautiful Jersey Shore, which is convenient to airports, skiing, water sports, and several major metropolitan areas. Perfect work/life balance location! Please forward CVs to employer at: rmatias@jsmpa.com

**INTERNAL MEDICINE PHYSICIAN** — Internal Medicine group on Long Island's North Shore is seeking a Board Certified Internist to join their rapidly expanding private practice with a strong focus on hospital medicine. They are affiliated with prestigious Nassau County hospitals and practice within a very friendly community environment. There is an excellent call schedule as well as an extremely competitive salary and generous benefit package. Send CV to: practicemanageraim@yahoo.com

**INTERNAL MEDICINE** — Hamptons, Long Island, New York. Well-established, respected group practice adding physicians due to growth. BC/BE, Internist call 1/8. Full-time positions, minimum four weekday office schedule, inpatient and SNF rounds, if desired. Comprehensive benefit package including paid malpractice, health, vacation, LTD, and 401(K) offered. E-mail CV to: mmullin@southamptonhospital.org

**UP TO \$150,000 IN LOAN REPAYMENT** — Signing bonus, and/or stipend. Housing assistance. Outpatient only. Flexible hours. Teach medical students from SUNY Syracuse, if desired. Finger Lakes Health, a multi-institutional health system located on Lake Seneca in Geneva, the heart of New York's wine country. Contact Michelle Kraft at: 800-678-7858, x64457; mkraft@cejkasearch.com; or visit: www.cejkasearch.com. ID#139933NJ.

**CLINICIAN** — University of Pittsburgh Medical Center, Division of General Medicine is seeking a full-time Clinician. Position includes both inpatient and outpatient clinical activities in an academic medical center. Leadership opportunities in specific areas of clinical care or quality improvement are also possible depending on the interest and qualifications of the candidate. Send letter of interest and CV to: Wishwa Kapoor, MD, 200 Lothrop Street, 933 West MUH, Pittsburgh, PA 15213; fax: 412-692-4825; or e-mail: Noskoka@upmc.edu. The University of Pittsburgh is an Affirmative Action, Equal Opportunity Employer. http://gmwebdev/ewi/dom/dgim/jobs.html

**PINNACLE HEALTH SYSTEM** — A leading non-profit health system in Harrisburg, Pennsylvania seeks a full-time Board-Certified Internist to be the anchor physician for Kline Health Center, an ambulatory care facility providing care to a diverse patient population including the underserved. The center is also home to the continuity practice of the Internal Medicine Residency program. The successful candidate will also provide supervisory support to three mid-level providers. An opportunity for resident teaching is available but not required. The system has identified Primary Care and transitions in care as key strategic priorities. Excellent compensation package and comprehensive benefits. Contact: Linda Campbell at: 717-231-8295 or: lbcampbell@pinnaclehealth.org; or view our website at: www.pinnaclehealth.org

**ACADEMIC HOSPITALIST FACULTY POSITION** — The Reading Hospital and Medical Center (TRHMC), a 700+-bed teaching institution, is an ideal setting for the education-minded Hospitalist. The Internal Medicine program supports 30 residents whose aggregate in-training exam scores are in the top quartile of the country. The hospital serves as a major teaching campus for two local medical schools and is active in teaching the hospital's FP and OB residencies. TRHMC is also a member of The Alliance for Academic Independent Medical Centers and the Council of Teaching Hospitals of the AAMC. As part of our Internal Medicine Faculty, you will divide your time between teaching, clinical practice, and quality-improvement initiatives. You will interact with residents and medical students, supervise patient care, participate in bedside teaching and didactic lectures, and act as a mentor to our residents. You will also play a key role in our Continuous Quality Improvement (CQI) program, supporting systems and processes that impact patient care, safety, and service excellence. MD/DO degree, completion of an Internal Medicine residency. Candidates must be able to be licensed to practice medicine in Pennsylvania, and board certified in Internal Medicine required. A minimum of three years teaching in an academic setting is also required. With a drawing area of more than 400,000, West Reading is the social and cultural hub of Berks County. The city has a vibrant arts community, great schools, and affordable housing. Close proximity to Philadelphia, New York City, and Washington provide further opportunities for an outstanding personal and professional lifestyle. http://www.readinghospital.org/medicaleducation. Contact Ken Sammut at: 888-372-9415; ksammuto@cejkasearch.com; or visit: www.cejkasearch.com. ID#142306NJ.

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**THE EASTERN VIRGINIA MEDICAL SCHOOL** — Division of General Internal Medicine is seeking a full-time Clinician Educator. Duties will include inpatient and ambulatory clinical care and supervision of students and residents. Candidates must be BC/BE in Internal Medicine and teaching experience is preferred. Academic rank and salary will be commensurate with qualifications. Please see our Display Ad for more information. Forward Cover Letter and CV to: HRapps@evms.edu. EVMS is an Equal Opportunity/Affirmative Action Employer/M/F/D/V and a Drug and Tobacco Free workplace.

**SEVENTH INTERNIST FOR MULTIDISCIPLINARY COMMUNITY HEALTH CENTER** — 90 Minutes from Washington and Baltimore. Call schedule 1:7. CHC status provides Federal Tort Claims Act liability coverage and potential Federal Loan Repayment. Salary, incentive compensation, standard benefits. Dynamic growth community. Contact Tina Burns: 304-596-2610, ext 1066 or send CV: tburns@svms.net; fax: 304-263-0984.

**INTERNAL MEDICINE PHYSICIAN, SUBURBAN ATLANTA** — WellStar Medical Group is seeking Board Certified/Board Eligible Internist for outpatient practice opportunities in our five-county service area, located northwest of Atlanta, Georgia. Competitive salary with comprehensive benefits package to include; malpractice coverage, medical/dental/vision insurance, disability/life insurance, 403b plus defined pension plan, and vacation/sick/CME allowance. WellStar is a non-profit system of five premier hospitals in the northwest suburbs of Atlanta. WellStar Medical Group is the largest non-academic medical group in Georgia with more than 540 primary care providers, specialists, and advanced practitioners. Contact: WellStar Provider Services, phone: 770-792-7539; fax: 770-792-1738; e-mail: provider.positions@wellstar.org. Please visit our website: www.wellstar.org

**INTERNIST NEEDED** — For growing multispecialty group in beautiful Brevard County, Florida. BE/BC, J-1 or H-1B candidate acceptable, attractive benefit package. Practice locations are minutes from beaches and Orlando attractions. Immediate hire. Contact Janet Cody at: janetecody@aol.com

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**PHYSICIAN-OWNED OHIO PRACTICE** — Seeking BC/BE internist or IM-peds for inpatient/outpatient primary care. EMR, on-site lab. Competitive salary, incentive bonus, partnership opportunity. CV to: patgoggin@me.com. 740-680-6895.

**CHICAGO PHYSICIAN INTERESTED IN WORKING IN AN EXECUTIVE HEALTHCARE ENVIRONMENT** — Performing physician exams on a healthy population? EHE International, the leader in preventive healthcare exams for almost 100 years, is seeking a part-time Internist, Family Practice, or Emergency Medicine Physician with a focus on preventive medicine to work in our Chicago medical facility from Wednesday through Friday. Our physicians deliver high-end medical services to corporate and individual patients by conducting thorough annual physical examinations with an emphasis on prevention, early diagnosis, and health education. Candidates must be Board Certified and have a current unrestricted State license and unrestricted DEA certification. Ideal candidates will also be competent to administer Bruce protocol stress testing. Please submit resumes and salary requirement to: hr@ehintl.com

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**OVERLAKE INTERNAL MEDICINE ASSOCIATES** — Is a physician owned, multispecialty practice with a rich 51-year history of providing outstanding patient care. We have grown from our current Bellevue locations and seek additional full-time physicians, board certified in Internal Medicine, to work in the Primary Care office of our newly built Issaquah location. We offer an appealing employee-to-owner track with excellent benefits, and a strong infrastructure to support our physicians. To learn more about this opportunity, please contact: Kristie Howard, CEO at: 425-454-5046 or respond to: HR@oima.org

**INTERNAL MEDICINE OR GERIATRIC OPPORTUNITIES, WESTERN WASHINGTON** — MultiCare Health System seeks multiple BE/BC internal medicine or geriatric physicians. Choose from 100% outpatient or a mix of inpatient and outpatient settings. Located 40 minutes south of downtown Seattle, Washington, the area boasts the advantages of an active northwest lifestyle; from big city amenities to the pristine beauty and recreational opportunities of the great outdoors. As an employed physician, you will enjoy excellent compensation and system-wide support, while practicing your own patient care values. For more information and to apply, please visit: <http://careers.blazenewtrails.org/NEJM>

## Nephrology

**NEPHROLOGIST** — Staten Island Physician Practice, the largest multispecialty medical practice on Staten Island, offers advanced state-of-the-art medical treatments, expertise, and cutting-edge technology. We are seeking a board-certified Nephrologist. Our newly renovated facilities are a great place to work and we offer attractive salaries and benefits. Please send resume including a cover letter and salary requirements to: hresumes@si-pp.com or fax: 718-816-3817. EOE M/F. www.spp.com

**NEPHROLOGIST BC/BE** — Excellent partnership opportunity with expanding four-physician practice looking for fifth in pleasant upstate New York. Practice includes all phases of hospital/office nephrology with acute and chronic dialysis. Teaching opportunities available. Competitive compensation package offered. Send CV to: bsims@nhacny.com

**NEPHROLOGIST POSITION AVAILABLE** — A thriving Nephrology practice is seeking another Nephrologist to join our well-established practice in a beautiful suburb of Atlanta. Very competitive salary and benefits. An established partnership track. Contact JoEllen Garrett at: 770-304-3724 or send CV to: kidneyclinic@aol.com

**BUSY NEPHROLOGY PRACTICE** — Is looking to add an associate by 07-2013 or earlier to meet referral needs in University town 45 minutes east of Atlanta, Georgia. Competitive salary and benefits. Partnership offered. Excellent school system. E-mail resume at: ngncmd@gmail.com. J-1 or H-1 Visa can apply.

**NEPHROLOGY OPPORTUNITY IN CENTRAL GEORGIA** — Rapidly growing Nephrology practice is seeking a BE/BC nephrologist. Competitive salary and benefits package w/established partnership track. Near Atlanta, Georgia. Candidates may e-mail CV to: kidneydoc840@gmail.com

**NEPHROLOGIST NEEDED IN GEORGIA** — Located in southwest Georgia, growing Nephrology practice seeking BE/BC Nephrologist. Currently has four physicians and four NP/PAs; call split equally between the physicians. Cover seven outpatient dialysis centers, one PD/home hemo center, and two local hospitals. Established partnership track, competitive salary, and benefits package. Fellows welcome. Interested candidates may e-mail CV to: rdistefano@bellsouth.net or fax to: 229-889-9386, to the Attention of Practice Administrator.

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**SE FLORIDA, BE/BE NEPHROLOGIST** — For immediate or 2013 position in growing, high demand practice. Great potential. Coastal lifestyle. kidneyhtrn@att.net

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**NEPHROLOGIST WANTED** — For busy, well-established Chicagoland nephrology office. Competitive salary and benefits. Fax CV to: 847-506-1917.

**BC/BE NEPHROLOGIST** — To join a two-person private practice at university-affiliated hospital in desirable suburb north of Chicago. This practice values high-quality patient care. Office adjacent to main hospital and dialysis unit. Telephone: 847-432-7222; fax: 847-432-9360; e-mail: mds33@yahoo.com

**OKLAHOMA KIDNEY CARE** — Interviewing for hardworking third BC/BE nephrologist. Dynamic 100% adult nephrology practice with excellent life/work balance. Strong home and in-center dialysis program with opportunities for partnership and dialysis clinic ownership. No J-1/H-1. E-mail CV: nephrologyokc@yahoo.com

**PROMINENT, ESTABLISHED LARGE NEPHROLOGY GROUP** — In northeast Oklahoma seeking an additional qualified interventionalist/nephrologist and an additional nephrologist for partnership tracks. Both positions include dialysis, hospital, and office. BC/BE, superior salary. For some info about Tulsa, see: www.tulsachamber.com/general/334/living-here. Send CV to: nephrology@nsok.org

**NEPHROLOGISTS NEEDED NATIONWIDE** — The Nephrology Physician Network has specialized in helping nephrologists since 1996. We have the jobs. 818-667-7133; e-mail CV to: jackshirk2009@gmail.com

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**Neurology**

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**Obstetrics & Gynecology (see also Primary Care)**

**OB/GYN POSITIONS NORTH OF BOSTON** — Excellent opportunities for BC/BE physician to join well-established, growing practices just outside of Boston. Hallmark Health Medical Associates is a growing, integrated network of employed primary and specialty care physicians committed to achieving clinical excellence. Voted by Boston Magazine as one of the best places to work! Competitive compensation/benefits package and excellent call schedule. Please send CV to Gina Mariona: gmariona@hallmarkhealth.org; 781-338-7517.

**GYNECOLOGIC ONCOLOGIST, SUBURBAN ATLANTA** — WellStar Medical Group is seeking Board Certified/Board Eligible Gynecologic Oncologist for practice opportunity in Marietta, located approximately 25 miles northwest of Atlanta, Georgia. Competitive salary with comprehensive benefits package to include; malpractice coverage, medical/dental/vision insurance, disability/life insurance, 403b plus defined pension plan, and vacation/sick/CME allowance. WellStar is a non-profit system of five premier hospitals in the northwest suburbs of Atlanta. WellStar Medical Group is the largest non-academic medical group in Georgia with more than 540 primary care providers, specialists, and advanced practitioners. Contact: WellStar Provider Services, phone: 770-792-7539; fax: 770-792-1738; e-mail: provider.positions@wellstar.org. Please visit our website: www.wellstar.org

**Pediatrics, General (see also Primary Care)**

**THE MEDICAL DEPARTMENT AT MASSACHUSETTS HOSPITAL SCHOOL (MHS)** — Is seeking a BC/BE pediatrician, interested in caring for children with special health care needs. Training or experienced in Developmental Behavioral Pediatrics will be a plus but not essential. Position is PT. Excellent benefits package and call schedules. Send CVs to: julie.babineau@state.ma.us

**PEDIATRICS** — Affiliated with Brigham, Newton-Wellesley, and Boston Children's Hospital. General Pediatrics/Adolescent Medicine, Dedham region. Seeking BE/BC Pediatrician with an interest in Adolescent Medicine. Full or part-time position. Competitive compensation. Excellent earnings potential. harvard@physician-openings.com

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**IMMEDIATE OPENING, PEDIATRICIAN** — Planning and implementation of the primary care service delivery to children per health care plan and written protocols. Provide primary, secondary, and tertiary care, including counseling and referral within multidisciplinary team. BC/BE. Mississippi License required. Requirements: Medical degree from an accredited medical school and a current license to practice medicine in Mississippi. Must have completed a residency for Board Eligibility and Board Certification. Deadline to apply: December 14, 2012. Apply via e-mail to: chenderson@aeahc.org; or mail to: Cheryl Henderson at, Post Office Box 1216, Clarksdale, MS 38614. Aaron E. Henry Community Health Center, Clarksdale, MS is an Equal Opportunity Employer.

**Primary Care**

**THE BERKSHIRES, WESTERN MASSACHUSETTS** — Private practice and hospital-based Primary Care opportunities available. Excellent opportunity to practice in a beautiful and culturally rich area while being affiliated with a health system with award winning programs, nationally recognized physicians, and world class technology, just 2-3 hours from both Boston and New York City. Please contact: Brenda Lepicier, Berkshire Health Systems, 725 North Street, Pittsfield, MA; blepicier@bhs1.org; 413-395-7866; www.berkshirehealthsystems.org

**SOUTHEASTERN MASSACHUSETTS, PC PHYSICIAN** — At Wrentham Dev Center. Shriver Clinical Services is seeking a physician to provide acute and chronic medical care to adults with intellectual disabilities. Mon-Fri. No weekends, no on-call. Experience in the field of ID is a plus. On-grounds group practice of MDs/NPs. Salary, benefits. Call Suzanne: 508-384-5567.

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**MULTISPECIALTY GROUP IN THE BRONX** — Providing primary care in office and nursing home, has opportunity for primary care physician. Competitive salary and excellent benefits. Please send resume to: ssahgal@essenmed.com; or fax: 914-574-5149.

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**PRIMARY CARE, INTERNAL MEDICINE, AND FAMILY MEDICINE** — Methuselah Medical Services, a high quality family medical services, seeks skilled internal medicine, family medicine, emergency medicine, or urgent care medicine physicians to join this busy and expanding practice. We offer highly competitive compensation and benefits package and very flexible schedule. Our busy practice is located in prime area of southern Westchester County of New York. Candidate, please fax your CV and cover letter to: 914-636-1967; or send e-mail to: rbessien@gmail.com

**PRIMARY CARE FAMILY PRACTICE AND INTERNAL MEDICINE** — BC/BE. Excellent employment/ownership opportunity to join a multispecialty group in southern California growing desert community east of San Diego. J-1/H-1 candidates welcomed. Reply Box 2399, NEJM.

## Psychiatry

**ADULT AND CHILD PSYCHIATRY, MAINE COAST** — Pen Bay Medical Center seeks full-time BC/BE Adult and Child Psychiatrists to join our hospital-employed, community-based behavioral health network serving clinics in Rockland, Damariscotta, and Belfast. Competitive salary and comprehensive benefit package with outstanding loan repayment program. Maine offers spectacular natural beauty, four-season recreation, rich cultural opportunities, great schools, and safe communities. Forward confidential inquiries to John Bragg at: jbragg@penbayhealthcare.org; or call: 207-596-8214.

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**PULMONARY/CRITICAL CARE, MASSACHUSETTS** — Harvard teaching group, minutes north of Boston. Experienced needed. Coastal community, Pulmonary/Critical Care. Sleep option. Join well-run six-physician Pulmonary practice. Partners Healthcare collaborations, Mass General. Also Physician needed, southeastern, 20 miles from Boston. Premier system. Full time. Join two Pulmonologists. Electronic Medical Record system. Easy access public transportation. Harvard@physician-openings.com

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## Rheumatology

**ACADEMIC RHEUMATOLOGIST, CENTRAL CONNECTICUT** — The Academic Rheumatology Division of the Saint Francis Hospital and Medical Center is currently seeking a Clinical Educator to join our established rheumatology group. This group practice is made up of four board-certified rheumatologists within a large, hospital-based, academic multispecialty group. The practice is affiliated with the Saint Francis Hospital and Medical Center, a 617-bed facility. The successful candidate will participate in clinical practice and hold teaching responsibilities for rheumatology fellows, residents, and medical students from the University of Connecticut School of Medicine. Our group has specific clinical and research interests in the autoimmune diseases. We treat and study a large cohort of SLE, RA, Sjogren's, vasculitis, and antiphospholipid syndrome patients. If you are a talented rheumatologist, interested in an excellent career opportunity located in beautiful New England, please contact: Christine Bourbeau, Director of Physician Recruitment, 855-894-5590; or e-mail a letter of interest and CV to: cbourbea@stfranciscare.org

**RHEUMATOLOGIST** — Immediate opening for BC/BE full-time or part-time Rheumatologist for busy primary care/multispecialty group in northern NJ. Excellent opportunity for highly motivated individual in well-established practice. Flexible hours. E-mail CV to: mmsassociation@yahoo.com

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**GENERAL SURGERY, NEW HAMPSHIRE** — Seeking general surgeons to join respected Dartmouth Academic Section. Each position will combine general surgical clinical practice at nearby community setting and academic clinical practice at Dartmouth. Teaching medical students and residents. Academic appointment. Top of the line compensation and full benefits. Dartmouth@physician-openings.com

**GENERAL SURGERY POSITION IN BRUNSWICK, MAINE** — Parkview Adventist Medical Center, a 55-bed acute care hospital located in the beautiful coastal community of Brunswick, seeks BE/BC General Surgeon to join established group. As an employed physician you will receive an attractive compensation and benefits package, including loan repayment, CME allowance, and relocation assistance. These benefits are enhanced by the scenic beauty and abundant outdoor adventure Maine lifestyle affords. Combine your talent and skills with our established excellent reputation of the best physician care. Interested candidates, please send CV to: Babette Irwin, Central Maine Medical Center, 300 Main Street, Lewiston, ME 04240. Fax: 207-795-5696; e-mail: BIrwin@cmhc.org; or call: 800-445-7431.

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**GENERAL SURGEON, SUBURBAN ATLANTA** — WellStar Medical Group is looking for a Board Eligible/Board Certified General Surgeon for well-established practice, with 1:4 call. Minimally invasive fellowship required. The practice is located in Douglasville, located approximately 25 miles northwest of Atlanta, Georgia. Surgical cases are performed at WellStar Douglas Hospital and WellStar Paulding Hospital. Competitive salary with comprehensive benefits package to include; malpractice coverage, medical/dental/vision insurance, disability/life insurance, 403b plus defined pension plan, and vacation/sick/CME allowance. WellStar is a non-profit system of five premier hospitals in the northwest suburbs of Atlanta. WellStar Medical Group is the largest non-academic medical group in Georgia with more than 540 primary care providers, specialists, and advanced practitioners. Contact: WellStar Provider Services, phone: 770-792-7539; fax: 770-792-1738; e-mail: [provider.positions@wellstar.org](mailto:provider.positions@wellstar.org). Please visit our website: [www.wellstar.org](http://www.wellstar.org)

### Surgery, Orthopedic

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**ORTHOPAEDIC SPINE, 100%, TWIN CITIES PARTNERSHIP** — For nearly 25 years our group has successfully served the Twin Cities. Our practice has grown significantly and we are looking to add another qualified surgeon to the team. Bring your entrepreneurship, initiative, and team-player attitude to our group! Employed arrangement with partnership option; Four clinics and interventional pain centers; Earning potential in the top 10%, MGMA 2011. Tim Kephart, 573-814-5950; [tkephart@tlrec.com](mailto:tkephart@tlrec.com)

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### Graduate Training/ Residency Programs (see also Related Specialties)

**WEILL CORNELL MEDICAL COLLEGE** — AHRQ Fellowship and MS program in Clinical Epidemiology and Health Services Research. Two-year program. Focus on health services research, clinical epidemiology, health disparities, or health policy. Individual research projects, methodological training/mentorship. US Citizens/Permanent Residents only. E-mail: [taw2018@med.cornell.edu](mailto:taw2018@med.cornell.edu)

**ST. LUKE'S-ROOSEVELT, NYC** — An affiliate of Columbia University is accepting applications for its fellowship in clinical cardiac electrophysiology, beginning July 1, 2013. The position will allow trainees to work in its newly completed Arrhythmia Institute. The fellowship will offer a wide range of experiences in clinical electrophysiology with state-of-the-art ablation equipment including Stereotaxis for the treatment of complex arrhythmias along with opportunities in a broad range of research projects. Interested candidates should contact Tony Marmolejos, at: [IMarmole@chpnet.org](mailto:IMarmole@chpnet.org); or call: 212-523-2887.

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