



No newsletter next week

Weekly News

Archived issues of the AMR newsletter may be found [here](#).

Sample documents and contracts may be found [here](#).
AMR salary surveys - Years [1998](#)[1999](#), [2000](#), [2003](#)

July 14, 2005

Life doesn't require that we be the best, only that we try our best.

H. Jackson Brown Jr.

The doctor is **IN!**

Have you wanted to sample using AMR eBase, the internal database for your own in-house use, but just can't get it to register or find it a little confusing? Call or email us for an appointment to walk you through the features. Please have twenty undisturbed minutes set aside. We'll even register it for you to get you started. To learn more about the features of AMR eBase, click [here](#).

You are a recruiter, right? Then, we KNOW you have an opinion! Drop by our [discussion board](#) and post your thoughts on the topics posted. If you would like to suggest a topic, just email us!

Need a business web page? Already have one, but need an update? Need to buy your own domain name (www.your business name.com) for a web site? Call or e-mail us! Reminder: We'll also host your business web page for only \$15.00 per month! We will link your business web page to positions on the AMR database for \$10 per month (if your web page resides on the AMR server)! The link is \$25 per month if your web page is on another server. For a demo go t www.littleassoc.com and click "View Physician Opportunities".

Want this [cool](#) AMR banner for your web site?




Just let us know and let people know you are a proud member of AMR !



There were 77 positions and 179 candidates entered on the AMR database last week for a total of 3,383 positions and 6,164 candidates!

Know someone who would be a good fit in **AMR**? Let us know and we will send them info! We even have a nifty DVD!
If you wish to submit an editorial or photo for this newsletter, please do so by e-mail no later than Tuesday evening



Happy Birthday to...

**Connie Keen,
Ginger Sattler,
Susan Craig,
Greg Pilgrim,
Sante Chary,
Paul Taylor,
Rich Bonacci,
W.L. Pate
and
Thomas Kite!**

Take the day off, ya'!!!!



2004 Physician Compensation Survey: Big demand, bigger paydays

by Susanna Moon

Physician Compensation Survey shows how far primary-care docs lag behind their specialist colleagues in pay range, growth

The usual rules of supply and demand that move markets are certainly at work in the business of healthcare. With specialties such as cardiology among the biggest drivers of the industry's dollars, doctors practicing in those fields also are commanding the biggest raises and the fattest pay packages.

According to participants in Modern Healthcare's 11th annual Physician Compensation Survey, specialists continued to reap the biggest income rewards last year, while primary-care physicians earned lower-than-average pay increases.

This year's survey compiles results from 13 companies that track physician salaries (See Data trackers for more information). Some firms poll different respondent pools from year to year, which

accounts for the erratic percentage changes last year for some physician titles.

According to the Medical Group Management Association, one of the survey respondents, specialties outside of primary care, saw an 8% rise in median compensation last year among a short list of 23 benchmark specialties charted by the organization. Primary-care physicians, meanwhile, reported their salaries rose just 2.4%, compared with a 5% median increase in 2003 for all physician titles, to \$217,684. The accompanying survey charts reflect average total cash-compensation figures.

"Most specialties exhibited some, but not significant, increases in compensation," says Dan Stech, director of survey operations at the MGMA, with jobs in ophthalmology, cardiology, radiology and urology leading the specialty pack with the highest pay-percentage increases.

Compensation up, charges down

Cardiologists recorded a 13.6% jump in median total cash compensation last year, according to the MGMA's survey, while logging a 4.1% drop in the amount they charge for those services. The discrepancy is important, Stech says, because it suggests cardiologists could be generating income from work outside their clinical duties, such as "certain ancillary (procedures) in imaging and radiology."

Technological advances can help pad physician incomes by making their professional skills more valuable, but they also reward physician owners whose group practices invest in hot new medical equipment that consumers demand.

Other nonprofessional services included in total cash-compensation calculations and reported on tax filings include incentive pay, honorariums for giving speeches or other public appearances, profits from business ventures and research stipends. Many of the larger cardiology groups have sizable research departments in addition to imaging centers and the like, Stech says, which often supplement physician income.

The MGMA figures for group practice physicians historically have ranked them among the top salary earners because doctors who own a piece of a practice are able to boost their income in other ways. Their hospital-employed peers-without as many opportunities to generate extra income, such as those specialists sampled in many other surveys included in this report-tend to be on the lower end of the pay scale. Also, the MGMA conducts a separate survey for academic physicians whose practices-and thus their compensation figures-are not comparable with private physicians sampled in its main survey.

The 13 surveys represented in this report use different methodologies, track different pools of physicians and poll a large range of sample sizes, which accounts for the wide range of data represented.

The discrepancy in pay and charges for cardiologists also could mean they are seeing fewer patients while generating higher profit margins. The same is true for ophthalmologists who are benefiting from medical advances in laser eye surgery that net higher margins and can be performed on an outpatient basis.

Physicians with another high-flying specialty title-orthopedic surgeon-earned average salaries between \$307,000 and \$497,000, among the highest-paid of all specialties. Averages for the specialty are not included in the chart but were provided to Modern Health care for the report.

"If they're making less than \$300,000, they're in a highly capitated area," Marc Bowles, vice president of physician searches for Delta Medical Consulting in Dallas, says of orthopedic surgeons,

who routinely secure 10% signing bonuses.

Wages for physician titles vary widely by specialty and increase with the number of years of experience, according to the MGMA survey. For example, the median income for family practice doctors with one or two years' experience was \$130,000, while family practitioners with eight to 17 years under their belts made a median salary of \$158,527, a difference of 22%.

The salary gap is wider for higher-demand specialists. Cardiologists, for example, see a median income of \$218,156 when first starting out, while commanding a hefty median increase to \$358,403, up 64%, later in their careers, according to the MGMA.

As they age, physicians seek to balance their professional careers with family and other personal pursuits. "It's kind of a migration toward a better quality of life," Bowles says.

Doctors often pay their dues early in their careers by working 18 to 20 hours per day, seven days a week, then make a transition to fields in outpatient care and other less-demanding work, Bowles says.

Delta is working with a teaching hospital in Ohio to put together a hospitalist program, bulking up the number of hospitalists at the facility to a dozen or so, to free up specialists for other duties and shorten their workweeks.

Mandates limiting resident workweeks also are increasing the demand for hospitalists to fill in the gaps.

According to Modern Healthcare's survey, hospitalists earned an average of \$139,900 to \$186,500 per year, up an average of just 1% for all respondents—with pay percentage changes running the gamut from a drop of 8% to an increase of 7%—but Bowles expects to see their pay surge in years to come as demand grows.

Average hospitalist pay rose to a high of about \$181,000 in last year's survey, from a high of about \$159,000 in 1999, the first year Modern Healthcare began tracking the title.

Linked to productivity

Many firms cited in the survey also say doctors' earnings are tied to productivity.

"Physician salaries are leveling off to some degree," says Joe Goddard, president and managing partner of Goddard Healthcare Consulting, another participant in this year's survey. He says that trend could be tied to recent gains in the stock market that raise their overall income.

The market rebound "took some of the heat off them," Goddard says. "They no longer feel pressured to work 15-hour days."

With the malpractice insurance crisis threatening to erase those income gains, many survey firms also report that recruitment efforts now regularly include extending so-called tail coverage-or insurance to cover gaps as physicians change policies to take on new jobs.

Investment gains also could lead to earlier-than-planned retirements for older, more experienced doctors, Goddard says, which raises the issue of future physician shortages and what that demand will do to physician salaries in the years to come.

Anesthesiology

Compensation ranges from \$255,000 to \$380,714

Cardiology (noninvasive)

Compensation ranges from \$267,500 to \$380,000

Emergency Medicine

Compensation ranges from \$167,621 to \$246,760

Family Practice

Compensation ranges from \$146,000 to \$170,682

General Surgery

Compensation ranges from \$232,500 to \$297,208

Hospitalist

Compensation ranges from \$139,900 to \$186,500

Internal Medicine

Compensation ranges from \$147,417 to \$212,000

Neurology

Compensation ranges from \$169,304 to \$246,636

Obstetrics/Gynecology

Compensation ranges from \$221,286 to \$295,200

Oncology

Compensation ranges from \$228,141 to \$389,167

Pathology

Compensation ranges from \$204,698 to \$360,000

Pediatrics

Compensation ranges from \$131,000 to \$172,058

Psychiatry

Compensation ranges from \$145,000 to \$202,800

Radiology

Compensation ranges from \$201,699 to \$445,333

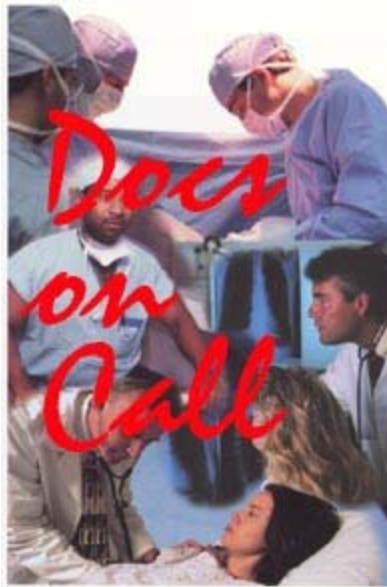
Urology

Compensation ranges from \$251,974 to \$437,818



Inside AMR

This section is dedicated to news about our members. If you have made a split, have business or family news or pictures you want to share with your associates, please send no later than Tuesday evening. We'll be happy to include your announcements!



DOC (Docs On Call) project .

We have established a call center to contact practicing physicians as well as 2006 residents by phone. They will be in all specialties. We are averaging about 100 responses per month. That number is expected to increase with the addition of 2006 residents.

Our call center will call about 2,500 physicians per month for 3 months. We will begin this session June 1. AMR members who participate pay a quarterly fee of \$375.00 for the three month subscription. At \$125 per month, we feel this is a very reasonable rate. Daily responses are delivered to each AMR member participant's email. Further, we have established a password secured, searchable database for candidate viewing anytime on the AMR server. The database can also be downloaded in different formats or records may be printed out.

If you wish to be included in our next 3 month subscription, please [email](#) us. Please be aware when invoiced, that amount will be due upon receipt.

Members who have signed up for June through August:

Bill Selvey - Williamlaine
 Eric Naegler - Total Healthcare Services
 Stan Kent - Stan Kent & Associates
 Eva Page - Eva Page & Associates
 Bud Setzer - Practice America
 Chris Warner - Panther Enterprises
 Neal Fenster - Enterprise Medical Services
 Brenda Lewis - B.E.L. & Associates
 David Simmons - Invision Medical
 Jim Faulkner - Medical Search Consultants
 Brenda Buck - AIM Consultants
 Corrinne Casey - MedPro
 Sal Eren - Medserve
 Jeff Vairin - SearchOne
 Wayne Parton - Psychiatrists Only
 Tom Staley - Technical & Executive Rec
 Kathy Reid - Arrowhead Physician Recruiting and Placement

W.L. Pate - Pate Resources Group
Dave Seehaver - Professional Medical Placements
Sharon Romero - Medmax
Christi R. Miller - Physician Services of North Texas
Shane Roberts - Allied Health Services
Jim Davis - The Davis Group
Robert Acton - Acton Sell Associates
Alvin Kahn - Alvin Kahn and Associates
Susan Craig - Susan Craig Associates
Eliane Kane - Kane, Rivera & Associates

I have terrible news. It seems that Montana has just recently experienced a plague of over-sized Trout. In the name of conservation, I have volunteered to go forth, taking the burden on my shoulders and assist Ken Penrod with determining a plan to implement to resolve this hideous problem. I will be leaving July 20th and hope to have good news for all by the 25th. Wish me luck

Randy Little



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The Congressional Medal of Honor



The President, in the name of Congress, has awarded more than 3,400 Medals of Honor to our nation's bravest Soldiers, Sailors, Airmen, Marines, and Coast Guardsmen since the decoration's creation in 1861.

For years, the citations highlighting these acts of bravery and heroism resided in dusty archives and only sporadically were printed. In 1973, the U.S. Senate ordered the citations compiled and printed as Committee on Veterans' Affairs, U.S. Senate, Medal of Honor Recipients: 1863-1973 (Washington, D.C.: Government Printing Office, 1973). This book was later updated and reprinted in 1979.

Now we feel it's time to do our part; to pass on some of these heroic accounts. No, it has nothing to do with our industry, but important to remember and reflect upon, just the same.

CHRISTIAN, HERBERT F.

Rank and organization: Private, U.S. Army, 15th Infantry, 3d Infantry Division. Place and date: Near Valmontone, Italy, 2-3 June 1944. Entered service at: Steubenville, Ohio. Birth: Byersville, Ohio. G.O. No.: 43, 30 May 1945. Citation: For conspicuous gallantry and intrepidity at risk of life above and beyond the call of duty. On 2-3 June 1944, at 1 a.m., Pvt. Christian elected to sacrifice his life in order that his comrades might extricate themselves from an ambush. Braving massed fire of about 60 riflemen, 3 machineguns, and 3 tanks from positions only 30 yards distant, he stood erect and signaled to the patrol to withdraw. The whole area was brightly illuminated by enemy flares. Although his right leg was severed above the knee by cannon fire, Pvt. Christian advanced on his left knee and the bloody stump of his right thigh, firing his submachinegun. Despite excruciating pain, Pvt. Christian continued on his self-assigned mission. He succeeded in distracting the enemy and enabled his 12 comrades to escape. He killed 3 enemy soldiers almost at once. Leaving a trail of blood behind him, he made his way forward 20 yards, halted at a point within 10 yards of the enemy, and despite intense fire killed a machine-pistol man. Reloading his weapon, he fired directly into the enemy position. The enemy appeared enraged at the success of his ruse, concentrated 20-mm. machinegun, machine-pistol and rifle fire on him, yet he refused to seek cover. Maintaining his erect position, Pvt. Christian fired his weapon to the very last. Just as he emptied his submachinegun, the enemy bullets found their mark and Pvt. Christian slumped forward dead. The courage and spirit of self-sacrifice displayed by this soldier were an inspiration to his comrades and are in keeping with the highest traditions of the armed forces.

Cyber-Tips

Hidden Task Bar

Would you like to hide your taskbar and have it appear when you need it? Just right-click any blank area on your taskbar (your taskbar is what your Start button sits on) and select "Properties" from the menu that pops up. Select "Autohide" or "Auto-hide taskbar" from the resulting screen.

Now, your taskbar will disappear when you move your mouse away from it and re-appear when you bring your mouse back.



I'm outta here 'til next week!

[email us](#)