



Episode 12 - Working With a Recruiter - Top Insider Advice

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SM: “I think that candidates don't understand that recruiters have about six to ten seconds to go through a resume.”

HF: Welcome to The Doctor's Crossing Carpe Diem podcast. If you're questioning your career in medicine, you've come to the right place. I'm Heather Fork, a former dermatologist and founder of The Doctor's Crossing. As a master certified coach, I've helped hundreds of physicians find greater happiness in their career, whether in medicine, a nonclinical job, or something else. I started this podcast to help you discover the career path that's best for you and give you some resources and encouragement to make it happen. You don't need to get stuck at the white coat crossroads. So pull up a chair, my friend, and let's carpe that diem.

Hello, hello and welcome back to The Doctor's Crossing Carpe Diem podcast. This is episode number 12. Today, I'm bringing you some rare insider information to help with your nonclinical job hunt. My special guest is one of my favorite recruiters. None other than a wonderful Syl Marcus. Syl has been working as a physician recruiter for over 20 years and is currently a senior physician recruiter in the healthcare sector. I've known Syl for a while now and she impressed me early on with her genuine heart for helping physicians. A lot of you have questions about recruiters when you're looking for a nonclinical job. Some of the common questions are: is there such a thing as a recruiter who can help me explore different

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nonclinical areas? How do I find a recruiter? What's the best way to make a great impression? Physicians also wonder what the heck is happening when a recruiter is very interested at first, and then drops them like a hot potato. We have a lot to unpack today and I'm very happy to have Syl Marcus here to give us the insider scoop and share her expertise. Hey, Syl, thanks so much for joining us today.

SM: Thank you, Heather, for the warm welcome and inviting me to join you and your listeners this morning. Happy to be here.

HF: Yes. Great, great to have you. Let's start out by having you tell us about your role as a physician recruiter.

SM: Sure, I'd be happy to. I am currently a physician recruiter for a health insurance company. I recruit for all physician roles across the enterprise in the United States, and recruit both nonclinical as well as direct patient care physicians.

HF: So within a nonclinical area?

SM: Correct.

HF: All right. So is there such a thing as a recruiter who could help a physician look at a wide variety of nonclinical careers? Or do they really need to find someone in specific sectors such as you, such as how you work?

SM: Well, I would say it depends on what they're looking for. So if you have a physician that is looking for a nonclinical role in, say, an insurance company, certainly and they would need to seek out a recruiter that works in that industry. If they were looking to do disability claims or legal reviews, they would seek recruiters in those specialty areas. So I would recommend that



they would definitely align what they're looking for with a recruiter that actually works in that segment.

HF: Yeah, so sort of as if we use an analogy to medicine, it would be a specialist in a way that you would go to. They're not like a general broad nonclinical recruiter who can help them figure out what they should even go into.

SM: I think any recruiter can help guide, right? I mean, that's part of what we do is we recruit for different roles in an organization or in a hospital setting, whether it be clinical or nonclinical roles. So, I think that they can definitely approach any recruiter for that guidance. And then they could guide them to possibly who they might want to speak with or possibly the industry in which they're looking to enter.

HF: Okay, that's good advice. Can you also help us understand the different types of recruiters that there are and which category you fall into?

SM: Sure. So, there's different types of recruiters. There are in house recruiters and agency recruiters, I have a bias towards in house recruiters, of course. That's all I've ever done. And our focus is a little different as an in-house recruiter. We are focused on recruiting the best talent for our organization. Whereas I feel sometimes agency recruiters are looking more for that warm body. And that quota, right, and not so much helping guide them to the right company and the right role. So that to me is the biggest difference between an in-house recruiter versus an agency recruiter. And I think that those are the two main recruiters, you will see whether you explored, you know, LinkedIn or any of the other online resources.

HF: That makes sense because if you're working for the company, you have a vested interest in having that candidate work out because if they don't, it's



not going to look good for your track record and it's not helping the company.

SM: Exactly. And so for in-house recruiters, we look more for the fit, right? So it's more about retention for us than actually just filling your role. So we want to make sure that we marry the perfect fit with the hiring manager. And so we really do look at our turnover. We make sure that we find physicians that are ready to make the transition, whether it be in a nonclinical role, or transition to our unique model in our patient care sector. So again, it's a little different. We're only recruiting for one organization so we really take a lot of pride in finding that ideal candidate. Whereas agency, they're looking for a lot of different organizations. So they're looking more for the quantity versus I think sometimes the quality, making sure it's the right fit.

HF: Now for a physician who maybe has identified a company, or at least a sector that they're interested in working for, and they'd really love to find an in-house recruiter such as yours to contact, what are some of the ways they could go about doing that?

SM: Some of the ways to find a recruiter, I think, first of all, I am a true believer in networking with colleagues. Most of the physicians that have contacted me have come from a referral. So I am a big advocate for networking through social media groups such as LinkedIn, such as Facebook. Not so much, I haven't seen it so much with Twitter, and the other social media sites. But certainly LinkedIn. Another way, I think, would be just to Google. Sometimes when we Google companies, and we look at their websites, a lot of times they'll tell you who their staffing recruiter is and then you can reference that in like a LinkedIn platform and make contact. So really, two

of the best ways I think is networking and just googling the organizations that you're interested in and finding a recruiter.

HF: Now let's say for example, a physician identifies a recruiter on LinkedIn for a company that he or she is interested in, what's a great way to reach out to help ensure a response back, and what's a poor way to reach out that might, where you might, you know, sabotage yourself?

SM: Well, I particularly like when physicians reach out, connect with me, and then send me a note. There is a feature in LinkedIn where you can actually send a note with your connection request, and they tell me exactly what they're looking for, why they wanted to connect with me. And then they asked me if I have any time to chat the next week or two. So for me, the direct method, instead of sending me you know, notes down the line, where it's not as fresh in my head, I prefer if they just come straight out and ask me directly, if I have any roles, they tell me a little bit about them, and ask me if I have time to connect. So for me, that is the best route.

What they want to stay away from would be to contact recruiters and send them more of a blanket request, right? So more of something that they send all the recruiters where they say I am so and so. I am, you know, looking for a job with your company, and keep it extremely vague and manufactured, right? So I say always put that personal touch on and stay away from, you know, blanket connection messages and make it more personal. Because you'll have a better response if you actually know the company and the recruiter that you're outreaching. So instead of just one blanket message to actually have a message that's specific to that organization and that recruiter, because that tells us you took a little time to do your homework, and that you're actually interested in a role with our company.



- HF: That is such great advice. And it's so on point, too, because nobody wants to just feel like they're being used. And when someone doesn't take the time to look at your LinkedIn profile, find something and personalize that message, and really speak to you, it's a put off. I like to think of this as in the analogy of dating. Like if you're dating someone, you wouldn't just send them a form letter to write to get a response to them. But that's what it can feel like on LinkedIn even though it's not a dating site.
- SM: Exactly. A lot of times I think physicians think they have one resume that they want to send to everybody. But in essence, the best way to get noticed is to customize that resume to the role you apply to.
- HF: That's another really good point. And we can talk about the resume for a minute and then come back to the relationship with the recruiter. This is such a key area. And I have to tell my listeners that Syl Marcus actually helped me with the resume kit that I created to help you convert your CV to resume. I showed her the template that's in that kit and we worked over it to make sure it was optimized for the recruiter because that's the whole point. One of the things that Syl helped me out with was the summary statement at the beginning, which is where you really want to get the recruiters attention. And after she read the one that we worked through together, she said, *I have almost everything I really need to know about this candidate in the summary statement.* Do you remember that, Syl?
- SM: I do, I do. And I stick by that statement because I think that candidates don't understand that recruiters have about 6 to 10 seconds to go through a resume. We usually receive at least 50 to 100 resumes per role.



- HF: Yeah, that's a lot, you know, that you're busy! (Yeah). You can't sit there with a cup of coffee like you're reading a novel and just take all the time you want.
- SM: Of course, and one of the things we look for too is keywords, right? So keywords are important. So if you're applying to a utilization management role, you want to make sure that any touch point as far as if you worked on a utilization management subcommittee, or if you did any UM work whatsoever at that stated in that professional summary. There's a couple of things that I think are really key. One is years of clinical experience, because one of the things you'll find when you look for a nonclinical role is that we have requirements, and most companies have a requirement of at least five years post residency. So having the years of medical practice in your summary is ideal. Your board certification is ideal because most companies will require that in addition to any state licensure, because in the UM world, especially state licensure, the more, the merrier, [right?] is what they look for. [Right] So I think it's important to have all of those pieces in a professional summary. Because when I read that, and I see any of those buzzwords that I need to find in candidate profiles, I will pull your resume. And if I don't have time in that second to really take a deeper dive and look through it, I will print it, I will save it and I will go back to it. So it's really important to have those key experiences and background information in that summary.
- HF: This is such great information. So I hope you're you guys are listening and not multitasking because this can make or break the recruiter actually reading your resume. Now for the keywords, so do you recommend that they get those out of the job description and find ways to organically incorporate them into the resume?



SM: Absolutely. I always recommend customizing your resume for the job you are applying for. You want to make sure your resume reflects the right experience and relatable skills to the role. That's key. Keywords are important in drafting a resume such as if you're applying, like I said, to utilization, make sure you add anything related to UM. Okay, so your clinical background is great but anything you can add that adds value to what you're looking for will help you get noticed faster. So you always want to make sure that you really read through that job description. And anything that you can relate over to your current skill set will help you get noticed. You want to always make sure that you know those things, even if it appears that it's not relevant to the role or you don't see that it brings any value. But most times, what you think won't bring value does. Okay? So any subcommittees, anything that you have done outside of clinical care would be relevant when you're applying to a nonclinical role, okay? Even if you had, you know, you're supervising nurse practitioners, or you were teaching medical students, that shows that you're able to lead and that also shows that you're able to do administrative stuff along side with your clinical responsibilities. So really, anything that you can list definitely do so.

HF: I love this because you're listing specifically a lot of the transferable skills that physicians have but they often take for granted, and they might not even think to include them.

SM: Right. And most of the time, they don't, you know, one of the things that I loved from docs that I talked to, and when I see a very generic resume, and what I mean by a generic resume, is they have taken basic information from their CV and just moved it over to their resume. So I know where their license is, I know that they've provided patient care for the last, you know, 30 years, right? So when I see that one of the things that I always ask the



doctor is I say, can you now send me an email and include a summary of all of the things that you have been involved in, all the initiatives, whether it be with hospital, whether it be with a multi specialty Medical Group, anything that that you've been involved with, outside of direct patient care? Can you give me a summary and usually, I am quite surprised, pleasantly surprised, by all the information they include. And that's what I attach to their, their resume, because I think that that is the piece that our hiring manager is going to look at, and they're going to say, yes, you know, this person, you know, would be a great fit in this role. They have X, Y and Z. Whereas if we're just going off of their very generic resume, you know, one of the things that I will know is that education is important. And I have a lot of physicians that like to put it on that front page. But we already know you're a doctor. What we want to know is what outside of that piece have you done in your career. So, so, I think that's the most important thing to stress is always customize, always look at that job descriptions, always align your skills. And if you don't think it's important, and you omit it, always ask your recruiter, because you'll be surprised at what we feel will help you move forward in our process.

HF: These are great tips. And so just to recap, it's best to convert your CV to a resume, but then customize that resume using the job description. And when you write it, really think of your reader who's the audience you're creating it for, and that she, she or he might have 6 to 10 seconds to decide yay or nay, so you have to, you know, prioritize the most important information.

Now, let's talk a little bit so about that first interview with a recruiter. Some people think it's going to be an informal chat. Other physicians tell me *I thought it was going to be an informal chat, but they asked me tough*

questions. And so, what's the best way for a physician to prepare for that interview?

SM: Sure. So in the initial conversation with the recruiter, make sure you are extremely transparent. The more you can share about yourself regarding your interests, your timeline, your salary expectations, the more productive of a conversation you will have. Okay? So, in my opinion, that initial conversation with the recruiter is an exploratory conversation. Okay? So it's an exchange of information. And I am a strong believer that the more information you can share, right, the not only the more productive of a conversation, but the more equipped I am to guide you to the right role. Or, the flip side of that is if you share some information with me that you may feel as an obstacle, I could either A: you know, move that stressor from you and kind of talk through that. Or B: we can come up with a plan, right? So some physicians come to me and they have some dings in their background and they feel like you know, they're never going to get hired or no one's ever going to look at them. But the truth is that it's usually a lot worse than they think it is.

HF: Usually, not as bad as they think it is?

SM: Right? Yeah. So it's usually not too bad and it's usually something that if we know, on the front end, we can manage. So I am, again, strong believer in that initial conversation to put it all out on the line, right? So I need to be able to present you in your best light. And in order for me to do that I need all the information.

HF: I think that's going to surprise and hearten some of the listeners there, you know, because they probably feel like, you know, they have to hide some things or just put a certain face out there. And you brought up a really good

point is this question of compensation, and a lot of physicians will ask me. *So if I'm asked that question, should I put a number out there? Is that going to be bad? Should I wait for them to put a stake in the ground? Can you give us some guidance on how to handle that whole topic of compensation?*

SM: Sure. So most people think talking about compensation in an interview is like taboo, right?

HF: It's like sex, like you don't talk about sex, politics, or religion, or compensation.

SM: And compensation. So a couple of things that I do, I always put my candidates at ease, because I, in that initial conversation, I go through it, and I don't come out and ask you what you're making, because it really in the end doesn't matter to me, okay? What matters to me is that you are okay with our market value and our internal equity for the goal. So where I work today, we have job codes, and for every job code has a compensation package that's attached to it. And so we really stay within that market value for that role, because it's important for us. And you know, also for the physicians that are currently in that role performing that job, right, that we have something that's consistent. So what I like to do is I like to go through the whole package. So I will tell you, we pay x, y and z, here is our three tiered structure. Here's what you need to do to meet those 100% benchmarks and this is what you are eligible for each and every year. Right? So I go through it, and then I ask them if they have any questions or concerns, and then we have that discussion. Okay? I'm not saying that, you know, we come in and we say, this is your base. And you know, we're set in stone here, because everything is dependent on, you know, your experience, what you bring to the table, a lot of different factors, right. But

I'm very upfront about that, I'll tell you exactly what I can do, exactly how far I can push.

HF: And guys, this is one reason why I love Syl is because you can tell that she really has a heart for helping physicians, being transparent, helping them figure this whole thing out and not have a bunch of smoke and mirrors in the process. But I know that some of you have been in a situation where you are applying for a job, you're interviewing, you're going through multiple interviews, and you have no idea what the salary even is, in that kind of situation, Syl, when is it appropriate for a physician to ask that question?

SM: Right away.

HF: They can ask it right away even if there's no transparency about it, nobody's telling them anything, it doesn't make them look greedy, or like their priorities are in the wrong place?

SM: No and quite the contrary, I think their priorities are in the right place. Right? So I think there's a myth out there that you know, you're supposed to go into these conversations and just talk about the job and talk about your skill set and how your skill set, you know, and passions and experience aligns to the role, right? How you'll be a great employee for this employer. Part of that package is financial security. And so I think that there is this myth where you can't talk about it, you can't ask it. And I'll tell you what, I would much rather have that transparent conversation in minute one. Then in the 11th hour, we're about \$300,000 apart.

HF: Don't waste anybody's time.

SM: Exactly. So and I've had that happen. It's a horrible feeling. It's a, it's a horrible feeling for the hiring manager, for the candidate and of course for me, so nobody wants to be in that type of situation. So that's why I always recommend, let's have a conversation upfront, let's talk about this role in its entirety, to make sure that it's all of your needs.

HF: Well, that's really good advice. And it just makes sense. It's kind of like if you're dating, you want to find out if this person wants to have kids or not, like why wait till you've been dating a year to figure it out. Right, be a deal breaker. All right, I know we're getting close to time here and I could spend another couple hours with you because you have so much great advice here. Let's look at that question of what happens if a recruiter comes on really hot and interested in you? You think things are going well, and then they ghost you? I'm sure there's different reasons for that. But can you give a little insight into that dynamic?

SM: Sure. So a couple things, right? So I think that a couple of things happen. When you feel like you were in your words, “dropped like a hot potato” right? So first of all, recruiters are generally swamped with lots of different candidates for a lot of the different roles that they're recruiting for. And so they are usually the master of multitasking, right? And flipping from, you know, one role to the next. So I feel like if you are receiving a very delayed response, it's always appropriate to follow up. I think the other thing that happens a lot of times to us is the hiring manager makes a decision outside the normal recruitment process, okay? This happens especially when inside referrals are made. So, you know, they have a friend that has a friend, and you know how that goes, right? And so where things kind of move a little faster on the inside. So, in that particular case, it's not so much that I think that they were ghosted. It's that they're just trying to figure out, you know,

now we have to pick up the pieces right? Now, we have to contact several physicians that have applied to this role, and that have been really good candidates. And hopefully, we'll be able to place them in a different role. But if not, we're gonna have to give, you know, give them a call and hopefully explain this situation, right? and be transparent about it. But in most cases, it probably happens via email, where they send you an email and say, you know, we're sorry, but unfortunately, you will not be moving along in the process. So I don't think it is so much about the candidate and their background, I think it's a lot to do with a lot of other factors that happen behind the scenes. I know that that's happened to me. And again, it's not something that we like, but sometimes we are guided in a different route. And now we have to go back and say something to our candidates, right? And again, it's not that they weren't a good fit, it's just that the hiring manager sometimes goes around our process. So I see that happen.

The other thing is sometimes, and this has happened to me more than once, but sometimes something unflattering is discovered when a physician is googled. Okay? So one of the things that I can't stress enough is be transparent in that initial call, right? Because we will Google you, we will do our due diligence, we will vet you, we will Google you. And if something comes up in your background, that gives us pause, that sometimes creates that step back. Right? Hopefully, we'll get back to you and we'll say and be honest. I had one in particular, that had something criminal in his background. He was actually tried and accused of murdering his wife.

HF: Oh, dear! That's a little bit of a hiccup there.

SM: So that was a mountain that there is no way we were going to be able to climb. And so to be perfectly honest, you know, I gave him a call and I was extremely transparent. And I said, This is what we found. We would not be

able to insure you, we would not be able to hire you, you would not be able to get through our background check. So I was it was a very uncomfortable conversation. But I think that he deserved to know why. And to be honest, I think you already probably knew that. Because he's being exposed.

HF: Yes. Well, I think you go above and beyond Syl as a recruiter and it's one of the reasons why I love you. You truly care about people, you are not just here to fill these slots, you care enough to call people and have these challenging conversations. And I know a lot of recruiters, you know, I know they're busy and all, like, they just won't respond. And you'll be wondering, you'll have no idea you might not even get a dear john letter, or you'll just like say what happened, you know, were they kidnapped by aliens?

SM: Yeah. And, you know, that's a terrible experience for a candidate, regardless of what role you apply to, right? I mean, nobody wants to not know why they weren't selected. Um, so I am a true believer, that feedback process, where we're actually able to bring some constructive feedback back to the candidate, because a couple things can occur, you know, we come back with some suggestions and how they can come back and be a better candidate. And some of the areas that they can improve, right?

HF: So helpful. Often they just want some feedback.

SM: Exactly, exactly. Or they just want to know, you know, what can I do to be a better candidate.

HF: Yes, yes. So this is great. This is, you know, you can see, guys, you know, how wonderful Syl is, why I'm such a fan of hers, why I wanted to bring her here for you. And I know, we're probably over time. But so let's see, is there anything else that you want to leave the listeners with in our last few minutes here?



SM: You know, I would just like to thank you for this wonderful opportunity to share my experience with your audience. What a rewarding career I have had and continue to have with an outstanding organization. My blessings are many, both personal and professional, I have met so many people in my journey that have touched my life in my heart. I would like to just take a moment to extend my services to any physician out there that would like to just explore the possibilities of life beyond patient care. I'm always happy to help, I'm always happy to, whether it be send a quick email, look at a resume, give some tips, or just make that connection on LinkedIn. So I wanted to offer that out there and I can be found on LinkedIn if there's anyone interested.

HF: That is so great. That's really wonderful. It's very generous and sharing all your expertise and your caring for physicians. What we'll do is in the show notes, I will link to Syl Marcus's LinkedIn profile so you can find her there. And I'm also going to have some links for you at:

www.doctorscrossing.com/recruiters101 . That's
www.doctorscrossing.com/recruiters101.

I'm going to have a lot of these tips that we've already talked about in the podcast, but some additional ones for you on finding and using a recruiter and having a great relationship here. Also, I'll be linking to my resume kit that Syl helped me with that you can get to convert your CV to a resume and it also has a cover letter section in there, too. Just so you can do that cover letter if you want to. You can find that as well on The Doctor's Crossing website. Alright guys, so want to give a big thank you to Syl again. I think she's fantastic. We got so much good information covered here for you and maybe we'll get up Syl back on the podcast down the road. And stay safe everybody. Don't forget to carpe that diem and bye for now.

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Podcast details

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