



## **EPISODE 70 A Great Job For Those Without Residency or a Medical License**

**With guest Dr. Maria Abunto**

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MA: “I didn't think that it was fair for a lot of these people who worked very hard and were trying to make a living, but yet they did not have the proper, not only healthcare, but the access to care and the means to provide healthcare to their families.”

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 non-clinical 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. You are listening to episode number 70. You're in for a treat today because we're talking about a wonderful physician that's open to international medical graduates and those without residency or license.

To me, this is such an important topic because I hear how discouraging it can be to want to use your medical degree, but feel that most of the available jobs are for others with a different background. While there actually are a lot of opportunities for those without a residency or license, it can take some time to learn about these options.

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Our delightful guest, Dr. Maria Abunto is going to open our eyes to the exciting opportunity of being a medical science liaison or MSL. Dr. Abunto received her medical degree from the University of the East in the Philippines and her MPH from the University of Pittsburgh.

Maria is going to share her story of how her strong commitment and persistence enabled her to break into this role of being an MSL and excel being granted the distinct honor of MSL of the year in 2021. She's also going to give us the insider scoop of what she does in this job she loves and how you can explore this direction if it sparks your interest. It is my absolute pleasure to welcome Dr. Maria Abunto to the podcast. Hey, hey. Hi, Maria. How are you?

MA: Hi, I'm doing good. How are you?

HF: I'm great. And I am so happy to have you here.

MA: Thank you for having me.

HF: Yes. And a huge congratulations on your MSL award. I can see it on the shelf behind you. You earned it.

MA: Thank you so much, Heather, and I really appreciate it. I really worked hard and also found that it was a great opportunity to really work hard and do the job that I loved the most.

HF: What I thought we'd do is change things up a little bit. Instead of hearing your story first, which is really great, I thought if you could give the listeners a high-level view of what it is to be an MSL so we can have some context when we're listening to you talk about the MSL.

MA: An MSL is one who holds clinical degrees in the life sciences such as an MD, Ph.D., or PharmD and has an extensive experience in medical research or clinical medicine. And now the doctorate degrees are standard and the MSL is employed by pharma, biotech, or medical device companies. For instance, I work at a biotech company that screens to detect cancer early.



HF: Yeah. What do you actually do in your role? If you could sort of give us an example of maybe what you do on a day to day basis?

MA: Sure. Yeah. I am considered the subject matter expert in oncology. And a typical day would be where I would be contacted by a provider through email or phone requesting some data or a presentation on our studies, our products. I also set up these meetings. So I could be traveling to a different state to meet with this KOL or this key opinion leader. And we discuss their needs, whether it be they're interested in research or they're interested in our data science, or if they're interested in a presentation to perhaps their fellows or residents.

HF: Now, when I was in practice, we had the drug reps that would come from the pharma companies and they were lovely people and they brought samples and they were engaging. But there was only a certain degree of information that they could share. If I had known about an MSL at that time, could that have been someone I was able to contact when I had some deeper level questions?

MA: Yes, absolutely. That's the primary function of an MSL is to educate on the science and advances in treatment of the drug or product. For instance, one example is a screening business unit for colorectal cancer. We educate also on the guidelines, the screening guidelines keep providers up to date, and also what's in our pipeline. That's another important conversation to have.

It's a continuous relationship that you develop with providers because questions will always be coming up, new products will be coming up, and these new guidelines also change. So that's where we are keeping physicians informed about what's out there, what's new and what's exciting.

HF: I think this is such a fascinating role and I wish I had known about it before. We're going to dive into more of the specifics about what you do and how you help the company and what your traveling is like and all the other good stuff. But before we go into further detail, I really want to have you share your story of how you got to this point, because that really wasn't what you were thinking of when you went to medical school, I presume.



MA: Yes. Yeah, you're absolutely correct. In medicine, you have this just clear path, this trajectory that is pretty much laid out for you and as an international medical graduate, that may be a difficult path coming from a foreign country to the US. You have to take not only the exams, but you also have to do some sort of externship. There are some barriers because you are an international medical graduate, but it's not the end and there are other opportunities.

My career path that I chose has changed because of opportunities that were given to me and posed itself. For example, when I did an externship here in the states, I did that for a couple of months. And after that externship, I was given an opportunity to lead a medical practice, family medicine as a medical director, and I was charged with building it out.

That was my opportunity to not only gain the experience, but also to see how practice is done here in the US. That really led from one thing to another, where I received an opportunity to go to graduate school, the University of Pittsburgh. That's where I think my trajectory did change. I had an opportunity to go back to school, get my master in public health. And then I went on to the NIH where I was able to conduct colorectal cancer research.

That's after having done that for about two years, that gave me an opportunity to also look in industry. I had learned about the MSL role while at the NIH. And then I was offered a position at a medical device company first focusing on stroke care. And that was a contract role.

HF: Now, when you were working at this practice where you were developing this clinic, what were you thinking of in terms of your career? Were you thinking at some point "I'm going to become clinical and see patients?" Did you have an idea about where it was going?

MA: Well, that is an excellent question because during that time it was super busy and I'd seen countless health disparities in the underserved population without any support for insurance and diseases being passed down from generation to generation. One day I had an epiphany at a health fair and I realized I didn't want to do this anymore, but really



focus on understanding what really is going on here. What's happening to these marginalized populations?

And that's really where I wanted to make that shift and to realize that I can still practice caring for patients and make a bigger impact. Really finding that understanding of why am I doing all of this and affecting populations on a greater level. And that's why I wanted to go back to school and get my master in public health because I identified these public health problems. But I also realized that solution starts with me.

And so that became my why. I had to reinvent myself. I realized that during this soul searching that I needed to invest in myself and public health was really what spoke to me most when I would see patients, when I would attend these health fairs and these meetings. I think that that was the biggest impact to me. It was "What is happening here? Why am I doing all of this?" I felt that all these health disparities solutions were really educating myself more.

HF: What did you actually see, Maria, that made you feel like "This is my why. I need to do something about these disparities?"

MA: Yeah. Like I said, I saw those families, especially the children, not having any healthcare or access to healthcare and seeing that these populations were marginalized and that domino effect downstream is being passed down from generation to generation. I didn't think that it was fair for a lot of these people who worked very hard and were trying to make a living, but yet they did not have the proper health, not only the healthcare, but the access to care and the means to provide healthcare to their families.

HF: I think you bring out a really important point here that it's important to find our "why". Why is something motivating us? Why is it tugging on our heartstrings? Because that connects us with our spirit and soul and can help us persevere when it's not that easy to forge a path.

MA: Absolutely. Yes. And isn't that why we all go into medicine in the first place? It's to really care for these patients who may not have much.

HF: I'll just bring in a little point here that you took the enneagram, which I talk about a lot and your top scores were in the helper, the type two, and the type nine, which is the peacemaker. Obviously helpers love to help people, but they also have a real gift for connecting one on one with others and having them really feel seen and heard. And the peacemakers are really great at looking at things from other people's perspective. So, you could really see that these families were suffering.

And we'll also talk a little bit about that when we get more into the details of the MSL, because I think it's a great fit for the work that you're doing currently and interacting with key opinion leaders and others.

One thing I'd like you to bring out is that this job did not just fall into your lap. Someone didn't just tell you, "Hey, there's an opening Maria. Apply to be an MSL." What did you have to do to make your way into this career that you love?

MA: Yeah. Heather, I think that is also a really important question to ask yourself. An introspection. Because I think being, not only an international medical graduate, but being a second-generation immigrant was very difficult for my family as well to start here in the US, but also for me to be given this opportunity. But it is not easy to go into medicine. Period.

But in academia is really where I found an opportunity to expand my network and really build those meaningful connections and relationships. This is not just in medical school, but even before med school. So it's the relationship building, the connections that I built along the way in college, and my mentors. That to me was really the beginning of how to become an MSL, it's to forge relationships and to maintain them. That's so important in life and in my job.

I think understanding yourself as well as the kind of person that you are, your personality, and how you function. I think that also putting those two together really helped me with opportunities because the mentors have helped me along the way. And in grad school, I had an awesome mentor that after graduation, he invited me to join his lab at the NIH. After graduation, one thing led to another. Also, when I was at the NIH, when I was researching this role, I joined the MSL society.

I had to find opportunities that would take me to the next step, but also throughout that research I was able to develop really good relationships with people in the industry, in the society, and in my circle to where you try to gather as much information as you can and make it work for you. Really 90% of the time is trying to look for opportunities, but making those opportunities and those relationships meaningful and people will just naturally help you and want you on their team or want you to succeed.

HF: Yeah. That's such a great point that you're making. It's networking and networking before you want something or need a job. Because like you said, even back in college, you were building relationships and it's something that's a big part of your job as an MSL and it's worked for you. I think that's a really good message.

Let's talk a little bit about the specifics of your job. One thing that I know scares people away from the MSL of it is that there's often a lot of traveling involved. Could you talk a little bit about what kind of travel is involved and a little bit more about what your days look like?

MA: Yeah. As I mentioned, the primary responsibility is really to maintain relationships with healthcare providers and also be that subject matter expert. And this can be done in person or virtual, but it's really more impactful when it's in person. There will be travel involved because your region, where you cover, is not just going to be your state that you live in. It will be in other states. The travel days are on average two to three days per week. And that can be by plane or by car and you are working around the healthcare provider's schedule.

The goal is really to be able to schedule those one-on-one meetings and to begin that engagement in scientific discussions. From those discussions, you'll find what their interests are. Are they interested in conducting a clinical trial or are they interested in just learning more about our studies? It depends.

HF: How do you get to talk to a busy physician who might be a key opinion leader and they have their practice and they don't know you. How do you use your type two personality to get in the door?



MA: I think that's where you become creative. And you think about how you build relationships with somebody you don't know. I always try to use a metaphor about dating, where for instance, you try to reach out, but you introduce yourself in a very professional way, but at the same time, you want to get to know the person.

You find some commonality or something interesting that you share, whether you've researched them on LinkedIn or their publications, or you've seen them on podium at a conference, maybe. Then that's when you start to reach out through email, phone, or in person. And you have just a simple introduction, kind of like a meeting where you don't want to reveal too much. But you just introduce yourself enough to spark their interest or to get their interest and gather information about what they want to hear? What do they like to talk about?

HF: I remember you saying, when we were talking before that you start with an appetizer, maybe it's coffee first and then you get to know each other, and then you could advance to lunch and then maybe dinner. Build up this relationship, like a meal, you work up to the happy meal. This job really is a good one for people who like other people and they're interacting.

MA: Yes, absolutely. It's about building relationships. You want to start off on a good note, and then set the stage for conversations later. Like we said, not only dating, but it's like a meal. You want to start out small and then have more to come later.

HF: Yeah. We're going to take a little pause here for a short message. And when we come back, I'd like to talk a little bit more about if someone's interested in this, what would be good for them to know about getting started and also about whether this could be a good fit for them? So, we'll be right back. Don't go away.

LinkedIn has been one of the most helpful resources for my clients in landing great jobs. Initially many of them were reluctant to put themselves out there and network on this platform. But once they created a profile and learned how to use LinkedIn strategically, they had a lot of success.

My LinkedIn for Physicians course shows you how to create your own standout profile, have success networking, and land nonclinical jobs. To learn more about this online

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course, go to [doctorscrossing.com/linkedin/course](https://doctorscrossing.com/linkedin/course) or simply visit the Doctor's Crossing website and hit the products tab at the top of the page. Now, back to our podcast.

All right, we're back here with Dr. Maria Abunto and we're going to be looking at when someone's interested in this position, what would make them a good fit? What are some good characteristics or even background for a future MSL?

MA: The MSL is not only about science and MSLs really have to be excellent communicators. And the soft skills are very important. Self-awareness, emotional intelligence. I think that that's equally important as the hard skills and you'll be taught a lot about the science, but it's really hard to teach the soft skills. I think that's really important, to have both.

HF: And I know we've been talking about that this could be great for someone who's an international medical graduate, someone who didn't do residency or have a license, but there definitely are physicians who have been in practice who do have a license, who are interested in this role. So we don't want to exclude them at all from this. I've had certain clients look into this role and I know that it's been a good fit. Sometimes the compensation can be a challenge for physicians who've been earning a pretty high salary. Are you able to give us some guidance on what the compensation is like?

MA: Yes, sure. The MSL society usually has an annual survey. And in 2021, they surveyed over 2,000 MSLs in 69 countries. In the US, last year, the MSL role, the salary was just over \$190,000. And that's just overall, with at least three years of experience. For managers, they actually get more than that, I think it can even be double. If you work your way up, it is still a six-figure salary.

HF: Yeah, that's excellent. And obviously, you're guiding us that there are advancement opportunities. This could be a way to get your foot in the door. How would you recommend someone who's curious about this job, start to learn more about it, and see if they could be a good fit?

MA: I would start with researching roles and if it's something that you think would be a good fit for you and your personality, travel is involved, so that may be a deal-breaker for some. But I think researching the role, but also knowing that there are other



opportunities to build your network. Like join the MSL society or join other medical affairs society and build your network and establish those connections.

And know that the MSL role is not just about the data and science, that you have to have also those soft skills. And there's training involved too. If you don't have a strong research background, there are courses that you can take such as Coursera. We can learn about the industry, but also those courses to take for aspiring MSLs through the medical science liaison society. And there's other societies too that offer training. But I highly recommend really educating yourself as much as you can about the role.

HF: We'll definitely make sure to link to some resources so people can find out about them, health society and some of these courses. We will do that in the show notes. If someone doesn't have any type of pharma background or clinical experience, like you mentioned, you said that's not a deal-breaker. I just want to make that clear. It's not a deal-breaker, no pharma experience. You had your MPH. You did a lot of research itself.

MA: Yes. For example, there are some companies who hire MSLs without experience. And on our team, we have some people who don't have MSL experience. It really is about having transferable skills that you can be able to relate to and speak on. I think it's also important to learn as much as you can about industry talk and not just knowing that we have a clinical background as a physician, that that's enough. There is more that really needs to be done, to be able to learn how to break in and become an MSL.

HF: Just to tie things back to earlier in the podcast when you were talking about your desire to help patients with access to equitable medical care, how do you feel about your work now? Just briefly because we're getting close to time here. It connects to your why that you originally started with.

MA: Yes, and I love that question, Heather, because I think what I'm doing now really ties back to my why. For example, I am an MSL for a medical device company detecting colorectal cancer, but I also am an MSL lead for health equity, the health equity side in our business. That really ties into my why is how can I help these people, these patients, and the customers such as our providers provide more than just a screening test to their patients? How can we provide more than just a tool? And that is adding to that in



education, but also offering some programs and initiatives that we have to help the larger community, especially underserved communities.

HF: I'm glad you shared that. I'm glad I asked. Because I really didn't know, honestly. Lovely. One final thing I'd like to end with is to have you tell the listeners how long it took you from when you first got the idea of being an MSL to landing that first job and maybe give anything you want to share about what that journey is like to encourage others who may feel like this is a daunting proposition.

MA: Yeah. It took me, I'd say at least, I'm trying to count, but when I first learned about it was in 2017 and I landed my first job in 2019. It's about two years, but I had been researching the role for quite some time. I also hired a career coach. Because I think that that was important to me to understand as a physician, is this going to be a good investment, a good return of investment for me and is this a right choice? And I hired a physician career coach. She has been coaching other physicians.

If that works for you, great. I think for me, I really needed to understand what I was getting myself into. And then she connected me to other physicians who have become MSLs. I think that it is important to learn about yourself, is this going to be for me? Is this something that I really want to shift from clinical to nonclinical? And so, I think I'm a living example that it is okay, that you don't have to have that structured academic path as a physician and that there are other opportunities for you.

HF: Beautiful. Well, I know this has been a really good fit for you and I know you worked hard for it. I'm glad you shared that it took a couple of years. Because I know when you're burnt out and you feel like you should have like gotten out of this like a long time ago, two years can sound like an eternity, but when it brings you to where you want to be, and you found like the I think the perfect job for you and you're continuing to grow and advance, it's worth it, whatever it takes. It's just part of life. You don't put your life on hold for two years, you still live your life. You're going to live those two years no matter what. You might as well go in a direction that's really working for you. It's a long-winded way of saying congratulations to you.

MA: Yeah. Thank you so much.



HF: Yes. Thanks again for being on the podcast, Maria. I really wish you all the best, and let's keep in touch.

MA: Yes. Thank you so much, Heather.

HF: Thank you. All right guys. I'm so glad we got to do this episode and I just want to leave you with this message of no matter what your circumstances are, there's always a way for it and a path. So have hope, find out what you need to know, there are always people to help you and don't forget to carpe that diem. I'll see you in the next episode. Bye for now.

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